

Annual Report 2021

Hauora Matua Ki Te Tonga



Where we operate

CENTRAL OTAGO

Alexandra Family Medical Centre
Cromwell Family Practice
Cromwell Medical Centre
HealthCentral
Junction Health
Ranfurly Medical Centre
Roxburgh Medical Centre

CLUTHA

Catlins Medical Centre
Clutha Health First General Practice
Tuapeka Community Health
Milton Health Centre
West Otago Health

DUNEDIN

Albany Street Medical Centre
(Dr Hamilton, Dr Buchanan, Dr Horner)
Amity Health Centre
Aurora Health Centre
Broadway Medical Centre
Community Support Medical Centre
Dunedin Health Centre
Dunedin North Medical Centre
Dunedin South Medical Centre
East Otago Health
Gardens Medical Centre
Gordon Road Medical Centre
Green Island Family Health Care
Green Island Medical Centre
Harbour Health Port Chalmers
Helensburgh Medical Centre
Māori Hill Clinic
Meridian Medical Centre

Mornington Health Centre
Mosgiel Health Centre
Musselburgh Medical Centre
Otago Peninsula Medical Centre
Outram Medical Centre
Pitt Street Medical
Portsea Medical Practice
Roslyn Health Centre
Servants Health Centre
Te Kāika Caversham
Waverley Health

INVERCARGILL

Bester McKay Family Doctors
Catherine Street Medical Centre
MonARC Health
Murihiku Medical Services
Gaius Family Health
Glengarry Medical Centre
He Puna Waiora Wellness Centre
Invercargill Medical Centre
Queens Park General Practice
South City Medical Centre
Victoria Avenue Medical Centre
Waihopai Health Services
Waikiwi Medical Centre
Vercoe Brown and Associates

QUEENSTOWN LAKES

Aspiring Medical Centre
Mountain Lakes Medical
Queenstown Medical Centre
Wakatipu Medical Centre
Wanaka Medical Centre

SOUTHLAND/GORE

Bluff Community Medical Trust
Fiordland Medical Centre
Gore Health Centre
Gore Medical Centre
Lumsden Medical Centre
Mataura Medical Centre
Otautau Health Centre
Riverton Medical Centre
Tuatapere Medical Centre
Winton Medical Services

WAITAKI/NORTH OTAGO

Central Medical Oamaru
Kurow Medical Centre
North End Health Centre
Oamaru Doctors
South Hill Medical LP
Whitestone Family Practice

MĀORI AND PACIFIC PROVIDERS

Arai Te Uru Whare Hauora
Aukaha
Awarua Whānau Services
Fale Pasifika o Aoraki
Hokonui Rūnanga Health and Social Services Trust
Ngā Kete Mātauranga Pounamu Charitable Trust
Pacific Island Advisory and Cultural Trust
Pacific Trust Otago
Te Hou Ora Whānau Services
Te Roopu Tautoko Ki Te Tonga
Tokomairiro Waiora Incorporated
Uruuruwhenua Health Inc
Waihōpai Rūnaka Inc.

81

General Practices, spread from Kurow and Twizel in the north to Bluff in the South

21

Nurse Practitioners

329

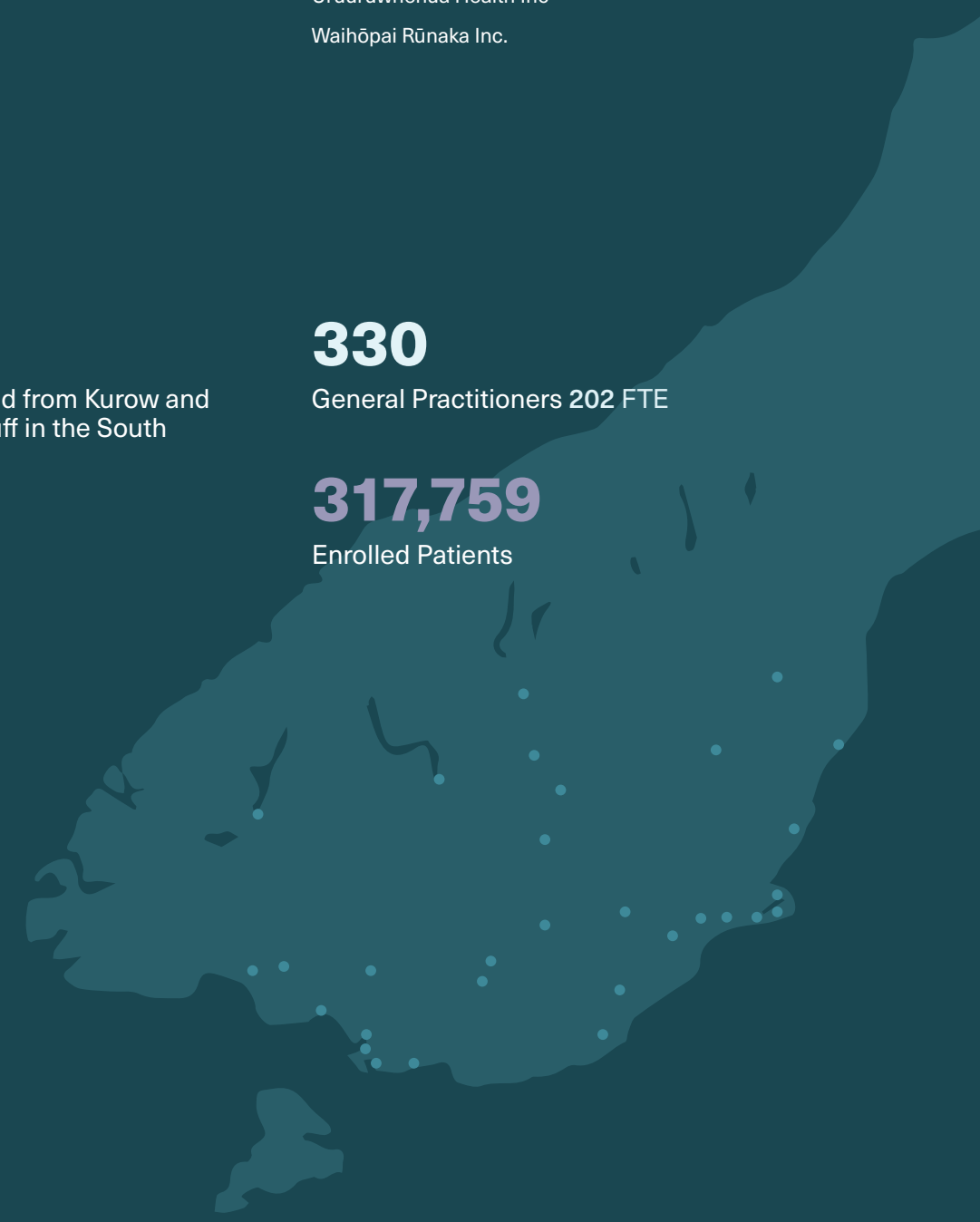
Nurses **180 FTE**

330

General Practitioners **202 FTE**

317,759

Enrolled Patients



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Chairman's Report



I'm pleased to present WellSouth's Annual Report 2020/21.

WellSouth Primary Health Network aims to support Primary Care to care for patients, improve access to care and health outcomes, and encourage healthy environments. Our results this year indicate we are staying true to this aim.

There is a significant amount to celebrate in 2020/21. We have continued to see considerable growth in the practice network in spite of the ongoing challenges of lockdown and added pressure of providing Covid-19 swabbing and delivering vaccinations.

General practices in Otago and Southland have again this year shown strength and resiliency in dealing with Covid while continuing to deliver routine and urgent care for patients. Thank you for all your hard work and dedication in these uncertain times. As vaccination coverage grows, we will be able to shift our focus back to providing and improving primary care services for the communities we serve.

Equity

Our board's consistent focus is on equity. We are working together with iwi, hapū, whānau, Māori health providers and communities to achieve equitable health outcomes for Māori. On March 15th, we renewed our partnership with Papatipu Rūnaka through the signing of a principles of relationship document at Ōtākou Marae. Later in the year, we announced our 50/50 partnership with Southern runaka/rūnanga, to support unenrolled patients in Invercargill to have improved access to primary care.

Disparity is not acceptable, and our board will only support activities and programme development that, from the outset, have an equity focus.

Supporting Change

We have worked hard to improve primary health services this year and this is reflected in the planned deficit, which funded additional services delivered through and with the practice network.

We're supporting changes that matter. Among these is the Access and Choice programme. It is truly a health service that lives up to the ideal - best for patients, best for clinician and best for the health system. The most important thing is that it helps patients and whānau. But we can't ignore the benefits for practices and other services – free and immediate well-being and mental health support means better overall health for our patients, in some cases reducing referrals to other services, including brief intervention services. It is also helping to destigmatise mental health services in general.

Primary and Community Care Strategy

This is the kind of success story that we expected when the Primary and Community Care Strategy was signed in 2018.

Like most everything in health services, Covid has impacted planned progress on the implementation of this strategy. However, we are committed to working with our partners and moving forward with the strategy, ensuring services are provided where and how it's most suitable.

Health Reforms

Many goals and aims of the strategy dovetail well with the proposed health system reforms unveiled in April. Like most, I was surprised by the extent of change announced. And while I have been in health care long enough to have heard promises of wholesale change before, I am optimistic about the possible opportunities for primary care. These include potential for better resourcing, funding models that reflect current realities, autonomy, and true integration of services.

In particular, I see real potential in Southern for the introduction of locality networks for delivering services that meet the needs of the local population.

As we go through these changes I remain confident that whatever is happening around us, our Primary Care teams will continue to provide the highest standard of healthcare and will continue to be supported by our remarkable team at WellSouth.

Ngā mihi nui,

Dr Doug Hill
Chair



Thank you for all your hard work and dedication in these uncertain times.



Chief Executive's Report

So much has happened with WellSouth and in health services in our fiscal year 2020/21, it's hard to believe it's only been 12 months. This is certainly one for the history books.

For WellSouth, it has been a year of progress and growth, of responding to the needs of our practice network and the patients and communities we serve together.

In-house, we have introduced a number of system improvements – financial, people and culture, and information systems - that help to improve operations and ensure accountability, transparency and effectiveness. Renovated office space in Ōtepoti is also benefiting staff and service delivery.

Covid-19

Covid, of course, continued to be a dominant feature for us, in particular the vaccination programme which in this region began at the end of the third quarter when border workers and their whānau received the Covid-19 vaccine. This was followed quickly by health care workers, older citizens and, from there, the wider population.

I can not say *thank you* enough to general practice teams and our own staff for your role in delivering the vaccine – playing a central role in helping to make Southern a leader in the roll-out of this vital programme. Practices – more than 80% of our network participated and you were pioneers in a distributed model for delivering the Covid-19 vaccine, ensuring accessibility and equity across the whole of Otago and Southland.

Access and Choice

Our Access and Choice (A+C) programme – in which well-being support is provided in primary care – was launched in August at six practices. In the months since it has flourished, delivering care in more and more areas and to more and more clients. The programme in this region is held up as an example of excellence.

