

South City Health Eczema Project

Primary Care Improvement Facilitators Programme 2019
South City Health - Hamilton



HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND
Kupu Taurangi Hauora o Aotearoa



Who Are We ?

We are a Medical Centre called **South City Health**

- Our PHO is Pinnacle Midlands Health Network
- We have approximately 7,500 enrolled patients
- We cater for a whole range of ethnicities in the community approximately 18% of enrolled patients identify as Maori, Pacific and Asian



Our Improvement Team Is ...

Made up of:

Sponsor – Teresa Waitere

Project Lead – Michelle Madgwick

Registered Nurse Lead – Melissa Castillo

GP Lead – Dr Kate Sinclair



Problem Statement



Young Maori and Pacific New Zealanders have poorer access to effective management of their eczema resulting in more hospitalisations. We were unable to obtain local statistics but found that Starship Hospital state in their Eczema Guidelines that 15-20% of New Zealand children are affected by eczema. 15% of these children identify as Maori, 16% Pacific children and 10% are other ethnicities.

Morbidities associated eczema can create significant challenges that affect one's quality of life not only physically but also psychologically. Time off school and work for parents can result in significant gaps in education and place financial pressure on a young family. Examples the most common morbidities are outlined below;

- discomfort (itching and possibly pain due to the breakdown in skin integrity caused by scratching)
- flare ups resulting in an increasing risk of infection and systemic complications
- lack of sleep resulting in fatigue with the potential of possibly escalating and affecting mood/mental health
- time off daycare/school/work
- increased GP visits
- hospitalisations due to complications
- psychosocial impact potentially affecting one's self esteem that may result in mental anguish, frustration, isolation, anxiety, depression and bullying

We are aware that the NZ ministry of health have set a target that by 2021 a 25% reduction in the rate of hospitalisation for avoidable conditions such as dental conditions, respiratory conditions (bronchiolitis, pneumonia, asthma & wheeze), skin conditions (skin infections, dermatitis & eczema) and head injuries, for children aged 0-12 yrs with an interim target of 15% by 2019.

Aim Statement



Original aim statement:

Reduce unnecessary GP visits by 50% for patients with eczema aged between 0-5years old by March 2020

- Reduce POEM (patient oriented eczema measure) average score to equal to or less than 10 for children 0-18 years old with eczema by March 2020

Rationale: To improve eczema management by reducing eczema related morbidities/flare and preventable admission to hospital



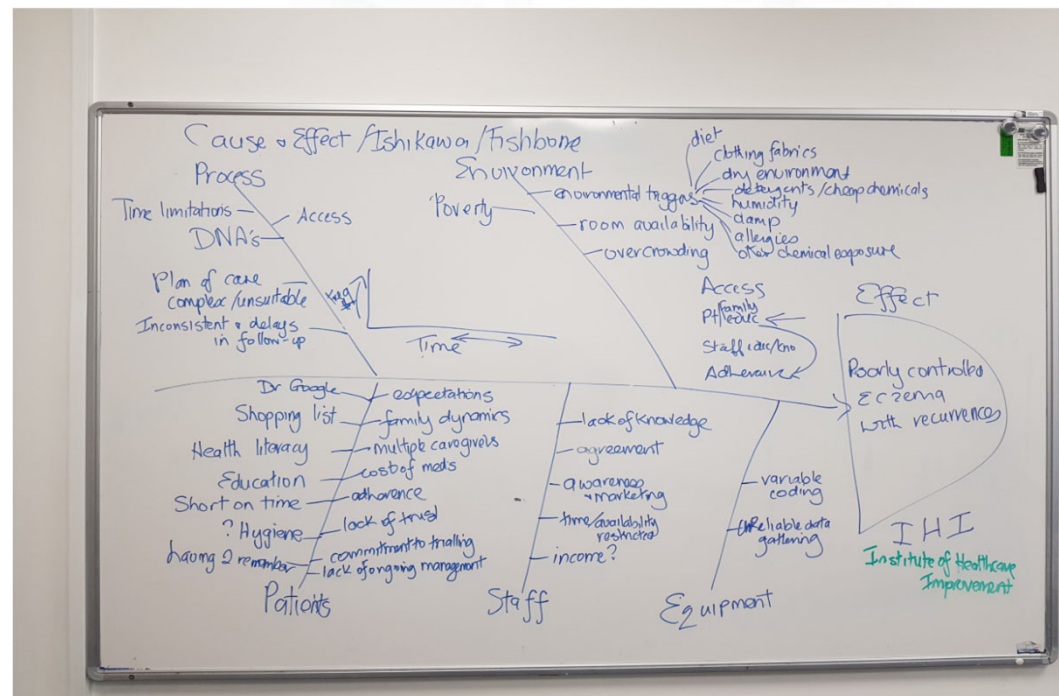
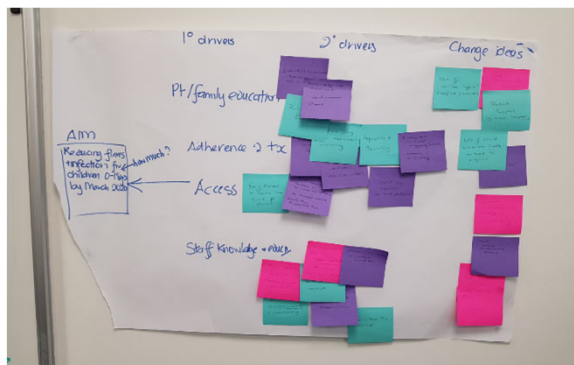
Diagnose the problem – data

