

# Improving Wellbeing for 0-4 year old Maori Children enrolled with Hauora Heretaunga suffering physically and emotionally with Eczema.

Primary Care Improvement Facilitators  
Rachel Pere  
February 2019



HEALTH QUALITY & SAFETY  
COMMISSION NEW ZEALAND  
*Kopu Taurangi Hauora o Aotearoa*

**KO AWATEA**  
HEALTH SYSTEM INNOVATION AND IMPROVEMENT

# Improvement Facilitator

Kia Ora koutou

Ko Rachel Pere toku ingoa. I have come over to work as the improvement facilitator in this project along with my colleagues from the Medical Centre although my role in the clinic is the Dental Team Leader.

## Background/Context

- Hauora Heretaunga is a GP practice with 6100 enrolled patients 90% of which are of Maori or Pacific Island descent. Hauora Heretaunga has 53% more high needs compared to other HB GP Practices.
- Comparing eczema related discharges per 1000 enrolled population between 2016 -2018 between other practices in locality Hauora Heretaunga is consistently higher. It is not uncommon for eczema to be referred by our GPs or Nurse Practitioner where infected flairs are out of control.



# Improvement Team

- Myself Rachel Pere (Improvement Facilitator)
- Julia Ebbett (General Manager Hauora Heretaunga and project sponsor)
- Helen Gosman ( Nurse Practitioner)
- Davina Te Ngahue (Nurse)

# Problem Statement

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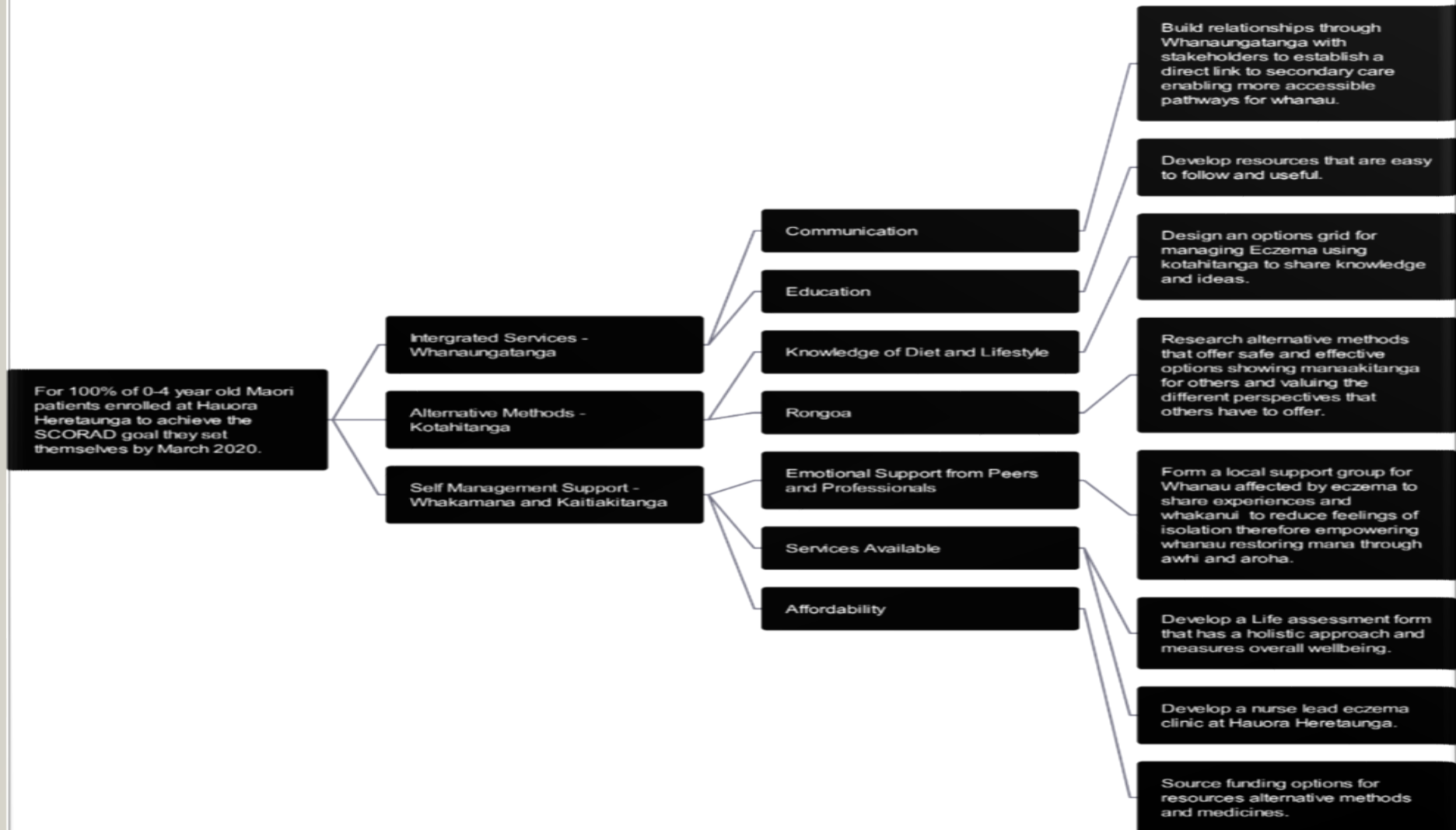
- Acute skin infections and eczema in 0-4 year old Maori children in Hauora Heretaunga, influenced by a lack of self-management support and access to preventative interventions is resulting in preventable presentations to the GP practice and ED.