This is in no small part because practices and clinicians have been so willing to embrace the model of care, making the team a true part of their own service. I have had GPs tell me they don't know how they managed before the A+C team and describe it as an absolute game-changer.

The programme's success is attributable to the best staff, to excellent training, and to the planning that went on in advance. This ensured general practices with the highest Māori, Pacific, high-needs and youth populations were the first to host the A + C teams. Supporting those who need the help most continues to guide this programme.

Health Care Home

Health Care Home enjoyed another year of growth and success. Ten new practices brought 55,000 patients into HCH. Twenty-four practices are now underway, with an enrolled population of nearly 175,000, covering 55% of all Southern patients, 56% of Māori, and 65% of Pasifika patients. An additional five practices started HCH on 1 July 2021.

It is a transformative programme benefiting practices and patients and it enhances the whole of the health system by improving efficiency and delivery of care.

The Future

In addition to the roll out of the Covid-19 vaccine, 2021 will be remembered as the year that once-in-a-generation health system reforms were unveiled in Aotearoa. Primary and community care providers will be organised into locality networks, services commissioned by Health NZ, and the new (and long-overdue) Māori Health Authority.

Planning for the new system is moving ahead quickly and while we don't know exactly what the new world order will be, we do know there will be a place for organisations that collaborate and have connections with other community agencies.

I happen to believe this is a strength for WellSouth and the network of practices. As I've said more than once, I want WellSouth to be part of the vanguard of change.

Looking back, I see we have made steady progress in many areas over the past twelve months, and I start the new financial year with a very optimistic outlook because of the strength of general practice teams and WellSouth's own staff. My sincere thanks to everyone – and there are many – that made a contribution to the programmes and services detailed in the pages that follow. I am very proud to be part of your team.

Kia kaha!

Ngā mihi nui,



Andrew Swanson-Dobbs
Chief Executive



My sincere thanks to everyone – and there are many – that made a contribution to the programmes and services detailed in the pages that follow. I am very proud to be part of your team.



PEOPLE & CULTURE

Our people are the heart of our organisation, so looking after our staff and making WellSouth the very best place to work are priorities for our organisation. Substantive initiatives have been implemented this year to help ensure we continue to improve and support our teams across the district. Knowing what steps to take starts with listening.

STAFF SURVEY

Our annual staff engagement survey provides important guidance, giving us insight into what we are doing well and where we can improve. Areas where staff highly-rated our performance include:

- Communications between senior leaders and employees are open and honest, and individuals' contributions to WellSouth are recognised by managers.
- Staff believe the work they do at WellSouth positively impacts people's lives and most give their best efforts at work every day.
- As a team we adapt quickly and efficiently to difficult situations and we treat each other with respect.
- Being given their birthday day off as a gift, a \$100 annual Wellness voucher and having free access to sanitary products while at work have been highly praised.
- An increased focus of tikanga and te reo Māori.

Among areas where staff indicated they'd like to see improvements, are:

- More professional development opportunities as well as career advancements pathways.
- Continued transparency around pay scales and pay equity.
- More recognition of employee contribution.

We are taking steps to action improvements in these areas, and better communications within teams and across the organisation will underlie our work in all these areas.

BETTER PROCESSES

The financial year 2021 was also characterised by many process improvements and system upgrades.

A new human resources information system, BambooHR, improves processes, provides clarity, replicability and certainty. BambooHR supports recruitment, onboarding and off-boarding – and everything in between. We have been able to add fields that are important for us to track: gender diversity, ethnicity including iwi affiliations, Covid vaccination status, Covid specific roles to assist in any quick community responses and much more.

The People and Culture team took over payroll, and with the support of the CFO, we have been able to streamline the process.



REMUNERATION AND BENEFITS

This year we introduced SP10 job evaluation methodology to enhance clarity, improve transparency and understanding about roles and remuneration. Training was provided to help managers understand and communicate the platform, while team and individual meetings helped staff to understand how the grading system works and how it improves operations.



HEALTH, SAFETY AND WELL-BEING

We have been on a cultural transformation in this space. Reporting is up, we have increased our focus on well-being. We're reminding staff that sick leave is not just for the body but for mental well-being too, alongside other wellness presentations and activities in staff meetings.

Included in our well-being messaging is our whānau focus, which are focus messages to take home for families and friends. These included car safety messages in winter, morning teas fundraising for Breast Cancer, Pink-Shirt day, Team Red challenge to donate blood and plasma, and more.



SUSTAINABILITY

A new Green Team committee has been established and meets along with the Health Safety and Well-being committee. This voice is important as we recognize that the health of Papatūānuku connects directly to our own well-being. We have added more bike racks, a worm farm in Dunedin, e-waste policies and increased car-pooling. We continue to identify and introduce ideas for reducing waste and enhancing sustainable practices in our offices.



BIRTHDAY DAY OFF

In recent years, we have worked to make changes to further support the well-being of our staff. This includes a \$100 wellness voucher to put towards a health activity or purchase, five weeks of annual leave after three years of service as well as a bonus week of annual leave for those with more than five years with the organisation. This year, we introduced the new birthday holiday, giving staff a paid leave day on their birthday. The new measure has been welcomed by staff as an acknowledgment of supporting work-life balance.



DIVERSITY AND INCLUSION

WellSouth is dedicated to equity of health services and we want to enhance our own understanding of Māori culture and Te Reo Māori. This year, Te Tiriti o Waitangi training was provided for all staff, while an online, self-paced twelve-month Te Ao Māori training programme also offered to staff has proved very popular.



10 YEARS STRONG

We marked a major milestone this year – ten years since WellSouth was formed from nine separate primary health organisations in Southern. And what a decade it's been.

The organisation has grown considerably in that time – from 31 staff to more than 150, an increase in enrolled population to 315,000 from 263,000, and a host of new programmes and initiatives that contribute to the health of our population. One thing that's been consistent having the best general practice teams anywhere.

WORKING ALONGSIDE COMMUNITY HEALTH COUNCIL

From Community Health Council (CHC) chair, Karen Browne

WellSouth has again had a very busy year addressing business as usual as well as the continuing challenges brought by Covid-19. The CHC has been very well informed on a regular basis by WellSouth CEO Andrew Swanson-Dobbs, allowing us to disseminate factual and current information to our communities.

We are very grateful to have such a solid and respectful relationship with WellSouth, and we continue to enjoy relative freedom from Covid-related restrictions thanks to the hard work of all our primary care staff in Southern region.

As a consumer advisory council, we acknowledge the response to our community concerns. This includes the resulting work now progressing in Invercargill which will allow a more equitable Primary Care service in that city.

The CHC is very pleased to be able to actively advise and support WellSouth for the betterment of all patients, their whānau and communities.



EMBEDDING EQUITY

Through all our programmes and services, a consistent effort is made to improve equity of access and outcomes for Māori.

To further our understanding and ability to support Māori whānau, WellSouth dedicated our All Staff day to delve deeper into how we can play a more significant role in improving Hauora Māori and promoting equity in the Southern locality of Aotearoa.

Among those who joined us at Ōtākou Marae to share their knowledge were Matapura Ellison (Te Rūnanga o Ngāi Tahu), Prof. Peter Crampton (Professor of Public Health, Otago University), and Mat Kiore and Lisa Te Raki (Pou Taki Māori Educator, Southern Māori Health Directorate).

We also used the occasion to adopt karakia to open and close meetings and bless food, waiata for our organisation and pepeha. These continue to be used by staff regularly.

RENOVATED OFFICES IN ŌTEPOTI-DUNEDIN

A renovated and new open plan office has brought together WellSouth staff in Ōtepoti-Dunedin. This new shared space, is enhancing communications and collaboration.

WellSouth recognises the historical and ongoing significance of the area to mana whenua and has represented some of that history in the renovation. The centrepiece of the new office space is a pounamu anchor stone - a taonga generously loaned from Kāi Tahu – that is a reminder of the nearby traditional waka landing site – Tōitu Tauraka Waka.

Our thanks to artist Ewan Duff, pictured with the pounamu anchor stone



LIVING OUR VALUES

WellSouth values - He mana tō te whānau/Whānau-Centred, Tōkeke/Equitable, Manawa whakaute/Respectful and Pono/Transparent – are more than just words. We work to embed these as part of WellSouth culture, ensuring decisions that are made and our communications are consistent with our values.

New post cards were created that staff can give to each other to recognise when they are 'living' one of our values, our values are now increasingly visible as part of branding and communications, including on lanyards, in meeting rooms, and are used in recruitment, advertising and other promotions.



He mana tō te whānau | Whānau Centred



Manawa whakaute | Respectful



Tōkeke | Equitable



Pono | Transparent



COVID-19 RESPONSE

COVID-19 RESPONSE & SURVEILLANCE

Covid-19 testing became almost business as usual for many general practices during 2020/2021.

Throughout the year, swabbing continued to be available to patients with cold and flu-like symptoms across the general practice network.

Though far fewer swabs were taken than during the 2020 outbreak, access to testing remained vital, helping to ensure Southern continues to be free of Covid-19.

Surveillance Testing

Following a small number of cases in Auckland in August 2020, WellSouth set up drive-through surveillance testing sites in Balclutha and Gore in September and a pop-up testing site in Queenstown in October. This ensured hundreds of people had easy access to testing.

When a Stewart Island resident returned a positive Covid test in June (later proving to be a false positive) WellSouth's team pulled together a testing team in a matter of hours and set up a swabbing clinic in Oban to support understandably-worried residents.

Nearly 200 swabs were completed over two days. No positive cases were detected and the community gained peace of mind there was no Covid in the village.

Ongoing border surveillance

At ports in Bluff and Port Chalmers, contracted general practice teams provide regular testing for port workers, while WellSouth teams also conduct testing for disembarking ships crews.

Surveillance at our borders will be of increasing importance going forward, helping prevent any new variants from entering New Zealand.



65,958

Swabs taken in Southern



3,313

Tests at Southern Ports





COVID-19 IMMUNISATION PROGRAMME

Early in March 2021, the Covid Immunisation Programme commenced in the Southern region, beginning with the vaccination of port workers at Port Otago-Port Chalmers, Southport-Bluff, and the Port Tiwai. Their household contacts were also included.

Southern DHB, WellSouth and general practice teams worked together to deliver vaccines to our maritime border workforce. Within weeks, the programme was also rolled out to frontline health care workers, those over the age of 65, Māori and Pasifika, and then on to the general population.

Distributed Model of Delivery

Unparalleled in terms of scale and complexity, the Covid-19 vaccination programme was particularly challenging to implement equitably in the large and geographically diverse Southern region. The approach from the start was for vaccines to be delivered via a distributed model – making use of health services across the sector. This included large scale super clinics in Invercargill and Dunedin as well as through Māori and Pacific health providers, general practices, and community pharmacies.

At its height, there were more than 110 providers delivering the Covid-19 vaccine – including over 70 general practices, and our own WellSouth ‘flying squads’ – more than any other district in Aotearoa.

Queenstown-Lakes was an early target for the campaign, as it was anticipated the border would open to Australian visitors. General practices led the delivery of the vaccine in rural areas. As the campaign ramped up, general practices in urban areas delivered the vaccine as well.