By working closely with enrolled patients aged between 0-18yrs old who present to their GP with a flare of eczema (parental consent given) we can engage, support and monitor a patient's progress.

Along the way we will gain consumer feedback. Via this information collected we may be able to more clearly see what the challenges and barriers are and also by working together see how these can be overcome.

Tools used to help diagnose the problem

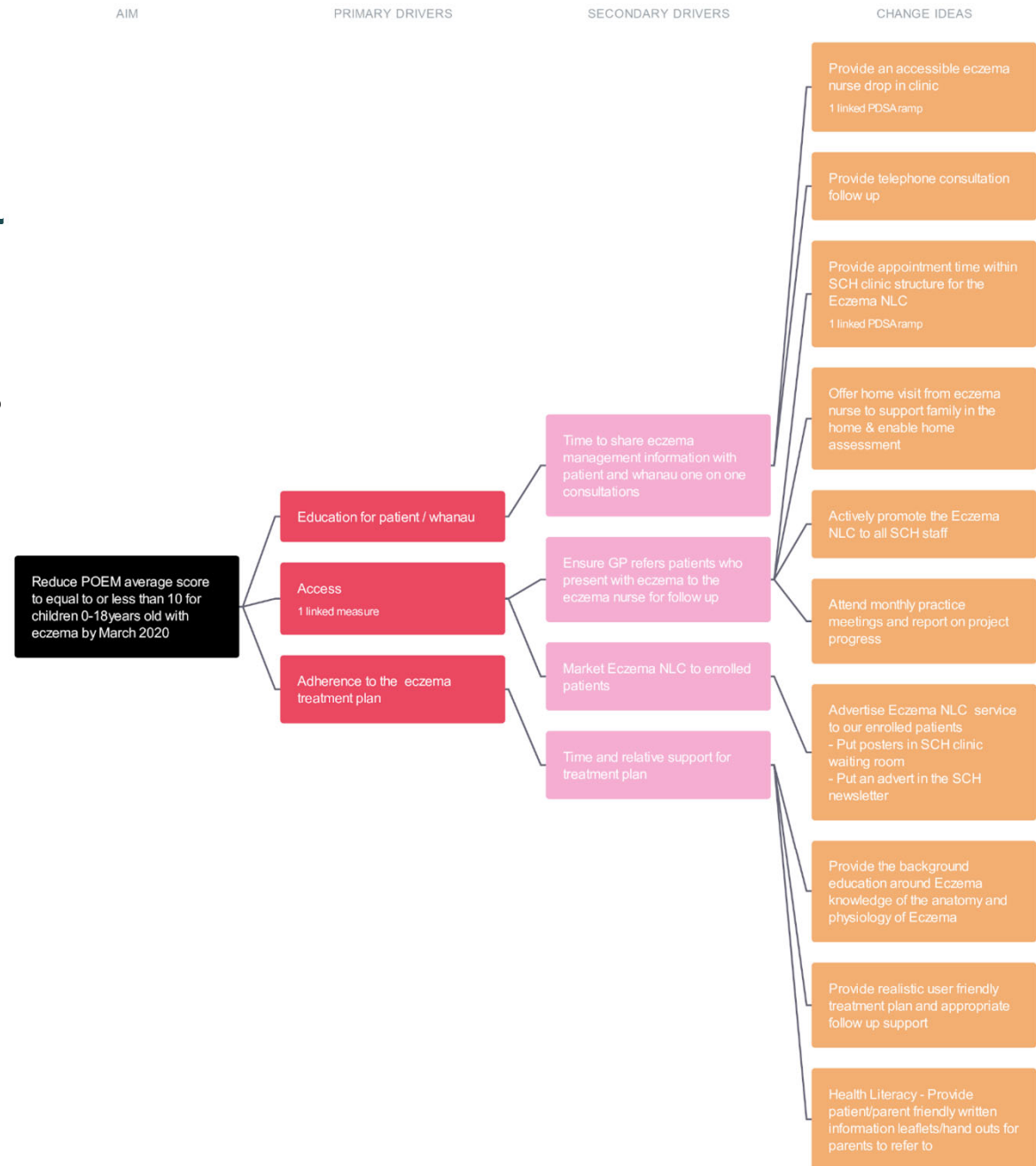
- 5 Whys
- Ishikawa



Driver Diagram

Our 3 Primary Drivers

- Education
