



**WellSouth**  
*Primary Health Network*

*Hauora Matua Ki Te Tonga*

**2019**

***Annual Report***

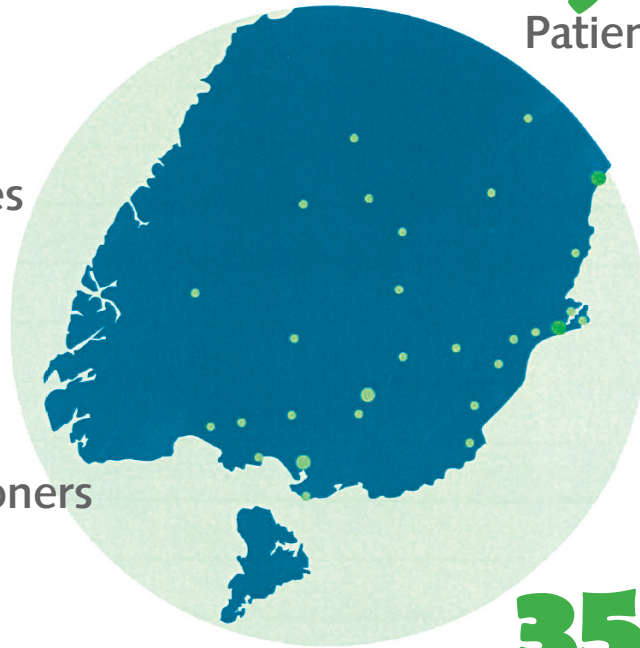


# Where We Operate

**1,153,501**  
Patient Contacts

**81**  
Practices

**17**  
Nurse Practitioners



**400**  
GPs, Registrars and  
Locums

**357**  
Practice Nurses

**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, Lawrence Medical Centre, 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, Caversham Medical Centre, Community Support Medical 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, Maori Hill Clinic, Meridian Medical Centre, Mornington Health Centre, Mosgiel Health Centre, Musselburgh Medical Centre, Otago

Peninsula Medical Centre, Outram Medical Centre, Pitt Street Medical, Roslyn Health Centre, Servants Health Centre, Te Kaika Caversham, Waverley Health

**Invercargill:** Doctors Baillie and Corkill, Bester McKay Family Doctors, Catherine Street Medical Centre, Doctor Johri's Practice, Doctor Adam's Practice, Dr Cleveland's Practice, Glengarry Medical Centre, He Puna Waiora, Invercargill Medical Centre, Murihiku Whanua Hauora, 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, Maitai 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 and Junction Doctors, Oamaru Doctors, South Hill Family Practice, Whitestone Family Practice

**Māori and Pacific Providers:** Arai Te Uru Whare Hauora, Aukaha, Awarua Whānau Services, Fale Pasifika o Aoraki, Hokonui Runanga Health and Social Services Trust, Nga Kete Maturanga Pounamu Charitable Trust (NKMPT), Pacific Island Advisory and Cultural Trust (PIACT), Pacific Trust Otago, Te Hou Ora Whanau Services, Te Roopu Tautoko Ki Te Tonga, Tokomairiro Waiora Incorporated, Uruuruwhenua Health Inc, Waihopai Runaka Inc

# Chief Executive's Report

It's an honour to have joined the dedicated and accomplished team at WellSouth. I was eager to take on the CEO role because of the excellent opportunities that exist here, including the chance to work with the outstanding WellSouth team.

Our staff, Southern's Primary and Community Care Strategy (PCCS), and a robust network of general practices across the district – these are the fundamentals in place that give me tremendous confidence we will continue to be innovative in delivering programmes and services.

There are many excellent initiatives in place supporting primary health care services in the Southern district and furthering integration with other health providers, both in our hospitals and in the community.

WellSouth's Client Led Integrated Care (CLIC) programme was introduced this past year to help long-term conditions patients achieve better self-management with the support of their primary care provider. The initiative has been well-received by patients and practices. CLIC has also received industry recognition with a Health Roundtable award.

The Health Care Home programme, a key part of the Primary and Community Care Strategy, which improves capacity and capability in primary care, continues to be a flagship initiative for WellSouth. There are 15 practices participating and more than 120,000 enrolled patients benefiting from improved access to services and more.

Throughout the pages of this report you will see many examples of the fine work the WellSouth team carries out everyday: Our health promotions staff, brief intervention/mental health team, the falls and fractures prevention service, our dietitians, pharmacists and outreach teams. Each group has a different role to play but all do their part to support the people of Otago and Southland to live better, healthier lives.

Of course, WellSouth programmes and services are nothing without our people and we want to ensure we attract and keep the very best clinicians and support staff. With this goal in mind, we've introduced a strategic remuneration strategy to ensure pay and conditions are consistent across our organisation and competitive within the health sector.

On the next two pages you will see WellSouth's new Strategic Plan. Our whole organisation worked together to develop the vision, principals and values. This is a great summary of the organisation we want to be. You'll be hearing more about this in the future, as all our activities are expected to align with the plan.

The foundations are in place for WellSouth to continue to grow and I believe we are on a course for even greater success in the future. I look forward to making a contribution.



**Andrew Swason-Dobbs**  
Chief Executive

A handwritten signature in black ink, consisting of several overlapping loops and lines, positioned below the printed name and title.

# WellSouth Strategy

This past year we have worked to develop and communicate an overall strategy for our organisation, including our vision, core areas of focus and new organisational values. These principles will guide us in our work delivering the best possible primary health care to the people and communities we serve.

## Our Purpose

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



1

### Healthy Communities

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



2

### Whānau-Centred Care

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

## OUR PROVIDER COMMUNITY

❖ Achieving equitable health outcomes for Māori

❖ Working to

(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 wellbeing

(A) Improve quality and safety of care  
(B) Develop re-integrated systems  
(C) Improve the experience of

(A) Achieve a sustainable financial position

## OUR VALUES

He mana tō te whānau - Whānau  
Manawa whakaute - Respect

## Our Vision

Better health and wellbeing for the people of Otago and Southland



3

### Evidence-Based Decision Making

Decisions are made on the basis of best available information



4

### Engaged & Empowered Workforce

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

## AND PATIENT OUTCOMES

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

Quality and  
reliable  
systems of care  
for whānau  
care

**(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

Position (B) Maximise value from resources

Whānau Centred | Tōkeke - Equitable  
Respectful | Pono - Transparent

# Chairman's Report

In our ninth year as a single primary health network, WellSouth continues to grow and improve our service delivery. Our Annual Report 2019, is filled with examples of progress and innovation, initiatives and services that support quality primary care for the people and communities of Southland and Otago.