Project Team

From the outset, our WellSouth Covid project team provided training, logistical, clinical, operations, and administrative support for practices to deliver the programme, both at their own clinics and off-site. This involved training practice staff on the booking system, reporting, receiving, and preparing the vaccine, and helping with “Wet Run” training clinics.

Where additional support was needed, a WellSouth flying squad – clinical and administrative staff - travelled throughout the district to assist with or provide clinics – including to aged residential care staff and residents.



CLINICAL SERVICES

CLIC: LONG-TERM CONDITIONS PROGRAMME

Client Led Integrated Care (CLIC), our long-term conditions programme, further consolidated its role as a foundational programme for WellSouth this year.

The CLIC programme helps general practice teams provide bespoke support to patients with chronic conditions.

Our long-term conditions team works with practice staff to discuss where the practice is with the CLIC programme using four indicators - engagement of key staff, engagement of whole practice, Comprehensive Health Assessments (CHAs) completed, and care planning activity. This is followed by discussion and agreement on the next stages.

The result of this collaborative approach is a progress towards implementing CLIC as business-as-usual across all practices.

CLIC enables health providers to have more time with their patients who need additional support. This includes GPs and practice nurses, but it might also mean that a patient can have the opportunity for a comprehensive medication review with a clinical pharmacist, for example. These sessions increase patients' understanding of their medications as well as their medical conditions.

In practices hosting Access and Choice teams, Health Improvement Practitioners and Health Coaches have been able to provide talk therapies to support lifestyle change for patients with chronic health conditions.



Arthritis in his knees might slow Hemi Martin a little but with extra help from CLIC and his general practice, He Puna Wairora Wellness Centre, the Invercargill retiree is able to enjoy time with his mokopuna.

"I felt listened to," says Hemi of the Comprehensive Health Assessment, the one-hour appointment to help get a full picture of his health needs. "I set a goal of walking one kilometre without pain."

Having identified what was holding Hemi back, his practice nurse arranged for a GP appointment to address pain management, and introduced him to community providers and programmes, including group exercise classes, which have the added benefit of increasing social engagement.

Quick CLIC

An abridged form of CLIC, *Quick CLIC*, was introduced this year and is becoming widely adopted by practices. It meets a need for support for people with long-term conditions who present with an acute exacerbation of an illness. Quick CLIC supports a practice to see, treat, and follow-up a patient, who may progress to being on the CLIC programme. Education around Quick CLIC has ensured practice staff understand how it fits into overall long-term conditions management.

New Videos

Helping support best practice, more than 35 short, informative videos about all aspects of CLIC were produced and hosted on the WellSouth website. This included a patient story, a first-person account of how the programme has been life-changing for a man living in a rural community.

Further enhancing support, WellSouth offered all practices the opportunity to purchase equipment – including glucose monitoring sensors or spirometers - to help with the care of LTC patients. More than three-quarters of practices took up the opportunity.

Support materials

A new CLIC brochure for patients and their whānau was created, explaining the programme's benefits and how it works. The brochure has helped raise awareness of the CLIC programme among patients and is encouraging more people to ask whether they are eligible.

CLIC continues to improve. Patients are benefiting from improved health and better self-management of their long-term conditions. WellSouth is encouraged that many practices across the region are better understanding the value of CLIC to their practice, patients and whānau, and the programme is helping to enhance ongoing collaborations amongst health providers.



COMMUNITY OUTREACH SERVICE

Our Community Outreach Service engages with patients who identify as Māori, Pacific Island, or are identified as Quintile five, or are patients general practice identify as not engaging with care.

A growing focus for the team is unenrolled patients. We continue to explore opportunities to find and assist these individuals to register with general practice. We are passionate about this group as they have no access to proactive healthcare currently.

Working with Providers

In 2020/2021, we have been working more closely with our Māori and Pacific Island providers. These close connections help foster greater engagement and acceptance of the service and help to close the equity gap where it exists. We continue to work with Pacific Trust Otago alongside their health and well-being programme. Weekly clinics provide an opportunity for a baseline Cardiovascular Risk Assessment (CVD) to be undertaken identifying many risk factors. The service has seen 142 Pasifika clients in the last financial year identified some significant health issues. Working closely with these clients and their general practice has been extremely rewarding.

Covid-19 Vaccine

The team has been involved in Marae-based Covid-19 vaccination drop-in clinics around the district. This has been a great opportunity to not only assist with Covid vaccinations roll-out for our Māori population, but also provided the team the opportunity to ask about enrolment and mention the importance of screening programmes.



What's next?

In June 2021, we started a collaborative project with the Pacific Island Trust in Southland. This six-month pilot involves a joint visit to Pasifika bowel screening patients. The team have also developed a new relationship with Pasifika Tokomairiro Waiora in Milton, where we are planning fortnightly clinics.

An unfortunate impact of Covid is the delay to starting work with Corrections. We have agreed to work with probations with their wahine Māori, in the first instance. Together, we hope we can really make a difference.

DIETETICS

During last year's lockdown, Dietetics worked to maintain business as usual by providing video and telephone consults. We continue to offer these virtual consults as part of our business as usual.

We have seen some terrific technical changes this year. The move to the e-triage system allows us to triage our referrals electronically and communicate easily with general practice on referral status.

We have also seen an upgrade to MedTech Evolution, which allows us to send our clinical letters to practices electronically, saving time and reducing waste.

Work is underway with our Southern DHB colleagues and HealthPathways to develop and clarify the best place to refer patients for dietetic input. Much of this work was in our three-year plan and it is exciting to see progress.

Healthy Lifestyle Groups – Quality improvement

We continue to deliver Healthy Lifestyle Groups. This year, we were keen to look at the feedback from these groups and ensure they still meet the needs of those attending. Most of the feedback has been very positive, highlighting what a terrific job our dietitians do to promote an inclusive and safe space that avoids stigma and bias about weight.

We looked at why people do not attend despite responding to the invitation, or don't attend after the first session. The "not at all" group either expressed valid fears about group education, or worked in casual employment, meaning they could not reliably say if they were available on a given date. The "once only" people had legitimate reasons why they couldn't come back and several rebooked in response to these calls.

Looking to improve

The opportunity to look at this feedback will lead to some changes to the curriculum. There is potential to create some short video clips with clients who have attended groups, telling of their experience, alongside possible changes to time and duration of the groups.

Another area of improvement for the HLG, is the trial of virtual online sessions. We have tried this on two occasions and continue to learn each time. This medium allows us to reach remote and rural clients who would not otherwise have easy access.

First Line Diet and Nutrition Course

We launched the online learning resource, hosted by Health Learn in Canterbury, for nutrition education for health practitioners. Currently 193 people have enrolled in the course with 94 completing it. As this is available to all health professionals in the South Island, it has been positive how many of our secondary care colleagues have engaged with it. Probably the most pleasing outcome was 80% of those completing the course scored 8-10 on the scale for recommending it to other health professionals.

Many people remarked how it improved their understanding of both weight bias and the importance of modelling goal-setting well.

PRIMARY OPTIONS FOR ACUTE CARE (POAC)

Late this year, WellSouth added funded intrauterine device (IUD) insertions to our current Long Acting Reversible Contraceptive programme.

This gives more women, identified as high needs, access to this service closer to home, with the health providers they know and trust - their general practice team.

It also means additional choices for women, as the programme previously offered Jadelle implants only

54

IUDs

OTHER POAC SERVICES

Other general practice provided services, helping patients and reducing pressure on secondary care.

649 IV Fluids

People with dehydration, kidney problems or severe vomiting, were managed in their general practice with IV fluids, preventing a hospital admission.

476

Pipelle Biopsies

776

IV Iron Infusions

237

Integrated Respiratory Appointments

HPV

WellSouth delivers the HPV vaccination programme in schools in Southland, Queenstown and Glenorchy, to Year 8 girls and boys.

With some minor disruption to the schedule due to Covid, the programme has largely continued as planned, on target for complete delivery before the end of 2021.

WellSouth works with general practice teams to advise of any children who have declined the vaccine in school, so they can be offered the opportunity to receive their vaccine at a later date at their practice.

53

Schools Visited



1,000

Consents Received



NATIONAL BOWEL SCREENING PROGRAMME (NBSP)

The National Bowel Screening Programme (NBSP) has been going since April 2018 and the Southern region continues to have high levels of participation.

Ministry of Health data shows 71% of eligible people participating (end September 2021), above the target of 60%, with 76% participation among Māori and 66% among Pasifika.

Both rural and urban residents are participating in the programme at a high level in Southern.

General practices also play a vital role in the programme, supporting and caring for patients who have had a positive FIT test result.

The focus for 2021-22 is on ensuring that eligible people who have already participated continue to engage with the programme when they are sent their next test kit. The current overall rescreening rate for 2-year recall is 80%.

Māori and Pasifika

WellSouth contracts Māori and Pacific health providers to promote the programme within their communities and ensure participation rates amongst these population groups remain high. The Outreach Team actively follow up all Māori, Pacific and Quintile 5 people who have not returned their test kits.

Advocacy

WellSouth advocates for the lowering of the Māori and Pacific age for bowel screening to 50 years of age. It's our view that the NBSP does not support the Ministry of Health's stated goal of achieving equity of access and outcomes for Māori.

At least half of Māori diagnosed with bowel cancer are under the age of 60, compared to less than one-third of non-Māori bowel cancers. More than half of Māori with bowel cancer are diagnosed before screening begins. Restricting bowel cancer screening to everyone over 60 years means Māori have less opportunity to benefit from the programme.

Māori patients with bowel cancer that is screen-diagnosed over the age of 60, may be more advanced than that of their non-Māori peers due to the delayed opportunity to identify it earlier through screening.

National Bowel Screening Programme Date as of 30.06.21

LONG-TERM CONDITIONS CARE

The long-term conditions nurses support both practices, and patients who are living with a long-term condition. This includes providing spirometry, diabetes support and education, CLIC support and care planning.

Education for primary care clinicians is also offered and this year's education has focused on Cardiovascular Disease and CVD risk assessment, as well as Advance Care Planning.



FALLS AND FRACTURE PREVENTION SERVICE

Our Falls and Fracture Prevention Service is an interdisciplinary team responsible for the delivery of three components of the ACC "Live Stronger for Longer" initiative.

Working alongside the Ministry of Health, ACC and Southern DHB, the team aim to promote healthy ageing and enable the older people in our community to live a meaningful and independent life.

Fracture Liaison Service

In November 2020, following consultation with Live Stronger for Longer (LSFL) stakeholders, ACC announced that it will continue to invest in the LSFL programme it commenced in partnership with the Ministry of Health and Health Quality and Safety Commission in 2016. From 1 July 2021, ACC funding focuses on supporting the delivery of an International Osteoporosis Foundation-accredited, best-practice Fracture Liaison Service (FLS). The purpose of a FLS is to ensure that all patients aged 50 years or over, who present to urgent care services with a fragility fracture, undergo fracture risk assessment and receive treatment in accordance with best practice national clinical guidelines for osteoporosis. The FLS also completes a falls risk assessment and will recommend the patient attend one of the many strength and balance exercise groups. Alternatively they will complete an assessment for an in home exercise programme.