- Access
- Adherence to the the treatment plan



Our Family of Measures

Outcome Measures

1. POEM (Patient Oriented Eczema Measure)
2. Consumer Satisfaction Survey

Process Measure

Access to Eczema NLC (Nurse Led Clinic)

Adherence to the eczema treatment plan

Review of patient experience and **Education** gained

Balancing Measure

Review the effect on Melissa's role within the clinic during the course of the project

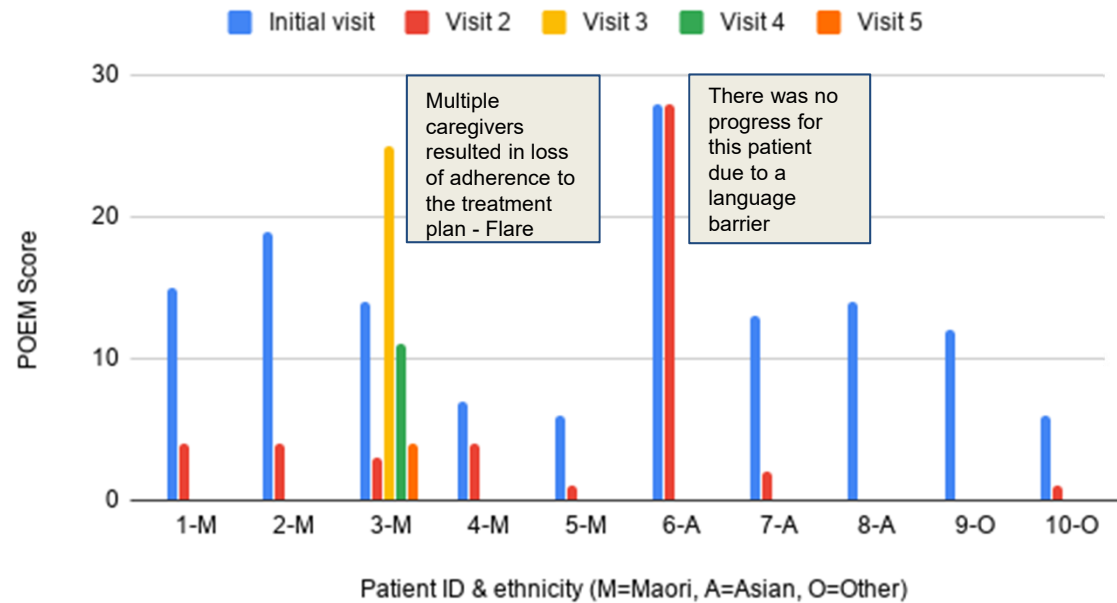
Eczema (skin condition)



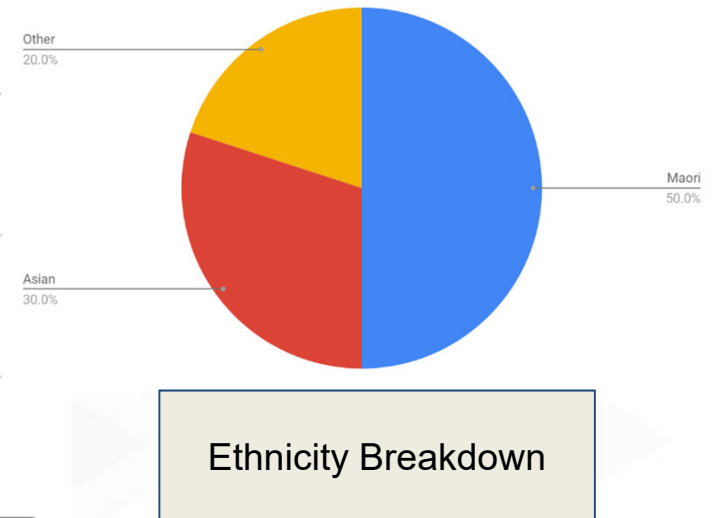
Outcome Measures:

1. POEM Adherence to the eczema treatment plan

Individual Patient POEM Score



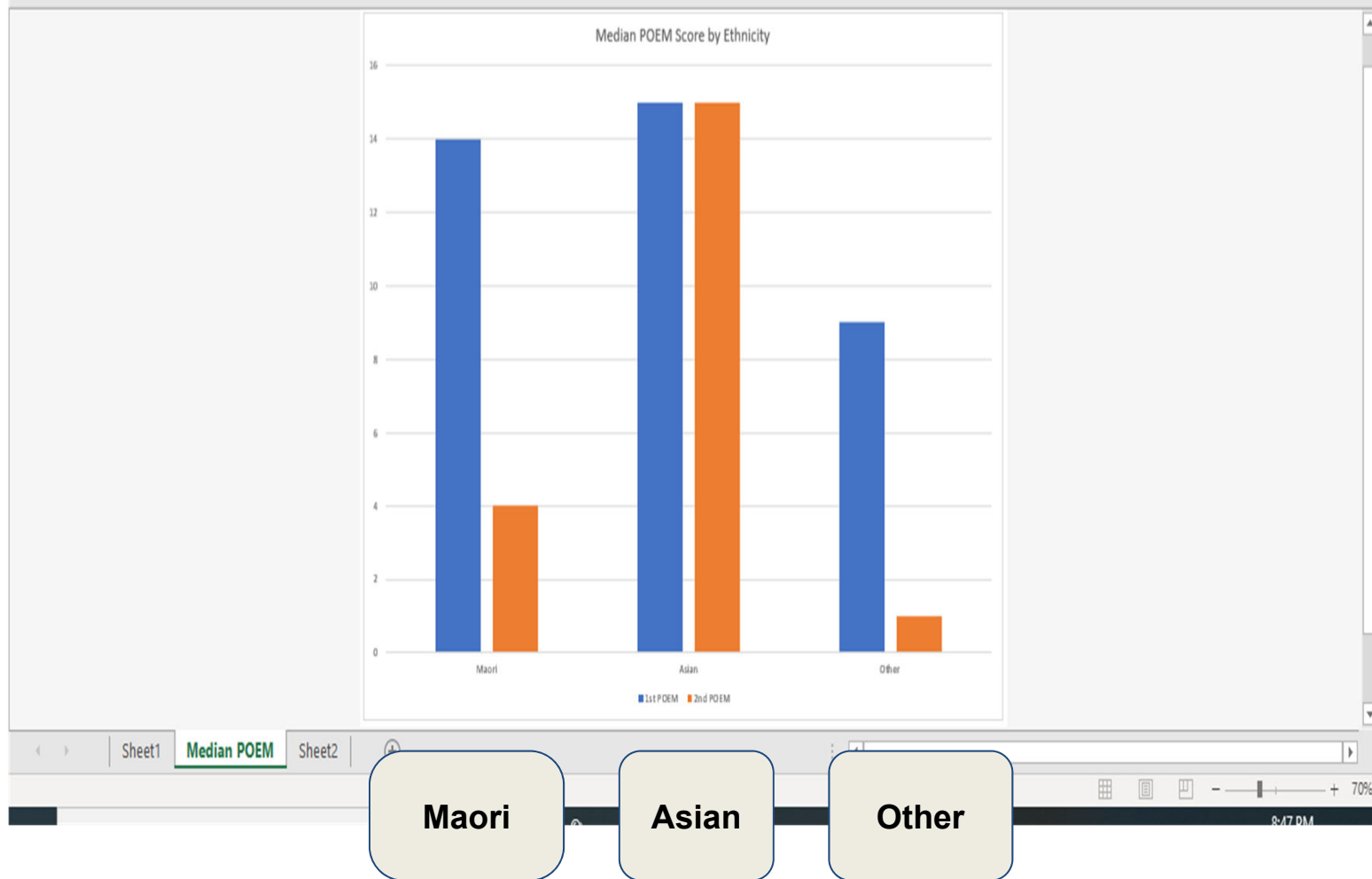
Points scored



Ethnicity Breakdown

Overall we can see in the bar graph above that patients skin condition has improved after engagement to nurse led eczema clinic.