It's been a year of many highlights but I must begin by acknowledging the significant contribution of Ian Macara, who retired from the CEO role in December. Ian was instrumental in building WellSouth, bringing together nine PHOs under the one WellSouth umbrella. The comprehensive and coordinated network of health providers that we are today, supported by WellSouth's diverse clinical services, is testament to Ian's vision and dedication.

Our board has also been supportive and encouraging in helping the organisation to become among the most progressive PHOs in New Zealand. We're grateful for their guidance, commitment and enthusiasm for our work.

We are fortunate to have welcomed Andrew Swanson-Dobbs to the CEO role in March. Andrew brings a host of experience and a true passion for primary care to his role, joining us from Pinnacle Midlands Health Network. Andrew's contribution is already being felt as he works with practices, our executive team and Southern DHB to continue the implementation of the Primary and Community Care Strategy (PCCS) and broadening the benefits of the strategy to more practices and providers across the district.

WellSouth has led the successful roll out of the Health Care Home programme in Southern. There are currently 15 Health Care Home practices across the district, representing more than 120,000 enrolled patients. Building on this early success, HCH will continue to be a focus for the WellSouth team over the next year, including sharing their experiences with non-HCH practices.

We are in a strong position financially and will continue to be prudent while investing in programmes and services that most benefit patients and whānau of the Southern district. Attaining equity for our Māori population, as well as greater focus on mental health services for all, are among the areas where we expect to make progress in the coming year.

The voice of primary care has never been stronger in the Southern health system than it is today and I believe WellSouth will continue to be an organisation that is moving forward.



**Doug Hill**  
Chair

A handwritten signature in black ink, appearing to be 'Doug Hill', written over a light blue horizontal line.

# Annual Medical Director Report

As Medical Director for WellSouth, I believe the role of the PHO is to support and strengthen general practice and the rest of primary care. General practice teams in our district continue to work hard, providing excellent care for their populations. We continue to work towards enabling general practice to do its vital work and assisting where possible. Sometimes this is through directly supplying services, such as brief intervention, clinical pharmacists and dietitians. Often our assistance is as advocate, giving a voice to general practice (and the rest of primary care) in the health system as a whole. General practice sometimes suffer from low visibility to the whole of the medical system.

## There have been a number of interesting developments this year, including:

- Free under 13 care
- Change to Client Lead Integrated Care (CLIC) from CarePlus
- The Primary and Community Care Strategy rollout, in particular Health Care Home development. This is now being utilised by a good number of Southern practices, and leading to a lot of learnings that can be used in other practices
- Thalamus IT being rolled out to practices.

As always, we aim to listen to practices and communicate about the upsides and downsides of changes in the system.

Advocacy, helping to reduce or mitigate challenges for general practice, is another vital part of our role.

## I recognise a number of challenges in general practice, as they are elsewhere in the country:

- Increasing costs and compliance, especially paperwork
- Workforce recruitment and retention, more in some areas than others
- Difficulty accessing secondary care for some patients due to pressure on the rest of the system
- Increasing complexities of patient care due to an aging population and improved medical options for care.

This year, we had an enjoyable and educational CME weekend for GPs on Rakiura Stewart Island. We hope to make these forums a regular event in the future.

Health Pathways are continuing to improve, with more than 600 Pathways now localised to the Southern district. When well-constructed and implemented, these can provide an agreed model of care and an agreed referral pathway based on patient acuity.

I look forward to continuing to work with you and on your behalf in the coming year.



Dr Stephen Graham  
Medical Director  
WellSouth PHO



# Director of Nursing Report



## Brief Intervention Primary Mental Health

The Brief Intervention Primary Mental Health service continues to make quality improvements. Referrals to the service have been streamlined via the WellSouth Portal. This helps ensure a responsive flow of information between the practice and the BI clinician regarding clients utilising the service. WellSouth no longer provides the Youth Brief Intervention Service but continues to offer a range of options to support adult clients, including:

- **Telephone and video counselling**
- **Face to face sessions**
- **Emotional wellness app**
- **Group sessions**

**BIS**  
**4457**  
referrals

## Community Dietitians

Work is ongoing to harmonise the referral processes and treatment priorities between dietitians in primary and secondary care and we're pleased to continue to work with dietetic training programmes in the district, to ensure the next generation of dietitians get opportunities to apply their training with appropriate patients.

The WellSouth dietitian team continues to offer its Healthy Lifestyles course, which provide evidence-based nutrition information and doable practices to help promote healthy eating. This course receives plenty of positive reviews from participants.

In 2020, we hope to do more work on raising the awareness of primary care staff of malnutrition in the older population and a "food first" approach to reducing both risk and managing undernourishment.

## HPV

WellSouth continues to deliver the School Based HPV Immunisation Programme to Year 8 girls and boys throughout Southland. (Public Health Nurses deliver the programme in Otago.)

Of the total number of children vaccinated in Southland schools, 47% were girls and 53% were boys.

A list of the children who decline the school programme in Southland is supplied to general practices to be recalled and offered the vaccine course at a later date.

## Long Term Conditions Team

### Clinical Pharmacists

Our pharmacists provide vital advice to patients and general practice teams. From medicine reconciliation and reviews, to adherence support, their work has substantive impact. Of 2733 consults this year, there were 946 clinical medication reviews, and beginning in the second half of the financial year, pharmacist prescribers did 1204 prescriptions.

### Long Term Conditions Community Nurses

Continuing to provide a valued service to general practice teams in support of complex patients with long term conditions. The team provides not only clinical support but shares their knowledge and skills with clinicians to build the capability of managing complex patients for future interactions.

Professional development sessions were provided to 128 nurses and general practitioners on long term conditions.