Strength and Balance Programme



501

People received in-home strength and balance exercise programme



4,059

Are attending a community strength and balance class

The in-home programme is a three-month exercise programme to improve leg strength and balance, utilising the Otago Exercise Programme. The ultimate result for our patients is to advance to one of our approved, community strength and balance classes. Patients meet a set of nine criteria aimed at ensuring improvement of strength and balance for older adults. The benefit of these groups is more than just the physical component. Attendees report a high-level of enjoyment from the social aspect as well. These classes enable our older adults to feel connected to the community and maintain interaction with their peers.

Have a Go Festival

For 'April Falls' this year, the team ran a *Have a Go Festival*. This annual campaign is designed to raise awareness of the impact of falls on older adults and how to prevent them.

Sport Southland, Safe in the South and WellSouth held a morning of free activities, information and music to promote best practice falls prevention activities.

This event was well-attended and promoted falls prevention in a helpful and fun format.



WELLSOUTH FORMER REFUGEE TEAM

WellSouth plays an important role in helping former refugees settle in Invercargill and Dunedin. Our team also support general practices and health providers to deliver care to former refugee patients.

Cross Cultural Navigators support individuals to understand and interact successfully with the health system, including general practice and hospital contacts.

The Mental Health Clinical Coordinator provides initial assessment, coordination of care, liaison between providers, and ongoing support of clients.

The Community Nurse coordinates care, provides liaison between health agencies, and assists other team members, particularly the Navigators, with clinical issues.

WellSouth's Former Refugee Team Supports:

600

People in Dunedin

160

People in Invercargill

WORKING TOGETHER, LEARNING FROM EACH OTHER

In May, WellSouth held the two-day conference *Working Together, Learning from Each Other*

It was an opportunity to bring together community agencies, health providers, and others working with Former Refugees in the Dunedin community.

80 people attended from a variety of organisations including clinicians from Mental Health Services (Community Mental Health Teams, Youth Specialty Services, Emergency Psychiatric Services), staff from various inpatient wards at Dunedin Hospital, and midwives. There was also representation from many other NGOs including support workers from Corstorphine Baptist Community Trust, social work staff from Anglican Family Care and Presbyterian Support, Salvation Army and front-line staff from food banks.

A combined cultural and educational experience was provided, including Syrian food, prayers and karakia said in Farsi, Arabic and Māori, and music from Syria, Afghanistan, and Palestine was woven through the two days.

The conference include presentations, panel discussions and workshops on topics including mental health and well-being for former refugees, working with interpreters, post-settlement stressors collaboration, and cultural and personal perspectives on resettlement.

The conference was an excellent opportunity to share our knowledge from working with Dunedin former refugees over the past five years, in collaboration with other agencies including Red Cross and Arai Te Uru Whare Hauora, who also work closely with families.

Delegate feedback was very much in favour of further opportunities for education, collaboration and networking.



CLINICAL PHARMACY

There's been much progress made by the Clinical Pharmacy team this year.

In late 2020, we decided to review the WellSouth pharmacy service model following GPNZ recommendations about future workforce and resource needs of general practices.

This review led to some positive changes that were implemented at the start of 2021:

WellSouth-based Clinical Pharmacist

We established a newly-funded WellSouth-based Clinical Pharmacist role. This is a full-time role dedicated to helping practices that do not have a practice-based pharmacist. Work includes participating in multi-disciplinary team meetings, supporting medication-related quality improvement activities, providing education materials and support with priority given to practices who had a large number of high-needs patients. (Māori, Pasifika, Quintile 5).

Most referrals were for patients taking multiple medications, identified through Client Led Integrated Care (CLIC), where a review was requested to attempt to deprescribe any medication that might no longer be required. This also provided a space for patient education to improve understanding and enable a sense of autonomy over medication management. Another key reason for referrals was for advice around the next avenue to explore in patients who were unable to benefit from initial treatment options or who required guided dose reductions.

We have seen significant growth in the second quarter of establishing this role, from 20 to 51 patients, with the most exciting growth being seen in the number of practices referring into the service. These 51 patients were referred from 20 different practices across the Southern region.

Practice-Based Pharmacists

We reviewed the location and allocated resource for our practice-based pharmacists. This was to ensure we had resource in the places where they are most needed, and where their skills were being utilised optimally.

Service Level Agreement

Our third major change was the implementation a Service Level Agreement for our practice-based pharmacist service which has received extremely positive results. The SLA outlines the best way for general practices and the clinical pharmacist to work together to utilise this valuable pharmacy resource in the best way. This has led to the pharmacist being involved with more complex patients, an increase in the number of face-to-face consultations with patients, increased number of follow-up consultations, increased assessments with patients, and a 42% increase in the number of interventions (direct changes to prescribed medication + recommendations for changes to medication).

MAKING A DIFFERENCE

A clinical pharmacist was asked to review a patient with uncontrolled hypertension whose GP had 'run out of options' with their medicines.

Following a home visit, the pharmacist found that the patient was often forgetting to take the night-time medicines that the GP had prescribed, hence the blood pressure remaining high.

The pharmacist was able to advise and plan with the patient to make an easier schedule and update the GP on what was actually happening.



MĀORI AND PACIFIC HEALTH

MĀORI AND PACIFIC HEALTH

WellSouth supports and works alongside all Māori and Pacific health providers in the district to enhance Māori and Pacific enrolment and effective engagement with general practice.

These providers play a valuable role in supporting and increasing Māori and Pacific participation in National Bowel Screening, flu vaccination and Covid-19 vaccination programmes.

Kaiārahi (Cancer Navigators)

Kaiārahi (Cancer Navigators) continued to be supported at Arai Te Uru Whare Hauora and Ngā Kete Mātauranga Pounamu Charitable Trust. The Kaiārahi provide outstanding, often challenging work, supporting at-risk whānau and those with cancer through their diagnosis and treatment pathways.

Māori Health Providers

Arai Te Uru Whare Hauora

Aukaha (Tumai Ora)

Awarua Whānau Services

Hokonui Rūnanga Health and Social Services Trust

Ngā Kete Mātauranga Pounamu Charitable Trust

Ōtākou Health Ltd

Te Roopu Tautoko ki te Tonga

Tokomairi Waiora

Uruuruwhenua Health

Pacific Health Providers

Oamaru Pacific Island Community Group

Pacific Island Advisory & Cultural Trust (PIACT)

Pacific Trust Otago

Clinical Programmes

A range of funded clinical programmes in general practice helps support Māori and Pacific peoples engagement with primary care. These include:

- GP and Prescription Voucher Programme
- Rheumatic Fever
- Sexual Health
- Cervical Screening
- CVD Risk Assessment
- National Bowel Screening Programme
- Hauora Wellness Checks
- WellSouth Call Centre

Enrolment by Ethnicity in Southern

30,233

Enrolled Māori

7,266

Enrolled Pasifika

MĀORI WELLNESS CHECKS

WellSouth to work to help support Māori to re-engage and reconnect with their general practice, encouraging them to catch-up on any health care that may have been missed during the Covid-19 lockdown.

WellSouth clinicians made 4067 calls on behalf of practices, checking on the health and well-being of patients and whānau and offering influenza vaccinations to anyone who hadn't received them.

NEW MĀORI HEALTH ACCORD

WellSouth, Southern DHB, and Murihiku and Araiteuru Papatipu Rūnaka, representing Māori from across Otago and Southland, signed a new healthcare accord this year. The accord is a promise to work together to improve health services for Māori and whānau across the health system.

The renewed partnership – updating a May 2011 agreement - marks a shared commitment to ensuring equity through meaningful collaboration and engagement.

Dr Doug Hill, WellSouth Chairman, says the agreement is an important step forward in improving health care for Māori at every point in health services.



MOANA NUI FESTIVAL

Talofa lava, Kia orana, Malo e lelei, Mauri, Bula Vinaka, Fakaalofa lahi atu, Malo Ni, Halo ola keta, Fakatalofa atu and Warm Pacific greetings. WellSouth and general practice colleagues engaged in the Moana Nui Festival in Dunedin in February, celebrating Pacific Island culture while taking the opportunity to promote the benefits of being enrolled with a general practice.



Being involved with Moana Nui festival was inspiring. We loved the colour, the energy, and the commitment to everything Pasifika, including promoting health.

Dr Jill McIlraith, Aurora Health



HARTI HAUORA: SUPPORTING POSITIVE CHANGE FOR TAMARIKI AND THEIR WHĀNAU AT SOUTHLAND HOSPITAL

The Harti Hauora programme operating in Murihiku is a collaboration between WellSouth, Awarua Whānau Services and the Southern DHB. It aims to reduce admissions for tamariki Māori aged 0 – 4 years presenting to Southland Hospital with respiratory issues – an equity issue identified in the report “Measuring Māori Health Equity in the WellSouth Community”.

Through the establishment of this programme, Awarua Whānau Services kaimahi, Deli Diack, has been focused on building and refining processes that encourage, enable and enhance the engagement of whānau. The ultimate outcome being to increase positive outcomes for tamariki and their whānau in Murihiku.

As a Kaupapa Māori health provider, there is importance placed on the building of a solid foundational relationship with whānau, promoting whanaungatanga, manaakitanga, arohatanga and rangatiratanga as the key elements to this.

Deli meets with whānau where they feel most comfortable. This is often in their home where the stress of being in the children’s ward has eased and more focus can be placed on working with the whānau in a preventative space in an attempt to reduce future admissions. Deli has been working hard to ensure that she has solid networks in the community that can best support whānau and can engage whānau with services to support them. Alongside these networks, Deli, ensures that her kete is full of useful resources that she can share with whānau along the journey.

Harti Hauora is still in the beginning stages of its journey but has the capacity to promote and support real positive change for tamariki and their whānau.

28

Whānau have been referred to the programme with 21 Harti Hauora assessments completed.



PRIMARY MENTAL HEALTH & WELL-BEING

PRIMARY MENTAL HEALTH SERVICES

Our Primary Mental Health Services, including the Brief Intervention Service and Family Mental Health Service, focus on quality improvement and service delivery.

Brief Intervention Services (BIS) provides short-term counselling to clients over the age of 20 with mild to moderate mental health issues, while Family Mental Health Service is a community mental health service for individuals of all ages and families experiencing moderate to severe mental health difficulties. Both programmes work to support Māori, Pacific Island and high-needs clients and whānau.

The ongoing use of the secure WellSouth portal, and improvements to our patient management system, has improved the referral process, access to service and flow of information between services and general practice. This ensures the opportunity for the best possible outcomes for our clients.

There has been ongoing development of a number of initiatives to increase access to services, improve health outcomes and health equity. These have included reducing barriers to services, increased engagement and maximising opportunities to work collaboratively with key stakeholders, establishing pilot programmes and continuation of other initiatives such as single session family therapy.



In-person appointments remain the primary provision of services, but tele and virtual health options offer increased accessibility to the service and the opportunity for more timely access to care.

IMPROVING MENTAL HEALTH SERVICE

The Improving Mental Health Service is focused on providing support to the people in the care of Corrections in Invercargill Prison, Otago Correctional Facility and Dunedin Community Corrections. The service helps to enable better outcomes for the men, women and their whānau and to build the capacity of Corrections staff to better support people in their care.