Median POEM Score by Ethnicity 1st & 2nd visit



Outcome Measures:

2. Consumer Satisfaction Survey

“The voice of the consumer”

Melissa has developed a consumer feedback satisfaction survey in conjunction with the recommended survey guidelines.

This will be completed twice, once at the beginning of the engagement with the Eczema nurse and once at the end of the project. This valuable information from the patients and their whanau perspective's we will be able to help us to better understand our consumers experience, needs and therefore go onto meet their needs in the best possible way.

Warning! “Under Construction” Currently we are in the middle of collecting the end of project consumer surveys

To obtain valuable consumer feedback we went through a PDSA cycle.

In short what we gained from this was an understanding of what was the best way to engage with consumer to obtain their feedback. Along the way we;

- offered a support group for whanau this was abandoned as it was too difficult for whanau to come in
- offered to fill out the consumer feedback survey in clinic for some this was achievable therefore we had to adapt for others we adapted by doing a phone consult this worked well for some families

Capturing the Patients experience

10% had good knowledge about eczema

70% wanted to see a Nurse Led Eczema Clinic

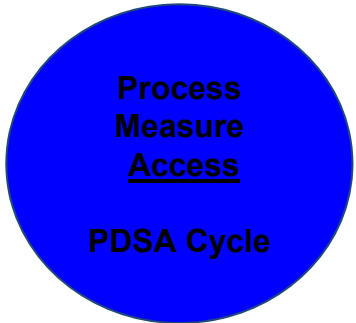
60% thought that seeing a nurse about their eczema after seeing the GP was a good idea

Warning! "Under Construction"
Currently we are in the middle
of collecting the end of project
consumer surveys

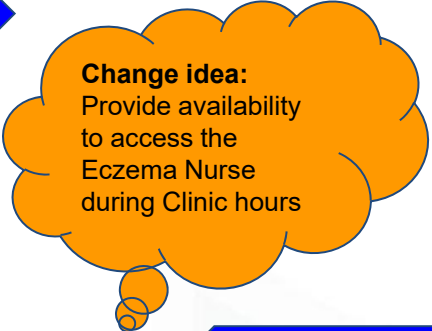


HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND
Kupu Inuanga! Hauora o Aotearoa

KO AWATEA
HEALTH SYSTEM INNOVATION AND IMPROVEMENT



Objective: To actively promote the Eczema Nurse Led Clinic (NLC) to all staff at South City Health (SCH)

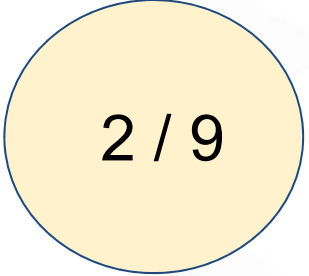


Prediction: That there will be a high level of the amount of referrals to the Eczema NLC

Process Measures: Data collection via MedTech query build count the amount of patients seen coded under Atopic Dermatitis/Eczema of these how many were referred to see the Eczema Nurse



Launch project at SCH team meeting explain role of Eczema NLC & how to refer



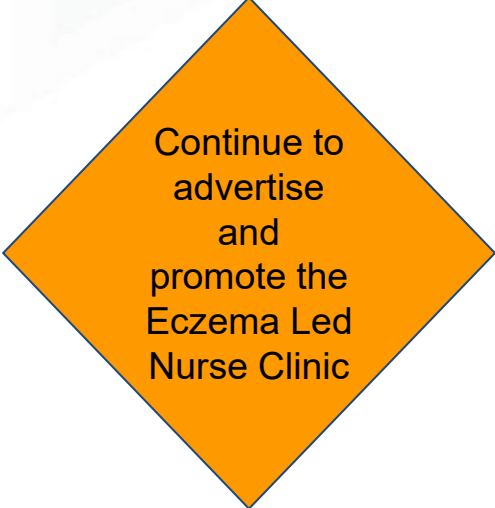
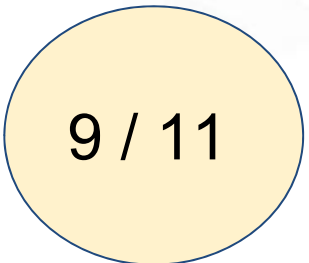
Remeasure: Repeat query build as above