**2733** Clinical pharmacist referrals

**946** Clinical medication reviews

**1204** Prescriptions



## Clinical Quality Committee

The Clinical Quality Committee provide clinical input into a large number of our WellSouth programmes. This group's guidance, and leadership is invaluable to the development of our programmes, ensuring they are clinically relevant and financially sustainable for implementation in general practice. Thank you to all those involved.

The purpose of the Clinical Quality Group is to:

- Provide expert advice and guidance to the WellSouth management team with regards to the implementation/development of clinical programmes, models of care, and clinical services delivery.
- Establish effective and proactive clinical development to improve health outcomes.
- Formally review operational service reports and monitor activity linked to regional and national quality programmes.
- Provide expert clinical guidance on strategic direction for WellSouth relating to Ministry of Health, DHB, national professional organisations (eg - RNZCGP, NZNO, Pharmaceutical Society NZ etc), initiatives, and requirements.

### Clinical Quality Current Committee Members

Name	Position	Practice
Alison Wilden	Practice Manager	Gore Medical Centre
Amanda McCracken	Board Director, Nurse Practitioner	Tuatapere Medical Centre
Claire Robertson	Nurse Manager	Oamaru Doctors
Dr Daniel Pettigrew	GP	Dunedin North Medical Centre
Dr Keith Abbott (Chair)	GP	Junction Health Medical Centre, Cromwell
Dr Peter Gent	GP	Mornington Health Centre, Dunedin/Primary Care Clinical Leader (Southern HealthPathways)
Dr Phil White	GP	Amity Health Centre
Gaylene Hastie	Practice Nurse	Queenstown Medical Centre
Kelsi Fastier	Pharmacist	Cromwell Pharmacy
Maureen McNeill	Nursing Team Leader	Wanaka Medical Centre
Paul Larson	Pharmacist	Larson's Pharmacy, Dunedin
Rebekah McDonald	Pharmacist	WellSouth
Tony Dunstan	Board Director	WellSouth
Dr Rachel Greenwood	GP	Murihiku Whanau Hauora, Invercargill
Hywel Lloyd	GP/Medical Director, Strategy, Primary & Community	Southern DHB
Wendy Findlay	Director of Nursing	WellSouth
Stephen Graham	Medical Director	WellSouth
Paul Rowe	Practice Network Manager	WellSouth
Katrina Braxton	Clinical Services Manager	WellSouth

### DESMOND and Walking Away

Diabetes Education and Self Management for Ongoing and Diagnosed (DESMOND) is a programme for patients with Type 2 diabetes.

Walking Away is a self-management programme for patients with pre-diabetes.

We now have a total of 13 educators across our district.

**DESMOND**  
**493**  
referrals

**WALKING AWAY**  
**203**  
referrals

### POAC (Primary Options for Acute Care)

**IV iron infusions were added to the POAC suite in January.**

Credentialing of nurses has taken place to enable them to insert Jadelle long acting contraceptive devices in general practice. Several nurses across the district are now working at the top of their scope, and offering this procedure to their patients, with GPs also offering this service in other practices. The programme commenced in May and is available to high needs women.

**340**  
IV Iron infusions

**51**  
Jadelle insertions

## B-Well Falls and Fracture Prevention Service

The B-Well Falls and Fracture Prevention Team is a small team of nurses, physiotherapists and an occupational therapist.

Our B-Well team are passionate about keeping older people well and independent. Positive ageing is about providing the best quality of life for older people. A joint initiative by the Ministry of Health, Health Quality and Safety Commission and ACC aims to keep older adults safe on their feet and reduce injuries from falls.

WellSouth is part of the national 'Live Stronger for Longer' movement. We are working to help reduce the risk of falls and fall injuries for older people in the Southern district, through:

1. in-home strength and balance programmes designed to prevent falls
  - WellSouth can support you with a safe and effective home exercise programme, if getting out and about is difficult
2. supporting community strength and balance exercise groups
  - WellSouth is supporting exercise classes aimed at improving strength and balance, as well as helping develop new classes in the Southern district. These classes provide evidence-based exercises in a safe and effective way
3. working with GPs to identify patients who are at risk of fractures related to poor bone health.
  - Your bone health is linked to your risk of having a broken bone. Your GP can help you reduce this risk with a fracture risk assessment.

**303** people have received in-home strength and balance exercise programme. **2325** are attending a community strength and balance class. **2108** have been assessed through Fracture Liaison Service.

## Client Led Integrated Care (CLIC) Programme

The rollout of our Long Term Conditions Programme, CLIC, is well underway. This continues to be an intensive but exciting programme of work for the team, with small sessions for clinicians and practice managers onsite, in practices, and one-on-one mentoring and support within each practice as they transition to the new programme. Based on feedback we receive from practices, we're improving the programme as well.

We currently have 59 practices which have transitioned to CLIC, from CarePlus, and plan to have the remaining practices moving to CLIC by 31 December 2019.

The CLIC programme recently won The Health Roundtable Award for Outstanding Innovation 2018.

**6645**  
Current CLIC Patients

**167**  
Level 0

**3013**  
Level 1

**2344**  
Level 2

**1121**  
Level 3

## Pipelle Programme

The pipelle programme has enabled more than **700 women** to access this diagnostic test within a general practice environment.

# Practice Support

## General Practices

WellSouth contracts 81 general practices to provide primary care to patients in Southern district who enrolled 309,794 patients at 30 June. This is more than just GP visits: general practices provide care from nurses, allied health professionals, and mental health services. They provide proactive and preventative care for their patients, liaise with hospital specialists, pharmacy, and labs. Primary care is truly the engine room of healthcare in Southern district. In 2018-19 primary care provided 1.153 million patient contacts.

## National Enrolment Service

This year saw a significant change in how practices enrol patients, with the implementation of the National Enrolment Service (NES).

This means practices receive funding for patients more quickly than under the previous system. The capitation-based funding model remains, but the data that is produced is more accurate and timely.

Implementing the change to NES has been considerable work for general practice and WellSouth acknowledges the time and efforts that have gone into making the changeover a success.