Working collaboratively alongside Corrections, other WellSouth clinical teams and services across the sector, has allowed us to focus on improving health outcomes for people.

There has been a number of initiatives progressed to improve access and engagement in the service. These include the delivery of trauma informed yoga at Otago Correctional Facility, improving referral pathways across services delivering mental health and addictions support, and supporting people in the care of Corrections to improve their health outcomes by engaging with primary care.

5,364
Referrals to BIS and family mental health services

SUICIDE PREVENTION

The work of WellSouth's Suicide Prevention-Postvention Team focused on actioning the Southern Suicide Prevention Strategy released last year.

Suicide 101 Workshops, supporting at-risk communities, postvention groups, and localising messaging are areas where progress has been made to help to ensure prevention messages get out – and that our communities know they can seek help.

The team worked to further connections and relationships with providers and stakeholders. This includes general practices, Pasifika and Kaupapa Māori providers, mental health and social services, NGOs and government agencies, and lived experience communities – all of which play a pivotal role in working with whānau and communities that may be facing additional challenges.

Suicide postvention groups have been established and provide suicide prevention responses aimed at ensuring those most impacted or bereaved by suicide have access to resources and support.

Our Wanaka-based coordinator was part of the formation of Te Hau Toka, providing strong, coordinated psychosocial support for the Fiordland, Queenstown Lakes and Upper Clutha regions.

Based on the success of the initiative, WellSouth, Southern DHB and other mental health and well-being agencies are seeking to develop a similar group in Southland.

SUICIDE PREVENTION WORKSHOP 101

WellSouth and Southern DHB partnered in delivering Suicide Prevention 101 workshops for health professionals. Practice nurses, Counsellors, Corrections' Mental Health staff, Health Coaches and GPs were among those who participated. These interactive workshops aimed to help health providers to know how to recognise risks of self-harm, how to ask about suicide, and provided additional information on referral pathways. Further workshops will be offered elsewhere in the region in 2022.



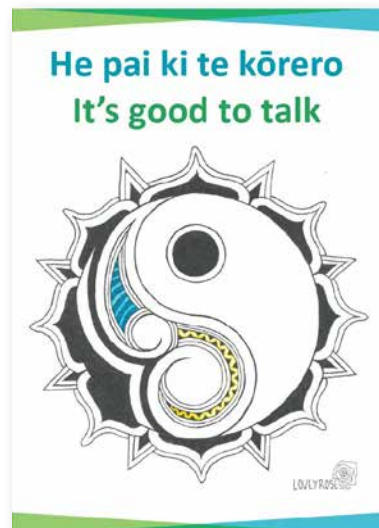
101 Workshops: Steven Paddock, SDHB District CNS educator and Suzi Wereta, Suicide Prevention and Postvention Coordinator

HE PAI KI TE KŌRERO/IT'S GOOD TO TALK

The Suicide Prevention team, with help from the Health Promotions Team, created a series of helpful well-being cards, compiling quick access to web-based mental health and well-being resources.

The first of these cards are available for rangatahi and tamariki. The next card has a Pakeke focus for working age adults, and a third looks at the relationship resources for grandparents and their mokopuna.

The cards are available free to practices and other health providers in the region and are proving to be a welcome resource for providers.



PROMOTING 'HELP-THINKING' BEHAVIOUR IN WANAKA AND CENTRAL LAKES

WellSouth Suicide Prevention team led an initiative that aimed to help normalise reaching out for help.

Focused on Wanaka, local people were used as models for a campaign that localised the national 1737 campaign. By using local residents - including a tradesperson and a new mum – the campaign is designed to let people know that it is okay to ask for help. It also emphasises that people who do ask for help are regular people, like our friends and neighbours.



ACCESS AND CHOICE

WellSouth launched its primary mental health programme, Access and Choice, in August 2020, at six general practices around the district.

Access and Choice embeds well-being support in general practices. This makes it easier to access 'free and immediate' care and advice for patients, while supporting general practice teams to care for patients, and taking pressure off other parts of the health system.

Identifying placements where the support would have most impact, the team used practice enrolment data, and ensured general practices with the highest Māori, Pacific, high-needs and youth populations were the first to host Access and Choice teams. The same method was used for subsequent tranches of the roll-out.

Impact of Covid

In the post-Covid-19 lockdown period, WellSouth identified practices in areas where jobs and the economy were hardest hit by the lockdown and ongoing border closures. Hosting Access and Choice teams at practices in these areas provide extra care for patients/clients.

As of 30 June 2021, there were 18 FTE Health Improvement Practitioners working across the network in Otago and Southland and the programme continues to grow.

Three roles

The Access and Choice service, offers free appointments usually same or next day. The team work to help clients address day-to-day issues with a view to improving quality-of-life and making changes for the better.

An Access and Choice Team is comprised of three roles:

Health Improvement Practitioners - qualified, registered health professionals who help people of all ages take positive steps in improving their physical and mental well-being.

Health Coaches – supporting understanding of making healthy choices, setting goals, managing medication, and chronic conditions.

Community Support Workers - helping people to lead healthy lifestyles, and assist with social engagement, paid work, housing, and money matters.



WELL-BEING TEAM

Whether talking with a busy working mum to find time for herself, helping a new community member address stress and anxiety, or supporting patients newly diagnosed with a long-term condition such as diabetes, Access and Choice providers help patients to make manageable changes.

Health Improvement Practitioners Friederike Andree and Health Coach Carmen McCall work at co-located practices Wanaka MC and Aspiring Medical Centre, providing extra well-being support alongside the usual health care services.

"We take a values-based approach, so we work with patients to identify what is most important to them and talk about what they can do to improve where they are," says Friederike, noting appointments are meant to be one-off sessions and aren't counselling services.

Adds Carmen: "We try to help patients to find what will work for them. It is such a privilege to spend time with patients, to talk about what is important to them and help them to make changes."

CALL CENTRE

Initially established in March 2020 to support Southerners to access Covid-19 swabbing, the WellSouth call centre – 0800 VIRUS-19 – proved so helpful that it was established as a permanent WellSouth service in August 2020.

SMOKING CESSATION

While supporting people to access Covid-19 swabbing – calls to 0800 VIRUS19 continue to increase at times of alert level changes within New Zealand - our call centre clinicians began to support several general practices with their smoking cessation calls to their enrolled patients. Other outbound calls made by our call centre clinicians included supporting the National Bowel Cancer Screening Programme and Māori and Pasifika wellness checks.

18,467

Smoking Cessation Calls

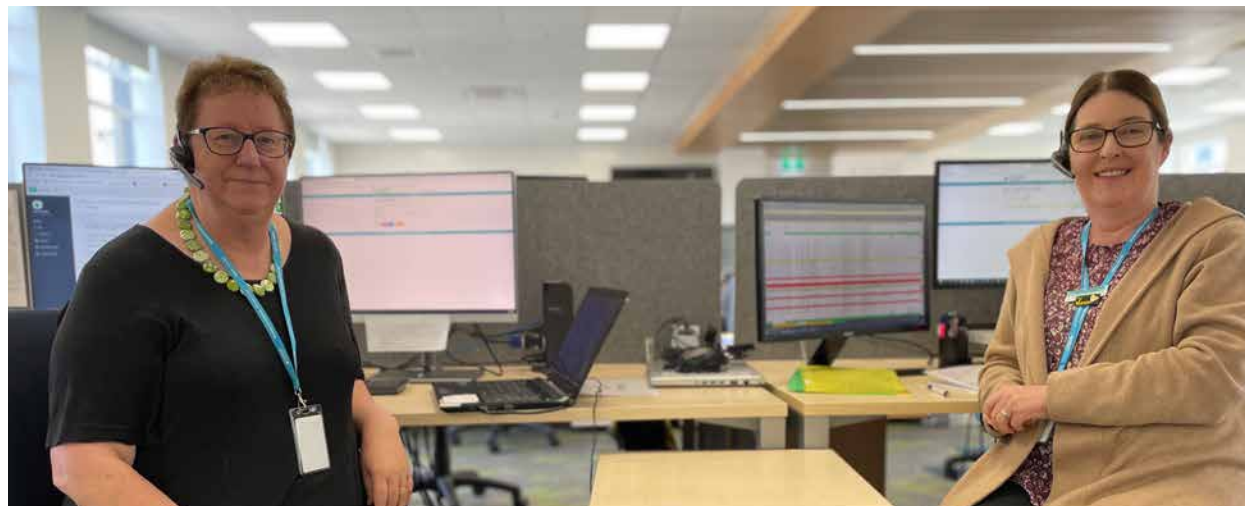
SUPPORTING ENROLMENTS

The call centre is also at the end of other inbound calls including the 0800 478 256 enrolment line. This work is extremely important to support patients seeking enrolment in Southern general practices.

The call centre will liaise directly with general practices and are building some good working relationships as we try to find enrolment within limited capacity.

4067

Māori and Pasifika wellness checks



Call Centre clinicians - Registered Nurses Jenny Duncan and Louise McIntosh

**Looking
for a GP in
Southern?**

Call 0800 478 256
for help enrolling
with a general
practice.

**Kai te rapu
i te Rata
Whānau ki
te Tai Toka?**

Waea mai ki
0800 478 256
kia āwhina ai
tō uru ki tētahi
whare hauora
tūmatanui.



HEALTH PROMOTION

TE HAU TOKA

Health promotion is a valued part of the Central Lakes community with WellSouth involvement in the Central Otago Recovery Response Group and Te Hau Toka. Both groups were set up in 2020 in response to community-wide mental health impacts as a result of Covid-19. Te Hau Toka includes representation from WellSouth, SDHB, Queenstown Lakes District Council, Central Lakes Family Services, Tāhuna-Whakatipu Māori Community, the Southern Mental Health and Addiction Network Leadership Group, and the Fiordland Well-being Collective.

The group partners with agencies and networks to help co-ordinate an overall picture of ongoing needs. This includes sharing well-being concerns, monitoring mental health service capacity, and working together on ways to tackle the well-being effects in communities.

By combining knowledge and resources, Te Hau Toka builds on awareness of services that are available, connects people with the support they may need, and helps them to stay well. Various initiatives to date include, supporting the Queenstown Lakes District Council's multi-agency Kia Kaha Hub with Well-being Fridays, and scoping and establishing a new Mental Well-being Navigator role.

TE TIPURIA FUND

The on-going impacts of Covid-19 within our local communities provided an opportunity to re-orientate the Te Tipuria Fund initiative in 2021 into a partnership with Kōkiri Training Centre in Dunedin. It was an ideal opportunity to adapt the Te Tipuria Fund structure to support and complement an existing community. This was achieved with the funding being made available to support students with indirect costs associated with undertaking the Level 3 Mahinga Kai Certificate. The Mahinga Kai course goals and outcomes align with the overall aims and objectives of the Te Tipuria Fund, working towards overcoming inequities faced by many students.