- *Send a memo to all staff promoting the NLC
- *Put posters up in the staff room advertising the NLC
- *Put information about the project in the staff room
- *Attend & promote NLC at monthly practice meetings

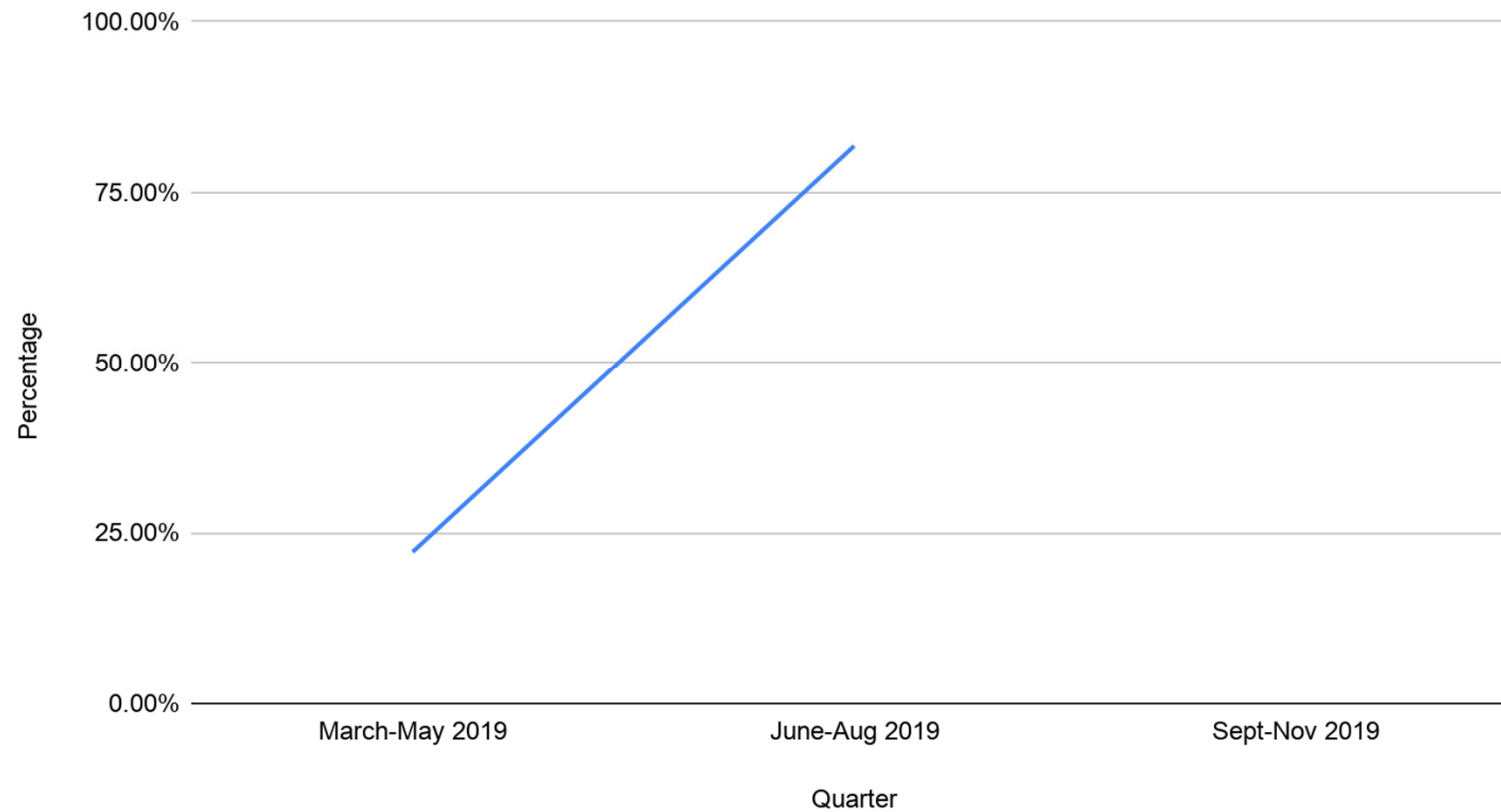


The following Monday a memo was sent out to all staff, posters were added to the staff room and Melissa & I attended the next scheduled practice meeting