## Lower cost general practice visits for Community Services Card holders

In December 2018, the government delivered one of its key election promises - improving access to primary care by reducing fees for less well-off patients. For participating practices, fees are capped at \$13 for those aged 14-17 and \$19 for patients with Community Services Cards (CSC). While caring for all patients, general practices in the district have adjusted well to the change and continue to focus on the most vulnerable.

## Health Care Homes Practices

Started in July 2018	Started November 2018	Started June 2019
Amity Health Centre (Dunedin)	Aspiring Medical Centre (Wanaka)	Health Central (Alexandra)
Gore Health Centre	Broadway Medical Centre (Dunedin)	Clutha Health First (Balclutha)
Gore Medical Centre	Junction Health (Cromwell)	Invercargill Medical Centre
Queenstown Medical Centre	Waihopai Health Centre (Invercargill)	Te Kāika (Dunedin)
	Wanaka Medical Centre	Mornington Health Centre (Dunedin)
		North End Health (Oamaru)

## Southern Health Care Homes

The Southern Health Care Home programme has gone from strength to strength during 2018/19. The first four practices completed their first year embedding better processes and turned their attention to the real work of Health Care Home (HCH) - making improvements important to their patients and the Southern health system.

The second group of five practices have made excellent progress as well, and they too have started to turn their attention to what they will do next. For both these groups, they will spend the next two years on projects like better coordination with secondary care, working with community pharmacies to support patients' medicines adherence, and identifying and supporting Māori patients and whānau.

The group of six practices that started this winter bring a different flavour to Southern Health Care Home: nearly 60,000 patients in total, more than 20% of which are high needs. These practices will spend the next year working to get Health Care Home established, increasing their patient portal numbers, implementing GP triage, and refining their clinical and business processes. The goal of these is to give them time to focus on patient care and system improvements.

A further group of practices will be identified during 2019/20 and enter the HCH programme.

## 2018/19 highlights:

- The largest practices in our district are now in Health Care Home, with 121,000 patients in total (nearly 40% of enrolled patients), of which 20,370 are high needs and 10,838 Māori.
- 2,968 additional appointments were made available as a result of GP triage, and 8,401 patients had a GP quickly determine their needs without coming into the practice.
- Patient portal numbers have grown quickly: 27% of HCH patients have an actively used portal (14% for non-HCH patients), compared to 12% a year ago (9% for non-HCH patients).
- 32,899 patients have access to their consultation notes via OpenNotes
- Online appointment booking saves hundreds of hours of administration time each month.
- 70% of HCH CLIC patients have one or more shared care plans, compared to 24% in non-HCH practices.
- Consistently positive feedback from practices about HCH, particularly moving onto their patient priorities in year two.

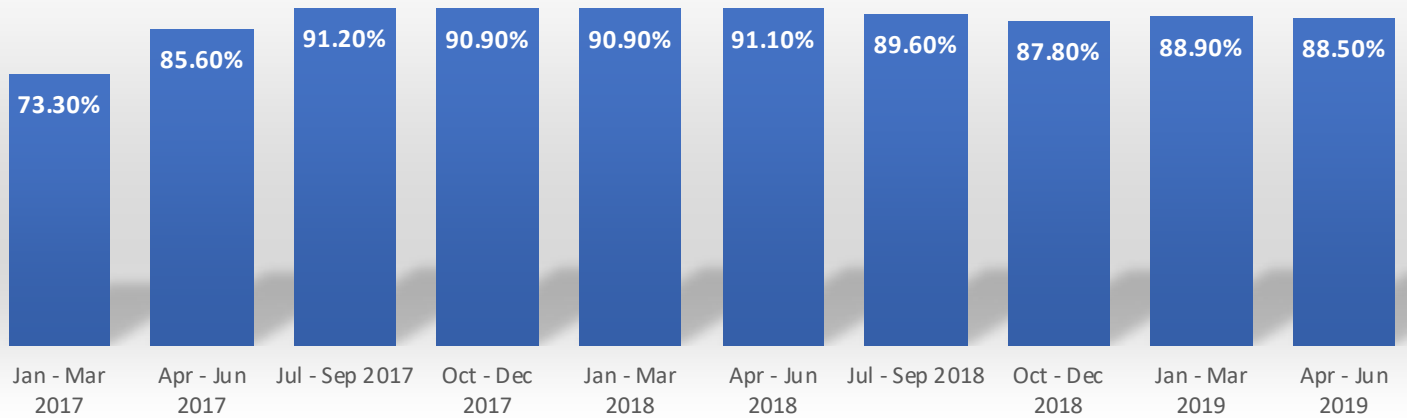
# Health Targets

Practices in Southern district commit significant resources to helping patients manage their long-term health.

## Better Help for Smokers to Quit

At the end of June 2019, 89% of people who smoke had been offered support to stop smoking in the previous year. WellSouth and general practices continue to work towards the government's Smokefree 2025 goal in partnership with the Southern Stop Smoking Service, Public Health South and the Ministry of Health.