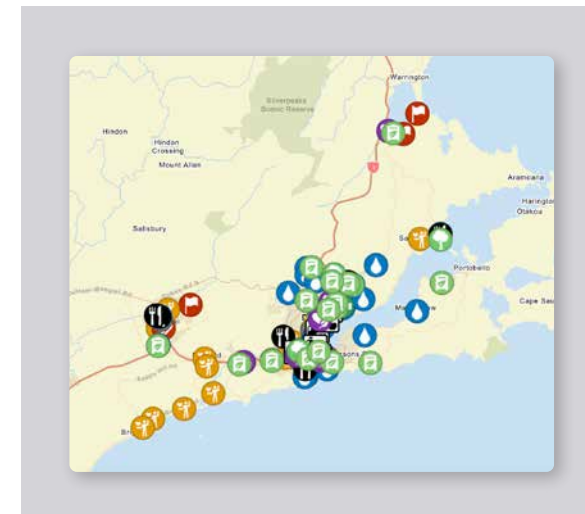
BREASTFEEDING SUPPORT OTAGO AND SOUTHLAND

Māmā, pēpi and whānau across Southern are supported by important mahi. The Breastfeeding Peer Support programme continues to build community capacity to support mothers and whānau through the normal course of breastfeeding.

The impacts of Covid-19 triggered lockdowns highlighted the importance of social and family support for new parents. Attendance at WellSouth drop-in groups has increased with māmās valuing the opportunity to chat with their peers and the peer supporters, creating opportunities to support overall maternal well-being.

Being able to support breastpump loan schemes across the region enables more connections to be made between peer supporters and māmās.

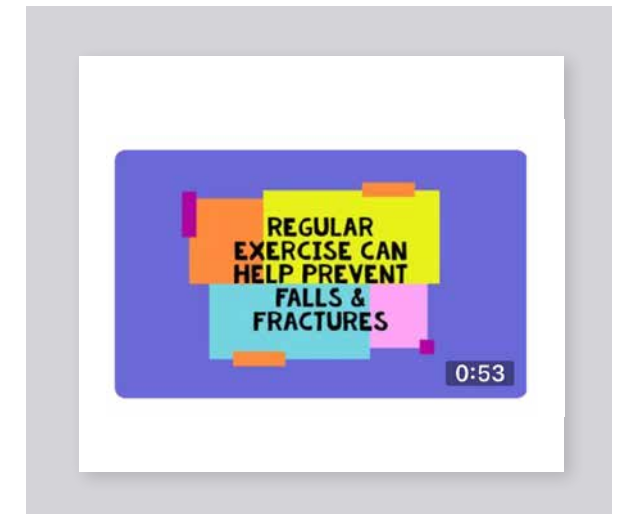
Our team has also worked to develop online antenatal breastfeeding classes which are delivered by an experienced lactation consultant. These online classes complement the face-to-face antenatal breastfeeding classes available to Dunedin whānau and provide an opportunity to connect with peer supporters before the birth of their baby. It also increases equity of access to this antenatal support for those outside of Dunedin.



LOW-COST FOOD & TRANSPORT MAPS

We are pleased to have launched a new online Low-Cost Food and Transport Map tool with versions specific to different areas across the Southern region.

These maps show free and low-cost food and transport options available in our communities, enhancing the ability of individuals and whānau to have improved and more equitable access to adequate and affordable food and transport options. Primarily designed as online resources, each map can be utilised by community members and the primary health care and social services workforce to enhance their ability to facilitate and support whānau and clients experiencing socio-economic and food security challenges. The impacts of the Covid-19 pandemic and lockdowns also emphasised the timeliness of this resource with even more people within our communities experiencing hardship and financial challenges.



WORLD OSTEOPOROSIS AWARENESS DAY CAMPAIGN

Our team, supported our Falls and Fractures colleagues, to create a World Osteoporosis Awareness Day campaign, highlighting aspects of building and maintaining bone strength.

Taking a collaborative approach, our teams created video content for social media, aiming to engage audiences with plain, clear, and engaging messaging. Each video also provided positively framed solutions that help people to take control of their own health and well-being.



Medical Director's Report

I have been privileged to work in the position of Medical Director at WellSouth since 2017. Happily there is a fantastic replacement for me, Dr Carole Atmore, taking up the Medical Director role in August 2021.

My involvement in WellSouth has been driven by the desire to work inside the organisation that supports and promotes general practices in our region. This has allowed me to become familiar with most parts of the region.

My intention has always been to try to understand the issues at the local level, if at all possible, by walking in the shoes of the local medical services – this sometimes included doing locums which I always enjoyed. I have tried to advocate for the providers and their patients throughout. My point-of-view has always been to help WellSouth to be a helpful organisation, that supports and promotes general practice, making life easier, not harder.

There have been a number of positive changes in the last few years, including extra resourcing attached to the Primary and Community Care Strategy and Health Care Homes.

In recent times, the health system has been dominated by the Covid response. Once again the organisation has promoted the pivotal part primary care has had in this response.

I am leaving to get back into the game of general practice, running a new small practice.

I'm voting with my feet in the belief that the future of general practice, and in particular independent general practice, is bright.

Ultimately, despite the difficulties and hard work (and the health system changes coming!) etc, it is a privilege to be able to work in general practice.

I am confident that WellSouth will continue to have our backs.

Dr Stephen Graham
Medical Director, WellSouth

Director of Nursing's Report

Covid-19 continued to feature prominently this financial year, with the addition of the Covid vaccination into the workload of testing that we were all so familiar with last year.

Though the vaccination programme was not initially anticipated to be delivered via general practice by the Ministry of Health, Southern general practices have led the country in the primary care delivery of the vaccine, with the support of the WellSouth team.

The Covid vaccine programme is different from other vaccine programmes. There was a new immunisation register and national booking system to learn about and implement, and few more challenges. However, I have been extremely proud of my nursing colleagues, in particular, who have really rolled up their sleeves and worked through all the new systems and processes to deliver the vaccinations to their communities.

The biggest vaccination programme the country has seen has certainly provided opportunity for new relationships, new collaborative partnerships, and unique ways of working occurring throughout the Southern district.

Our WellSouth Clinical Teams have continued to provide immense support to the system in relation to Covid-19. I have the privilege to lead an amazingly talented, responsive, and nimble workforce. The team have been involved in supporting vaccination wet and dry runs, and vaccination clinics in practices, marae and drive-throughs. Covid testing on vessels and testing centres at the ports have also been provided alongside their business-as-usual activities.

Registered Nurse Prescribing in Community Health

WellSouth has been leading the South Island Alliance programme in relation to registered nurses practising in community health settings. Registered nurses must complete a work-based education programme, approved by New Zealand Nursing Council. They can then apply to the Council for prescribing authority for a limited number of medicines for minor ailments and illnesses in normally healthy people without significant health problems. This work has been impacted by Covid and is a bit behind schedule, but the programme is almost ready for launching in Southern.

Wendy Findlay
Director of Nursing, WellSouth



PRACTICE SUPPORT

PRACTICE NETWORK UPDATE

How do you describe a year in primary care without constant reference back to the global Covid-19 pandemic? General practice has found itself at the forefront of our efforts to manage the pandemic via testing and, almost uniquely in New Zealand, as providers of the vaccine to our community.

Business as Usual – What's That?

Despite the uncertainty caused by the pandemic, general practice has continued to provide high-quality primary care services to our communities. A total of 1.15million patient contacts were made over the course of the year, representing 3.6 contacts per enrolled user. Workforce pressures remain, particularly in our rural areas where recruiting and retaining staff adds to the uncertainty facing both service providers and users. With borders closed, recruiting overseas GPs is even harder and more costly for practices, while making New Zealand a less attractive destination for GPs and nurses looking for a visa to work in New Zealand – many of them choose other countries.

Workforce

There are 81 practices in the WellSouth network, spread from Kurow and Twizel in the north to Bluff in the South. 330 general practitioners (202 FTE) and 329 nurses (180 FTE) are employed across those practices. A further 21 Nurse Practitioners practice in primary care in our network.

Testing for Covid-19

A key part of the national strategy to control Covid-19 has been regular swabbing. General practice has provided most of the swabbing in Southern District since the 2020 lockdown. The main targets for swabbing are those working at our borders and those with flu-like symptoms. I would particularly like to acknowledge the efforts of Queens Park General Practice in Invercargill, Mornington Health Centre in Dunedin and Queenstown Medical, Wakatipu Medical and Mountain Lakes Medical for the work they have done in swabbing our border workforce over the past year.

ENROLMENTS

Enrolments increased by 0.9% over the course of the year, from 315,027 to 317,759. This is a slower increase in population than the previous twelve-month period, when enrolments grew by 1.6%.

SOUTHERN HEALTH CARE HOME

Health Care Home (HCH) experienced significant growth over 2020/21, with ten new practices bringing 55,000 patients into HCH. Twenty-four practices are now underway, with an enrolled population of nearly 175,000, covering 55% of all Southern patients, 56% of Māori, and 65% of Pasifika patients. An additional five practices started HCH on 1 July 2021.

The pivot within HCH nationally and in the South to focus on equity has only been given more emphasis with the coming health reforms. For all HCH practices, this has meant prioritising work that supports Māori and Pasifika patients, and considering how they can form the relationships with whānau and communities needed for better outcomes. We consistently see practices identifying patients with higher health needs and working hard to connect with them. Results from the first eight HCH practices include:

49%

of total Comprehensive Health Assessments for Māori, with 36% of the Māori population

61%

of total CHAs for Pasifika, with 40% of the Pacific population

50%

Care plans for Māori at about a 50% higher rate than the overall population

Multi-disciplinary team meetings for Māori at 3x the rate of the overall population, and 4.6x the rate for Pasifika.

IMPACT ON SECONDARY

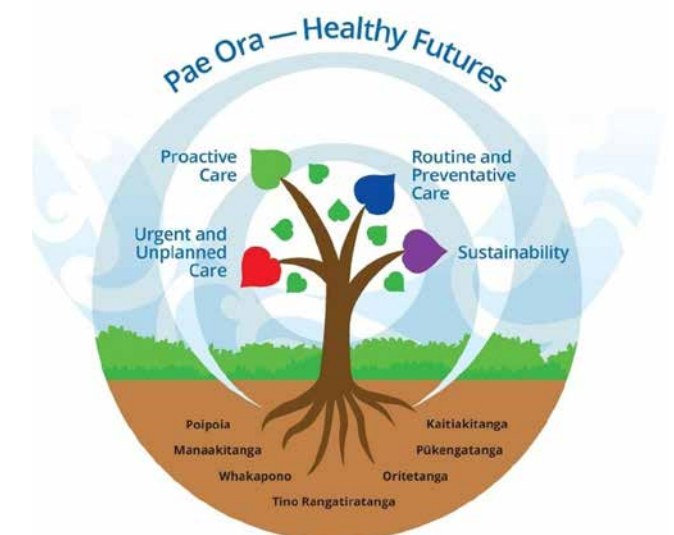
We continue to track a number of secondary care acute demand measures. During the course of this year we completed the first robust analysis of acute demand for a large Dunedin practice. The analysis showed a marked decrease in Dunedin ED presentations from this practice beyond what might be expected by random variation (and controlling for the effect of Covid). We believe this was due to a large increase in same and next-day appointment availability.