Access to Nurse Led Eczema Clinic

Percentage of presenting eczema patient referred to Nurse-led clinic



Balancing Measure:

Effect on Melissa's Role during the course of the project

★ Time management

★ Sometimes the need arose to consult with patients on her scheduled break time



Stakeholder communication plan

- Online group chat
- Posters in our staff room (especially the ones on the fridge door)
- Promo posters in the patient waiting room advertising eczema NLC
- Advert in Medical Center newsletter
- Fortnightly meetings between project lead & nurse led
- Memo's to all staff
- Attend and promoted at monthly practice meetings

The traffic light Version of our Change Ideas

Abandon

Adapt

Adopt



- Provide availability to access the eczema nurse during clinic operating hours.
- Provide telephone consultation follow up.
- Provide appointment time with the eczema nurse within the structure of the usual clinic hours.
- Offer home visits from the eczema nurse to support the family and enable home assessment.
- Actively promote the eczema nurse to all the staff at South City Health (SCH).
- Attend monthly practice meetings and report back the projects progress.
- Advertise the eczema NLC (nurse led clinic) to our enrolled patients. Poster in SCH clinic waiting room & put and advert in the SCH newsletter.
- Provide the background education around eczema knowledge of the anatomy and physiology of eczema to patients and their whanau.
- Provide a realistic user friendly treatment plan and the appropriate follow up support.
- Health literacy - Provide patient/whanau friendly written information leaflets/handouts for patients and parents to refer to.
- Free sample creams to trial.



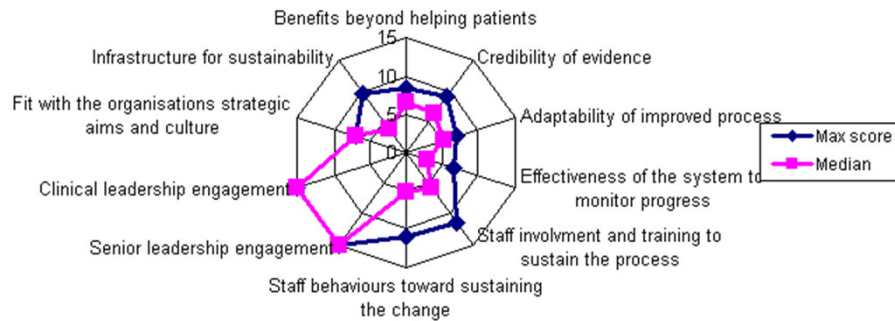
HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND
Kupu Inuanga! Hauora o Aotearoa

IO AWATEA
HEALTH SYSTEM INNOVATION AND IMPROVEMENT

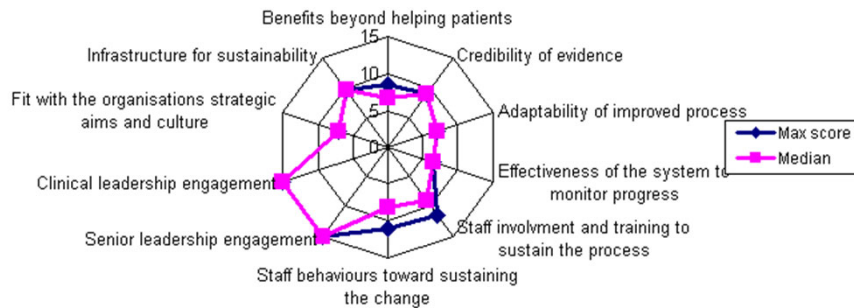
Stakeholders Analysis

Date Completed: March & August 2019

Radar Chart April 2019



Radar Chart August 2019



Key Success & Barriers

Success

- ★ The increase in referral rates
- ★ The POEM score improvements resulting in health gains
- ★ Offering a free nurse led clinic that includes ongoing support
- ★ The stakeholder commitment

Barriers

- Time constraints for families
- Language barriers
- Multiple caregivers impacting on the ability to stick to the treatment plan
- Cost if a charge was instituted to see the Eczema Nurse

Lessons Learned

- Inability in obtaining health statistics to substantiate anecdotal knowledge
- Difficulties in getting protected time to dedicate to the project as we are working in a busy primary health care setting
- Many IT challenges encountered along the way
- Patient contact
 - frequency of presentation
 - then once engaged time constraints around maintaining continuity of care
- The importance of friendship