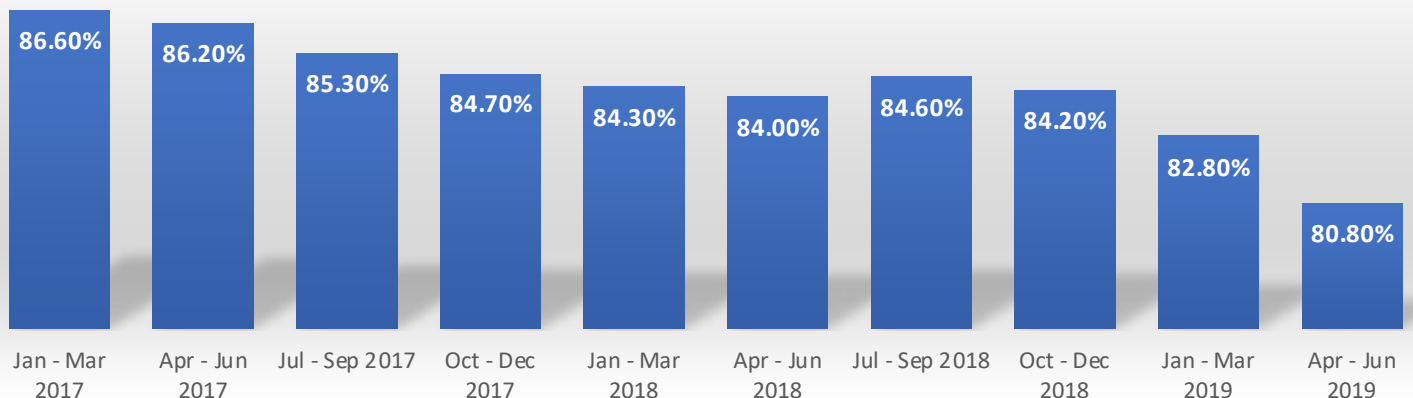
### Better Help for Smokers to Quit



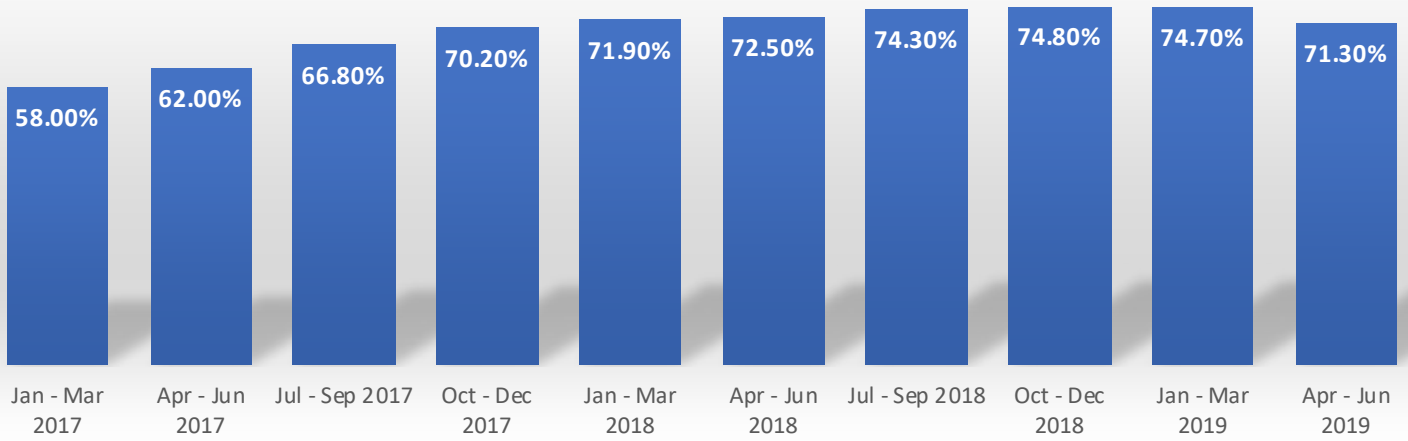
## More Heart and Diabetes Checks

At the end of June, 2019, 81% of patients in the appropriate age cohorts had received an assessment of CVD risk as mandated by the Ministry of Health.

### More Heart & Diabetes Checks



## CVD Risk Māori Men Aged 35-44



### More Heart and Diabetes Checks – Māori Men aged 35-44 Years

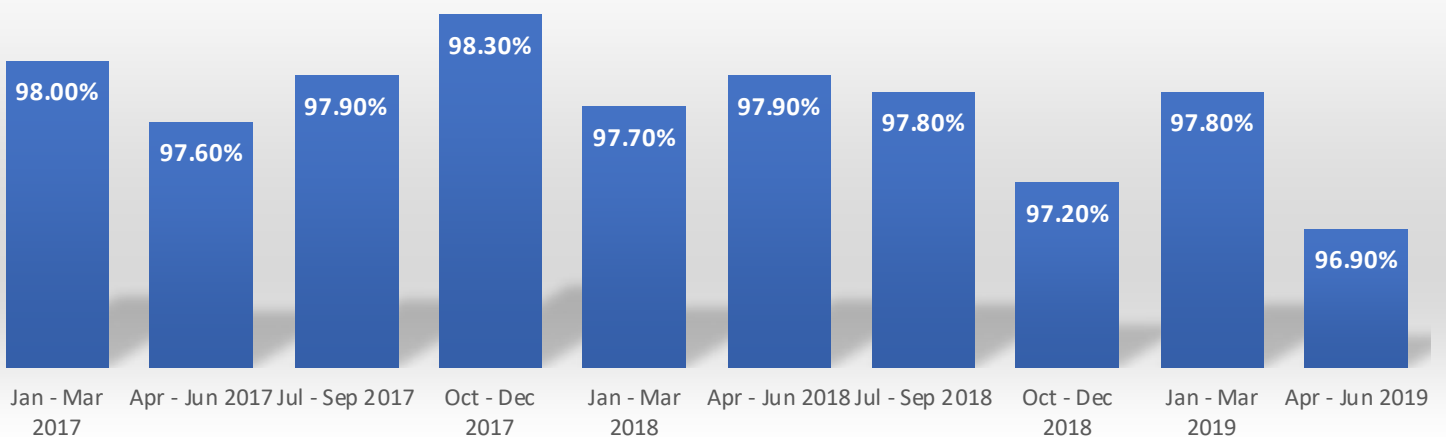
Māori men aged 35-44 remain a priority population for CVD risk assessment. WellSouth's Outreach team supports general practices to identify, recall and assess these patients.



### Immunisations of 8-Month Old Children

Practices and parents in Southern district are committed to immunising their children to protect them from childhood diseases. Practices have been consistently excellent at targeting children for age-appropriate immunisation.