In general, we see no signs of negative effects from HCH on secondary care acute demand, and some encouraging signs of improvements, particularly with individual practices. Essentially though, it is too early to definitely say one way or the other, given the multiple factors that determine secondary acute care demand.

Helped improve equity

The University of Otago completed an evaluation of the implementation of Southern HCH, based on interviews with tranche one and two HCH practices. The recommendations were consistent with our observations and with some of the adaptations that have occurred within the HCH programme. These include, flexibility with adapting key HCH tools into a practice, consideration of the financial implications of changes, and the need for on-going dialogue with the DHB. Pleasingly, the evaluation found HCH helped to make practical efforts to improve equity, and that the practices were focusing on how to be more culturally welcoming. While not part of the evaluation, we are nonetheless acutely aware of the need to better understand patients' experiences of HCH and the difference it makes. This will be a big focus in the coming year.

2021/22 is likely to be the last year in which a practice can start HCH, given the capped funding. The prospect of living with Covid in the community, and the stresses and opportunities this creates, make it even more important for practices to take the opportunity HCH provides to offer all patients improved services, while focusing on sustainability. A good example of this is one of the first four Southern HCH practices. They found "our involvement in Health Care Home and the changes we have made to our practice, has had a positive impact on our financial results. We have increased capacity in our clinicians days which has allowed us to take 760 more patients with only a 0.3FTE lift."



SOUTHERN HEALTH CARE HOME

HEALTH TARGETS

Proactive Care for our population

General practices are at the front line of protecting our population from illness. Practices work towards a number of indicators that demonstrate the activity in this space.

BETTER HELP FOR PEOPLE WHO SMOKE TO QUIT

For someone who smokes, the best thing they can do for their health is to stop. One of the best things we can do to help them is to ask if they are ready to stop and offer support. We aim that 90% of people who smoke to be offered brief advice to stop at least every 15 months. While we didn't achieve that target in 2020-21, given the challenges of the year, we feel that 85% is a good outcome and we will keep working with practices to help people stop smoking.

CARDIOVASCULAR DISEASE RISK ASSESSMENT

CVD remains a significant health risk in New Zealand, particularly for Māori and Pasifika populations. CVD Risk Assessments are funded for our high needs population – Māori, Pacific Peoples and those living in high deprivation – but not for the general population. There has been a steady decline in the number of CVD risk assessments done over the course of the year.

FLU VACCINE

Seasonal flu remains a risk, particularly for older New Zealanders or those with underlying health conditions. This year 72% of the over 65 population received a flu vaccine, but there remains an equity gap between vaccine rates for our non-Pakeha populations.

PRIMARY CARE AND THE COVID-19 RESPONSE

Vaccinations

From the outset, we have maintained that primary care providers were crucial to a successful mass vaccination programme. General practices and pharmacies are well-embedded in their communities, trusted and respected to give quality, impartial advice, and have the skills to get the job done. Vaccination is core primary care, not an add-on.

Southern DHB is to be commended for recognising the need to engage early with primary care and with WellSouth. Our large geographic area and low population density meant that mass vaccination clinics in urban centres would fail to protect our rural communities. Across the network, three quarters of general practices are delivering vaccines. Adding in the Māori providers and pharmacies there are over 110 vaccination sites in our district.

CLINICAL QUALITY COMMITTEE

The Clinical Quality Committee provides WellSouth with incredibly valuable input into the development of our clinical programmes to ensure that when launched in General Practice, they work from a clinical, financial and reporting perspective.

Among the areas that CQC provided valuable input into this year were enhancements to CLIC programme, supporting Diabetic Annual Reviews in practice, IV iron programme and GPSI skin lesions.

Clinical Quality Current Committee Members

Name	Position	Practice
Andrew Swanson-Dobbs	Chief Executive Officer	WellSouth
Dr Andy Shute	GP, Clinical Advisor	WellSouth
Dr Carol Atmore	GP, Medical Director	WellSouth
Dr Daniel Pettigrew	GP	Dunedin North Medical Centre
Danielle Miller	Pharmacist	
Dr Doug Hill	GP, WellSouth Board Member	Broadway Medical Centre
Erolia Rooney	Clinical Governance Committee, Board Member	WellSouth
Gaylene Hastie	Nurse Practitioner	Queenstown Medical Centre
Dr Hywel Lloyd	GP, Medical Director, Strategy, Primary & Community Directorate	Southern DHB
Dr Jenny Maybin	GP, HealthPathways Clinical Editor	Wanaka Medical Centre
Katrina Braxton	Clinical Services Manager	WellSouth
Kelsi Fastier	Pharmacist	Cromwell Pharmacy
Maureen McNeill	Nursing Team Leader	Wanaka Medical Centre
Paul Rowe	Practice Network Director	WellSouth
Dr Phil White	GP	Servants Health
Dr Rachel Greenwood	GP	Murihiku Medical Centre
Sharron Feist	Clinical Services Manager	WellSouth
Dr Stephen Graham	GP, Clinical Advisor	WellSouth
Dr Susie Meyer	GP, Clinical Governance Committee, Board Member	WellSouth
Wendy Findlay	Director of Nursing	WellSouth

DATA & DIGITAL

HEALTH DATA – A STRATEGIC ASSET

WellSouth has become a more data and digital centric organisation, allowing us to see what health delivery activity is happening within the network of GP practices as well as from the whole of Southern health system.

The continued development and refinement of the Thalamus Platform (from DataCraft in Wellington) is helping support both clinical and non-clinical teams to improve our programmes, and better ensure we can meet the demands within our communities.

One of the clear areas where the Thalamus Platform has been instrumental is with the Covid-19 Vaccination programme.

With the upcoming health system reforms, a revised work programme is being developed to ensure alignment to WellSouth strategic direction and the requirements for primary and community services.

COVID-19 VACCINATIONS AND SWABBING SUPPORT

WellSouth in conjunction with the Southern DHB and other Covid-19 vaccination providers in Southern have been able to ‘see’ our populations of vaccinated and unvaccinated to ensure a high-level of uptake. This has been one of many areas that allowed the Southern District to achieve an early high vaccination rate, which has been maintained.

With the need to continue to provide Covid testing, we also supported tracking and analysing of Covid swab rates across the district, and measured surge capacity when Covid cases occurred.

OTHER DATA ANALYTICS

WellSouth, via the Health Care Home programme, have also started to use the Dot Loves Data platform that provides high-detail demographics. This, combined with health needs data, will help us to provide our network with great visibility of needs for programmes that support communities across the district.

DIGITAL ENABLEMENT – VIRTUAL HEALTH

Led by the Ministry of Health, the uptake and application of digital tools in the health sector, will continue and will be a key enabler for future primary care activities.

Virtual health saw a significant increase during Covid Alert Level 3 and 4, with practices utilising the higher alert levels to ensure primary and community care was still available. Several programmes have adapted to continue supporting the use of telehealth or virtual health as a means for developing new models of care for our communities.

CYBER SECURITY – PROTECTION OF HEALTH DATA

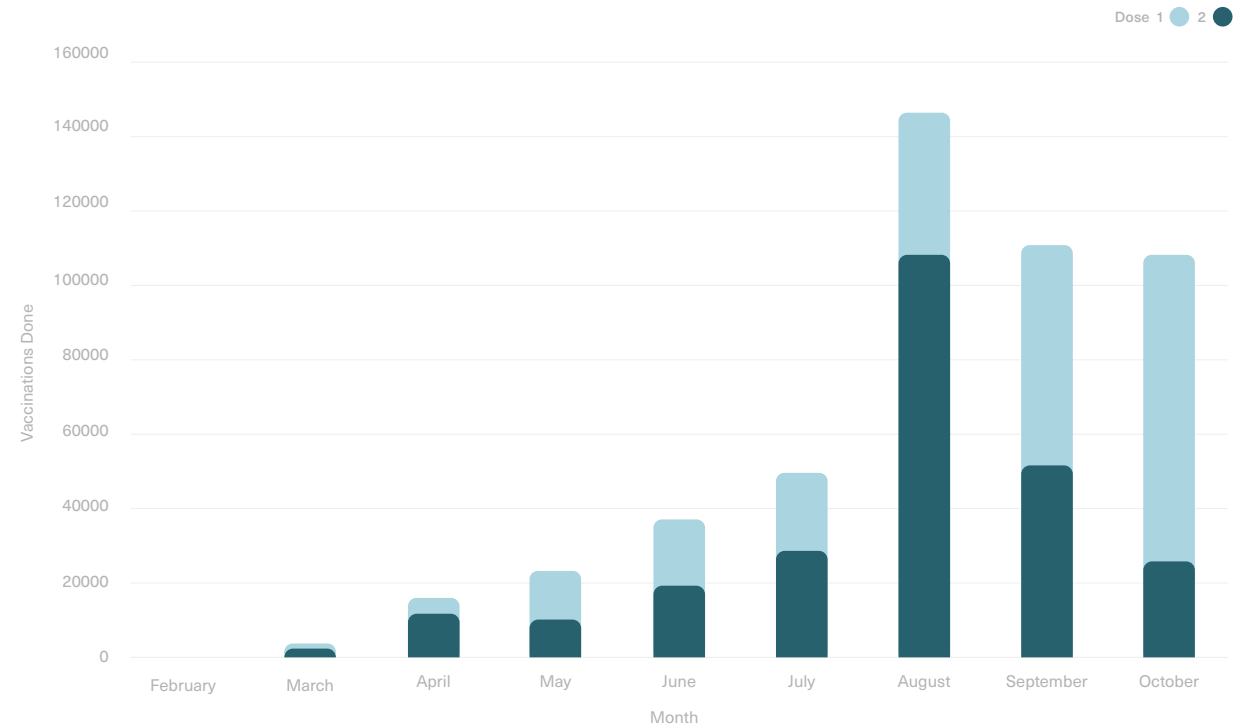
The cyber security attack at the Waikato DHB is an event that shapes and influences how other agencies within the health sector treat the risk of cyber security.

WellSouth has in place several layers and services that provide clear protection and recoverability. This makes it seem less likely (not impossible) something similar could or would occur within our environment.

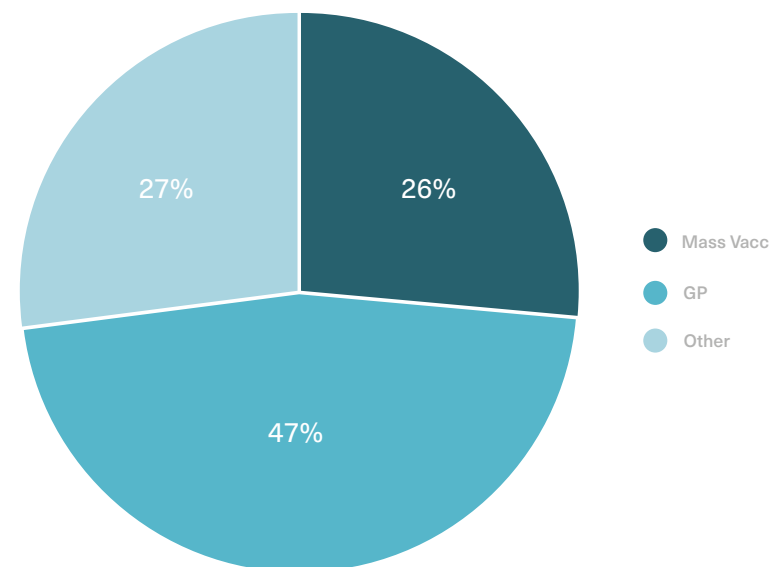
The Ministry, along with agencies such as the National Cyber Security Centre, has been providing instructions to ensure sufficient protection is in place.