# Aim Statement

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- For 100% of 0-4 year old Maori patients with eczema enrolled at Hauora Heretaunga to achieve the Flinders Partnership goal they have set themselves by March 2020.

# Driver Diagram



## Diagnose the problem – data

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To help diagnose the problem we held a consumer focus group. We invited whanau suffering with eczema to come and share with us the things that worked for them in regards to managing eczema with their little ones and what didn't work so well for them. They were given an open sheet of paper so they were able to express their thoughts and experiences freely. This worked very well.

It enabled us to see what they had written and then explore with them further.

After this session we went away and started to develop some change ideas we thought would be able to support them in their self-management of eczema.

Once we had done this we invited them back to reaffirm that we had heard their voices and were on the right track to together developing something that would help them.

We continue to work with consumers throughout the journey.



What worked  
 - natural cream  
 - aromatherapy cream

Triggers  
 - Shampoos  
 - Dairy food  
 - wool

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what didn't  
 - steroid cream  
 - the anti-cream Aquarrest  
 - hydrocortisone  
 - hydrocortisone  
 - hydrocortisone

Emotions  
 - Ears  
 - Being envolved with just one doctor  
 - They're your history family  
 - Disfranchised that you don't have to explain your visits this and the again

Doctors visits  
 - visits were great but of times frustrating  
 - Everything was explained, given what I asked for the time any judgement

My thoughts about doctor visits before I know when I had my son are very clear  
 - In the long run were between doctors as we moved around I was in those about 3-4 times a week at the time  
 - I was at the time and the more worked up in the system

you tried to feel about information was open thoughts  
 - was shown physically how to apply cream (follow)  
 - I had to much information from so many doctors that it then went to waste

What worked

Eczema nurse specialist - know layer avoid  
 - being advice of alternative options - ideas  
 - going to Seneca to swim in ocean daily  
 - bath in coconut & leav from spruce tree  
 - natural player healing  
 - Be good to have a routine - know the right way  
 - Next Using herbs for long time  
 - Sometimes I with at a time

What didn't work

One box took all - mainstream system  
 - no alternative suggestions  
 - Feel like in history a brick wall I see the Pediatric & tell her what happens and get no plan or feedback or suggestions for alternative approach  
 - "lack of being in the system - attending opt's than no suggestions; resources to guide to alternatives  
 - I feel like "why should I attend an appointment if it's a waste of my time"

Used more options other than mainstream

"the self esteem down now"

It's funny about Childs constant health be to embarrassed to wear T shirts in summer -> bullying has become quiet withdrawn & is quiet or silent now - Mom has had to have meetings with teachers

Build resilience in Child

Tom  
 0126776517

eczema

How I learn?  
 - Question & being clear how well to apply

Triggers  
 - Grass (moss) / sugar / pollen  
 - Pesticides / herbicides / dyes  
 - Sponges  
 - Dyes  
 - Cats / dogs - dander

Cleaning products (avoid)  
 - Fly spray  
 - perfume  
 - Certain preservatives  
 - Certain metals - aluminum - nickel