## Immunisations of 8-month-old children



# Bowel Screening

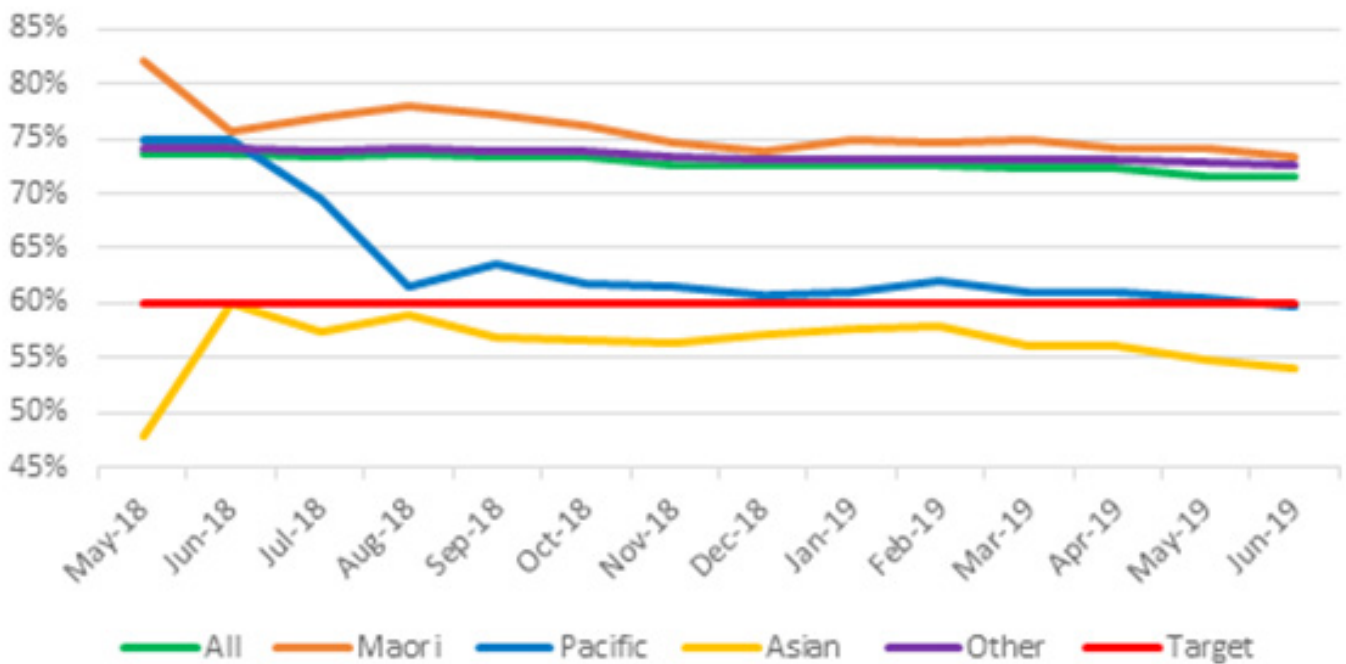
## Māori lead the way for participation in the Southern Bowel Screening Programme

Māori residents are participating in the district's National Bowel Screening Programme in high numbers, with Māori participation rates equalling or exceeding overall participation every month since the programme began in April 2018.

"We believe the Southern DHB's National Bowel Screening Programme has the highest indigenous participation of any national bowel screening programme in the world" says programme manager, Emma Bell. "It's wonderful that so many Māori are taking part and being proactive about their bowel health."



### SDHB NBSP participation by ethnicity



## *Former Refugee*

The Southern district has two refugee resettlement centres - Dunedin and Invercargill. There have been 660 Syrians, Palestinians, and Afghans resettled in Dunedin and 146 Colombians in Invercargill. WellSouth continues to work with Red Cross to support all new arrivals to engage with primary care services.

**660** Syrian, Palestinian, and Afghans resettled in Dunedin and **146** Colombians in Invercargill.



# Māori and Pacific Health

WellSouth continued to support Māori and Pacific Health Providers to further increase these communities' enrolment and engagement with general practice. Kaiarahi (Cancer Navigator) services also continued to support whānau through cancer diagnosis and treatment pathways.

A range of programmes to support Māori, Pacific and other priority populations to access primary care services continued. These included:

- **GP and Prescription Voucher programme**
- **Rheumatic Fever**
- **Sexual Health**
- **CVD risk assessment and management programme**
- **Cervical Screening**

Enrolment Rate by Area and Ethnicity

Area	Maori	Other	Pacific	Total
Central Otago District	97.3 %	95.1 %	57.9 %	94.6 %
Clutha District	91.1 %	88.0 %	86.5 %	88.3 %
Dunedin City	78.0 %	81.7 %	86.3 %	81.6 %
Gore District	89.1 %	90.4 %	78.5 %	90.1 %
Invercargill City	90.3 %	82.7 %	77.1 %	83.6 %
Queenstown-Lakes District	79.1 %	93.9 %	65.0 %	92.7 %
Southland District	78.2 %	84.9 %	74.7 %	84.1 %
Waitaki District	85.9 %	89.3 %	109.7 %	89.7 %
<b>Total</b>	<b>84.2 %</b>	<b>85.6 %</b>	<b>82.8 %</b>	<b>85.4 %</b>

\*please note that these figures are based Stats NZ data which has Southern's residential population at 351,855





# Health Promotion

The Health Promotion Team's programmes continue to expand and have a positive impact on the health and well-being of the Southern community. The team has realigned its workplan to work towards outcomes in:

- Early years - breastfeeding and smokefree homes.
- Equity - relationship building, using Health Equity Assessment Tool (HEAT), former refugee health and rurality.
- Healthy lifestyles - funding programmes such as NZ Heart Foundation to deliver the Health Heart Award for Early Childhood Education, Te Tipuria fund, water-only schools, smokefree advocacy, alcohol harm reduction projects, mental health programmes, like Books on Prescription.
- Better integration - health promotion integration with clinical teams and primary care, relationships and advocacy.

Some highlights of this year's work included:

## Smokefree Advocacy

Significant progress to improve the health of people and the environment comes when our local authorities develop policies to support change. A Smokefree Invercargill CBD declared in 2018 has given the Health Promotion Team an opportunity to support Invercargill City Council and others with signage and promoting the message to the public. WellSouth has supported Dunedin bus hubs to become Smokefree and vape free with signage at bus shelters and seating areas. In Central Otago, WellSouth as part of the Smokefree Coalition supports Central Otago District Council to implement their smokefree policy focusing on outdoor dining as Queenstown Lakes moves to increase the number of smokefree environments. Across our district we are working to reduce secondhand smoke exposure and enabling more supportive environments for people to quit.