Cyber security will be a key area of future activities within WellSouth and also across the practice network as more digital services are delivered in this space.

Covid-19 Vaccinations Done per Month



Covid-19 Vaccinations Delivered by Site



WORKFORCE DEVELOPMENT

WellSouth takes pride in providing high-quality and relevant education and training opportunities for general practice staff, community health providers and for our own staff.

Interest in training opportunities remains high, although the impacts of Covid-19 and the vaccination roll-out has meant some training had to be postponed and rescheduled this year.

Added work for practices associated with the vaccine roll-out meant that our much anticipated Receptionist/Administrator Conference will take place in 2022. Our perennially popular GP/NP Education weekend, while delayed, proceeded in October 2020.

TE TIRITI O WAITANGI, LGBTQI+ EDUCATION

WellSouth's Training and Education focus for building health literacy and improving equity this year was on Te Tiriti o Waitangi and LGBTQI+ education for both our WellSouth and general practice staff.

Advance Care Planning training was delivered twelve times during 2021.

CPR TRAINING

WellSouth was prepared for the increased need for a Covid-19 vaccination workforce in 2021, providing 16 additional CPR sessions over the Southern region to support Vaccinator CPR certification from November 2020 through to 30 June 2021. Demand for CPR courses was particularly high in the 2nd quarter of 2021 from general practice and pharmacy, and additional courses were added.



515

People attended **73** CPR session delivered by WellSouth staff, offering **152** professional development hours.

PROFESSIONAL DEVELOPMENT

15% ▲

increase in the number of people registered to attend training in 20/21 financial year, compared to 19/20.

127

WellSouth staff attended **4** different workshops. *Te Tiriti o Waitangi, Let's Make it Perfectly Queer 101 – LGBTQI+, Microsoft Teams and CPR training.*

245 hrs

Of professional development training delivered to primary care by WellSouth staff over **135** sessions during the financial year.



1,844

People registered to attend sessions across the region.

66 courses in **6** specialist areas

Nutrition, Mental Health, Immunisations/Child, Long-Term Conditions, Specialist & Primary Care, CPR training.

COVID TRAINING



60

General Practice staff attended **11** online Covid-19 PPE training sessions.

GP TRAINING



37

GP education sessions offered a total of **64.5** CME points from **14** different workshops.

ONLINE TRAINING



Zoom and Teams delivered sessions have increased this financial year, as facilitators learn the benefits of online training (and the greater certainty they afford) at varying Alert Levels. We expect to see this mode of delivery continue to grow in the coming year, with in-person training also on offer.

CLINICAL STAFF



145

Clinical education sessions facilitated by a combination of WellSouth staff and external providers, offered:

350 Professional development hours

22 Different workshops

GP/NP EDUCATION WEEKEND 2021 TE ANAU

In October, we hosted our 4th Annual GP/NP Education Weekend in beautiful Te Anau. There were 12 presenters over the two-day event attended by 58 delegates.

The benefits of a Southern specific agenda, great networking opportunities, plus a healthy dose of fun, made this event a great success. Our thanks to Southland Medical Fund for continuing to support the education weekend.

New this year, 11 GPEP1s (General Practice Education Programme) trainees participated in the conference.

11 Workshops
59 Attendees
9 Speakers

What our attendees thought of the weekend:

99% Excellent weekend overall
92% Excellent location
97% Excellent networking opportunities



LET'S MAKE IT PERFECTLY QUEER – LGBTQI+ HEALTH WORKSHOP

WellSouth supported four workshops during 2021 to help general practices and our own staff to better understand the health needs of Lesbian, Gay, Bisexual, Transgender, Queer/Questioning and Intersex people (LGBTQI+) and to learn more about delivering appropriate, culturally-safe care.

Invercargill GP David Sar Shalom and artist Ari Edgecombe developed the workshop as an introduction to the LGBTQI+ spectrum, helping foster a deeper understanding, and ultimately, improving health outcomes for LGBTQI+ patients.

“There’s ample evidence of health disparities affecting LGBTQI+ communities and the need to urgently address them to ensure quality care and health equity for everyone,” says David.

“Understanding and trust are at the heart of a relationship between general practice and patients, and LGBTQI+ community is no different.”



Summary Financial Statements

FINANCIAL HIGHLIGHTS

WELLSOUTH PRIMARY HEALTH NETWORK

A full copy of the audited financial report for the WellSouth Primary Health Network for the year ended 30 June 2021 is available from the office at Level 1, 333 Princes Street, Dunedin.

Statement of Comprehensive Revenue and Expense For the year ended 30 June 2021

In New Zealand Dollars

	2021	2020
Operating activities		
Operating revenue - non-exchange transactions	101,659,972	91,974,142
Contract payments	-87,874,597	-77,337,403
Other Deferred Revenue Recognised	-	673,846
Surplus from operating activities	13,785,374	15,310,585
Financing activities		
Interest income	-	59,137
Interest on borrowings	-7,901	-2,037
Surplus from financing activities	-7,901	57,100
Operating expenditure		
Wages, salaries and other staff costs	-10,893,028	-8,284,870
Overheads and administrative expenses	-3,652,635	-4,832,862
Depreciation, amortisation, impairment and loss on disposal	-198,994	-235,350
Total operating expenditure	-14,744,658	-13,353,082
Surplus/(deficit) for the year	-967,184	2,014,603
Other comprehensive revenue and expense		
Total comprehensive revenue and (expense) for the year	-967,184	2,014,603

Statement of Financial Position As at 30 June 2021

In New Zealand Dollars

	2021	2020
Current Assets	10,444,033	9,073,215
Non-Current assets	695,960	634,274
Total Assets	11,139,994	9,707,489
Current liabilities	8,478,253	6,078,564
Non-current liabilities	-	-
Total Liabilities	8,478,253	6,078,564
Net Assets (Trust Funds)	2,661,741	3,628,925

Approved on behalf of trustees:

Chairperson
12 October 2021


Trustee
12 October 2021

Statement of Cashflows

For the year ended 30 June 2021

In New Zealand Dollars

	2021	2020
Net cash flows from/(used in) operating activities	2,568,858	-2,037,414
Net cash flows from/(used in) investing activities	-261,227	-116,895
Net cash flows from/(used in) financing activities		
Net increase/(decrease) in cash and cash equivalents	2,307,631	-2,154,309
Cash and cash equivalents at the beginning of the year	2,414,373	4,568,682
Cash and cash equivalents at the end of the year	4,722,004	2,414,373

Statement of Changes in Net Assets

For the year ended 30 June 2021

In New Zealand Dollars

	2021	2020
Trust Funds at the beginning of the year	3,628,925	1,661,334
Net Surplus	-967,184	2,014,603
Movement in Restricted Funds	-	-47,012
Other comprehensive revenue	-	-
Trust Funds at the end of the year	2,661,741	3,628,925

Notes to the Summary Financial Statements for the year ended 30 June, 2021

1. Basis of Preparation

The results presented in the summary financial report have been extracted from the full financial report for the year ended 30 June 2021, authorised for issue by the Chairman, Dr D Hill, on 12 October 2021.

As such, this summary report does not include all the disclosures provided in the full financial statements and cannot be expected to provide as complete an understanding as provided by the full financial statements.

The entity's full financial statements dated 12 October 2021 have been prepared in accordance with New Zealand Generally Accepted Accounting Practice (NZ GAAP) and they comply with Not for Profit Public Benefit Entity Accounting Standards (PBE Standards (NFP)). The accounting policies adopted are consistent with previous years except for instances where the accounting or reporting requirements differ under PBE standards (NFP) compared to NZ IFRS (PBE).

The summary financial statements have been prepared using the principles of PBE FRS 43 and comply with NZ GAAP as it relates to summary financial statements for Tier 1 PBE Standards (NFP).

The presentation currency is in New Zealand Dollars.

2. Nature of Audit Opinion

The full financial statements of WellSouth Primary Health Network for the year ended 30 June 2021 and for the year ended 30 June 2020, have been audited with an unqualified audit opinion.

WELLSOUTH PLAN ON A PAGE



Healthy Communities

Prevention, early intervention and community development strategies will improve health outcomes



Whānau-Centred Care

Whānau have a good experience of primary health care which meets their health needs



Evidence-Based Decision Making

Decisions are made on the basis of best available information



Engaged & Empowered Workforce

General Practice and WellSouth staff are committed to, and capable of delivering high quality, culturally safe care

Our provider community and patient outcomes

Achieving equitable health outcomes for Māori

A. Recognising different people with different levels of advantage require different approaches and resources to get equitable health outcomes.

A. Improve health outcomes for vulnerable populations
B. Whānau ora — families supported to achieve their maximum health and well-being.

A. Improve quality and safety of care
B. Develop reliable integrated systems of care
C. Improve the whānau experience of care.

A. Achieve a sustainable financial position **B.** Maximise value from resources

Working together with Iwi, hapū, whānau, Māori providers and communities

A. Evaluate and apply information and knowledge to improve clinical, business and organisational practices
B. Promote enquiry and research to develop, share and apply new knowledge.

A. Engage and empower the general practice workforce
B. Support general practice and WellSouth staff to develop their cultural safety capability
C. Role model our values in all our activities while driving improvement and innovation.

Our Purpose

Supporting the provision of world class primary and community health care to the people of Otago and Southland

Our Vision

Better health and well-being for the people of Otago and Southland

Our Values

He mana tō te whānau *Whānau Centred*
Tōkeke *Equitable* | Pono *Transparent*
Manawa whakaute *Respectful*

OUR TEAM

Senior Management Team



Andrew Swanson-Dobbs
Chief Executive Officer



Wendy Findlay
Director of Nursing



Dr Carol Atmore
Medical Director



Gilbert Taurua
Chief Māori Health Strategy & Improvement Officer



Paul Rowe
Practice Network Director



Graeme Quinn
Chief Financial Officer



Peter Ellison
Associate Māori Health Strategy & Improvement Officer



Moira Finn
Communications Manager



Damon Campbell
Chief Digital Officer



Amira Dabaliz
Programme Manager



Fiona Grayson
People & Culture Manager

Board Members



Dr Doug Hill



Tony Hill



Dr Sue Crengle



Dr Keith Abbott



Donna Matahaere-Atariki



Paul Larson



Amanda McCracken



Tony Dunstan



Dr Susie Meyer



Lealiifanovalevale Erolia Eteuati Rooney

Alexandra

4/59 Russell St
Alexandra 9320

Dunedin

333 Princes St
Dunedin 9016

Invercargill

40 Clyde St
Invercargill 9810



He mana tō te whānau
Whānau Centred

Tōkeke
Equitable

Manawa whakaute
Respectful

Pono
Transparent