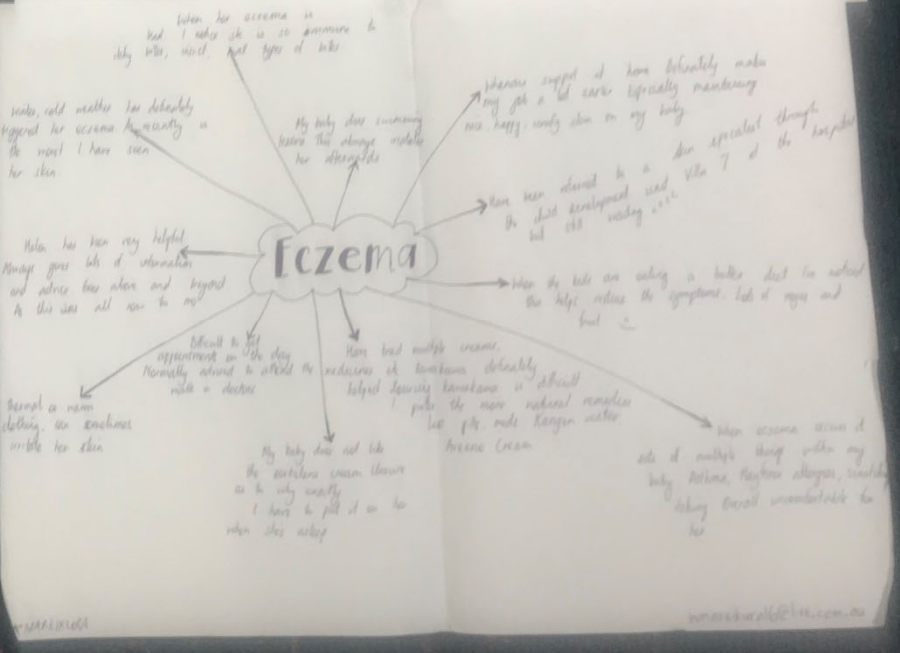
Flora of skin  
 - Different essential oils - young living (apricot) mixed with  
 - + antibiotics  
 - + natural look - natural skin, but a large amount to last possible food  
 - + herbs - patch  
 - + herbs - patch of  
 - + herbs - strong pts

Remedies

What was helpful?  
 - Explaining that the body doesn't produce  
 - or what medicine to regularly using instead help to protect you!

To learn from this

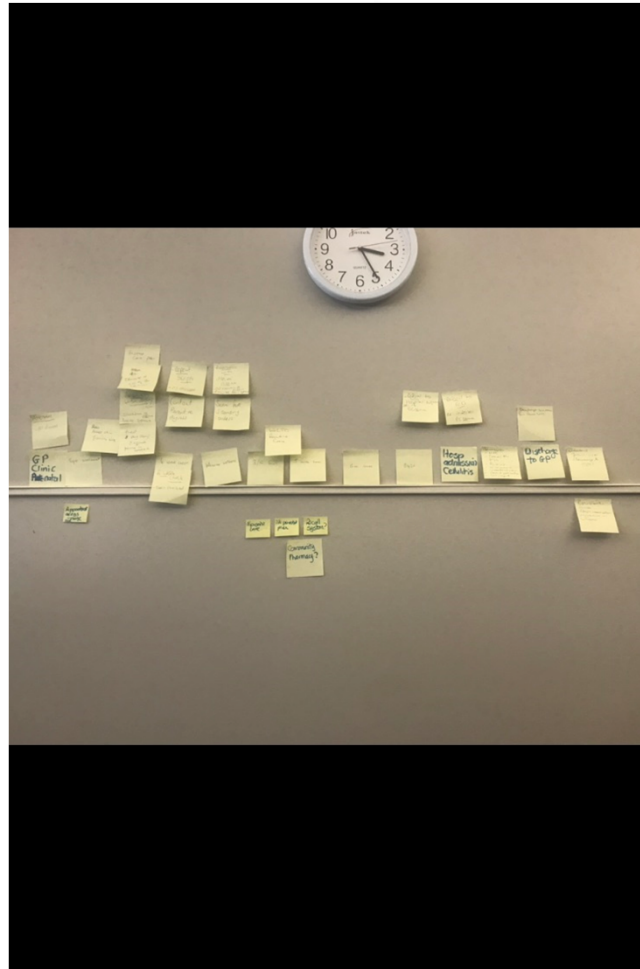
<p>Specific          - when these things used          - check - make up of          - when more of these things          - feeling of something on skin          - feeling that it's patchy          - patchy - not even          - skin be so it's more severe</p>	<p>body          - the weaker property          - feeling - feeling - feeling          - scratching</p>
<p>general          - to encourage people eating          - healthy, not eating or          - ingesting product used          - patch to feeling of burning          - more etc.</p>	



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# Diagnose the problem- tools



# Capturing the Patient Experience

- “Coming in to see Helen was very helpful she explained to me how to use the steroid cream properly, I was too scared as I had listened to the opinions of others so when I listened to her explain it to me it made sense and I am now using it on my baby and it is really helping. She also gave me a handout to refer to if I forget or had any other queries. She made me feel comfortable enough to ask questions without being embarrassed. When I call the clinic I ask to speak with her as she knows my story.”

# Voice of the Customer

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- So far into the project one thing has been common and that is that they have appreciated dealing with one practitioner in regards to their eczema. It makes them feel listened to and they build a relationship with that person in which they feel comfortable and open in consultations. It saves them having to repeat their story numerous times.