## Breastfeeding Support Otago and Southland

The Health Promotion team continue to support the early years of Southern whānau. The Breastfeeding Peer Support programme builds capacity in communities to support mothers and whānau through the normal course of breastfeeding. During World Breastfeeding Week, 16 events were supported throughout the region. 46 new breastfeeding peer supporters have been trained in the district, including Wanaka, Winton, Invercargill, Clutha and Dunedin. BURP App (Breastfeeding Ultimate Refuel Place) has had an update with new places being uploaded continuously and the app being well used.

## Tap Into Water Schools

This project engages and works with local schools, supporting them to implement various water-only approaches within their school environment and community, nurturing and enhancing both student learning and wellbeing.

69 schools were engaged to provide base-line data and tailored follow-up will be given to individual schools to implement further strategies.

## Healthy Heart Award

WellSouth funds the Heart Foundation to deliver the Health Heart Award (HHA) for Early Childhood Education: Tohu Manawa Ora – Kōhungahunga in previously un- or underserved, mainly rural, areas of Southland and Otago. HHA encourages and rewards early learning teachers for promoting healthy food and physical activity to the under-fives and their families. Our Health Promotion Team works with the Heart Foundation to deliver a project called "Ka Pai Sandwiches!" to continue to encourage healthy eating in fun ways. We provide eco-friendly sandwich wraps and an interactive, educational magnet resource to encourage whānau/family to try new and interesting ways to make sandwiches. The concept behind these resources is to encourage children to eat sandwiches provided from home as their first choice. Additionally, they also encourage whānau/family to provide sandwiches and less packaged items.

# TAP IN TO WATER

## What you said



**95%** of Dunedin schools took part in the survey



**100%** of schools have free drinking water available



**Almost 50%** of schools currently have a water-only policy  
**43%** were supportive of a potential policy

**78%** of schools have water taps that are available and visible for students



**1/2** of schools have a water-only approach for all sports competitions, training sessions and events



**1 in 4** schools are supportive of a potential water only approach at all school fairs and fetes



**1 in 4** Dunedin schools have a water-only policy for all fundraisers and promotions, and all special school events eg. discos

**57%**



sugary drinks (including juice)

**54%**



plain milk

**25%**



bottled water

**33%** of schools have a water-only approach for their school canteen or lunch order system



**1 in 3** schools identified lack of parental support as a barrier

**Raising awareness** among the school community was identified as a way to overcome barriers



## Why water?

Losing as little as **1-3%** of **body water** can impair a learner's memory and attention in class



Water can **reduce** classroom **fatigue**



**Choose tap water:** **78%** of plastic bottles in New Zealand are not recycled



In **2016** the Ministry of Education and Health **encouraged all schools** to become water and plain reduced-fat milk only



Water helps you stay **hydrated** which is important for **academic success**

**Challenge the status quo:**

Be part of the solution to creating **healthier school environments**



## Want to know more or have a suggestion?

### Heart Foundation

Qa-t-a-Amun  
Nutrition Advisor - Otago  
Qaamun@heartfoundation.org.nz  
T: 03 477 3999 ext 331

### Public Health South

Annelies Inghelbrecht  
Health and Wellbeing for Learning Advisor  
annelies.inghelbrecht@southernhnb.govt.nz  
T: 03 476 9826

### WellSouth

Sarah Chisnall  
Health Promotion Specialist  
sarah.chisnall@wellsouth.org.nz  
T: 021 921 596 or 03 477 1163

Acknowledgement: University of Otago Master of Dietetics students collected the data from schools

Supported by:



# Information Technology

Kia ora Koutou Katoa

As we embark on another year of Primary Care: Digital Transformation is becoming more and more prevalent in the Primary Care journey. Whether you are a clinician, practice manager, executive or a consumer we are facing significant challenges which are exciting and overwhelming all at once.

Digital technologies are transforming how we deliver healthcare and access the information to provide high-quality care in our communities.

This year will be no different and to embrace the changes ahead, particularly in the data and security space, we need to ensure we are ready for this.

## Data

Data will become an even more important part of how we plan for our future and where resources are focused. A joined-up approach to data analytics and how this is managed and articulated to the sector is very important in ensuring the health of our people is prioritized now and in the future.

At the same time, more access to data has its challenges and we must be vigilant in how we manage access and the environments data is secured in.

## Cybersecurity

2018/2019 saw us focus on security in primary care and WellSouth invested further in cybersecurity to ensure the information we are privileged to be the custodian for is protected and the controls for access managed appropriately. A cybersecurity

assessment was undertaken in 2018 and the output is helping us to improve how we manage and process information in the future.

The controls and processes we have in place now to further enhance our security capability have earned us recognition as a leader in primary care cybersecurity. With this level of maturity our intention is to use our learnings to assist general practice in its own digital transformation particularly in the cybersecurity space.

WellSouth is recognised nationally as leading by example for other health agencies developing and implementing a cybersecurity strategy.

Secure email and faxing is also on our roadmap to assist general practices in finding a sustainable solution to use when communicating information electronically. With the recent announcement from the Ministry of Health, practices are encouraged, along with PHO's DHB's and ACC, to find a solution which protects the transmission of health information without imposing an onerous process on the workforce.

## Patient Portals

The patient portal is an important part of ensuring patients have convenient and up-to-date access to their health records, so they are empowered to manage their health outcomes.

In 2018 WellSouth started on a journey with general practice to provide patient portal services to patients through a funded program of work. The platform (My Hauora) is an agnostic portal available across

the Southern district so no matter where a patient goes, or what practice management system a health agency uses, a patient can access their health records.

The vision is to empower all New Zealanders with the ability to access health services digitally anywhere, anytime on any device.

## Zero Data Project

WellSouth, along with the Ministry of Health and Health Promotion Agency, worked on a pilot for free access to health applications, using the mobile phone networks without any cost to consumers.

The pilot was supported by Vodafone, Spark, Skinny and 2Degrees and was a great example of organisations working together for the greater good of the community.

The pilot was completed with a minimum dataset measuring the success of providing free access to health applications. This data has helped inform all parties and provide a green light to continue looking at the feasibility of a long-term solution in the health sector.