# Stakeholders & Communication

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- We are currently holding meetings with consumers and stakeholders to communicate and track progress.

# Dashboard of Measurements

Provide details of your

- Outcome Measure

Percentage of Maori 0-4 year olds enrolled with Hauora Heretaunga that achieved the Flinders Partnership goals they set themselves by March 2020.

- Process Measures
  - Measuring the average score of patients that have used the SCORAD assessment form 2 weekly.
  - Measuring the presentations to GP or ED with eczema flare monthly
  - Measuring the steroids prescribed monthly
- Balancing Measures
  - Nurse time lost in regards to having booked patients into clinic and they havent arrived. The time measured is time they could have seen other patients.

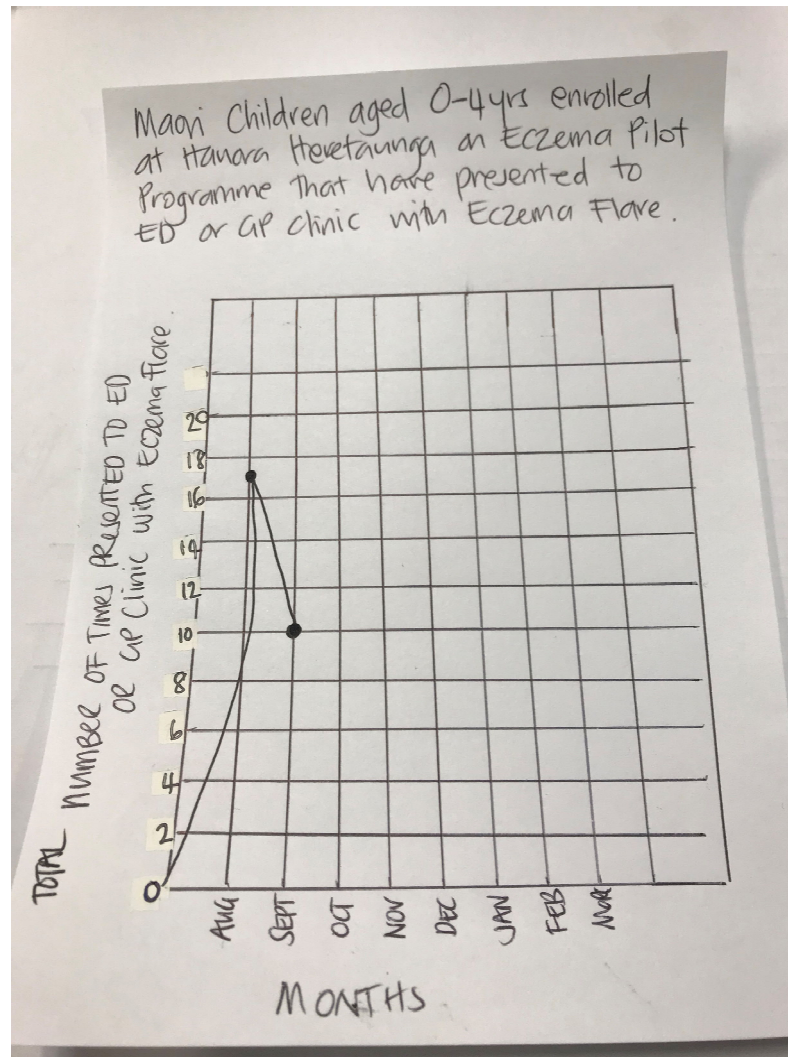
# What are you currently testing?

Theory of change (Secondary Drivers)	Ideas Tested (Provide details of your of your PDSA's, include your measures questions, predictions)	Evidence of Improvement (Include your data, charts and learning)
Knowledge	Flinders Partnership Assessment form to assess and set goals to improve lack of self-management support causing acute presentations to GP and ED.	
	Whether this tool will improve the lack of self-management support.	
	Our prediction is that it will identify areas in which self-management support is needed which may lead to the implementation of other change ideas.	
	This will be measured on a number score meter. The nurse will make contact every two weeks to follow-up and report.	





# Data - Run charts





# Highlights/lowlights

- Highlight being able to see whanau come in and be excited about the new ideas.
- Finally starting to understand the tools and concepts and then being able to use them.

# Key Success/barriers

- This has been a very slow time for the project. Time barriers and staffing issues have placed strain on getting the work started and going. Although we have started we are hoping to have a run in the months to come.
- Data measurements have been hard due to actual change idea only being implemented two weeks ago.
- Successes have been that with the small group we are working with we have already had tremendous success and this we know will filter through the whanau.

# Lessons Learned

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- Set aside dedicated time and do not book over.
- Meet more regularly to communicate and touch base formally.
- Do not procrastinate