The future of health and technology is exciting and I am looking forward to continuing to work with the sector to help foster new opportunities for our communities.

Nga mihi  
Kyle Forde  
Chief Information Officer

# Workforce Development

WellSouth provides advocacy and support for practices, helping to deliver quality education and training opportunities to further develop all practice staff.

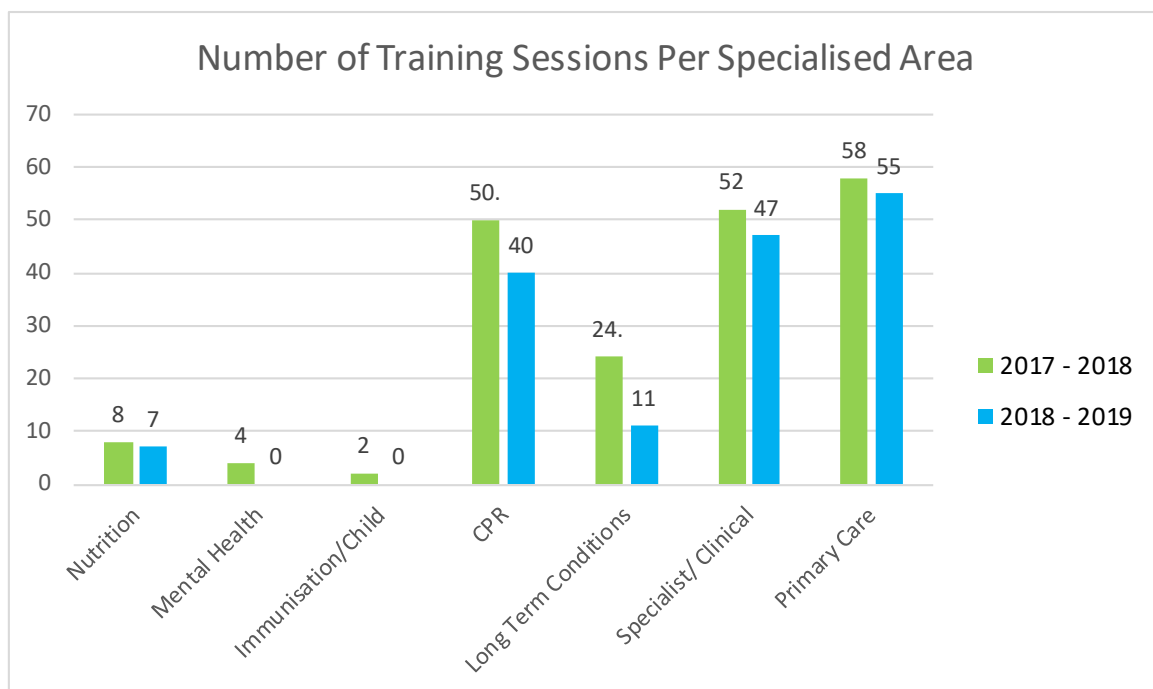
This is evident by the number, quality, and variety of training sessions run over the past financial year.

We've focused on the National Bowel Screening programme, triage training for clinical and non-clinical staff, and the launch of Shared Care Planning. There has also been an increase in training offered to non-clinical staff.

CPR courses have been streamlined and there were more combined Level 2 and Level 4 courses on offer, which has proved to be a successful move.

GPs had more opportunities to gain CME credits due to an increase in the variety of individual education sessions on offer including an education weekend in Rakiura Stewart Island.

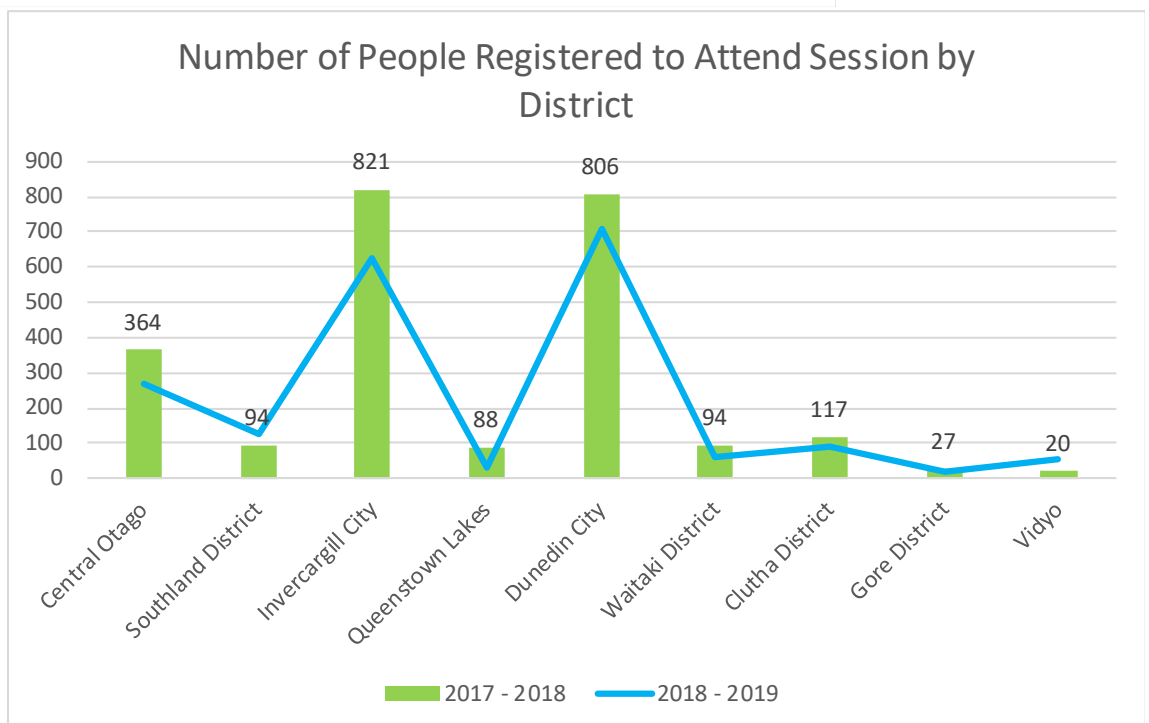
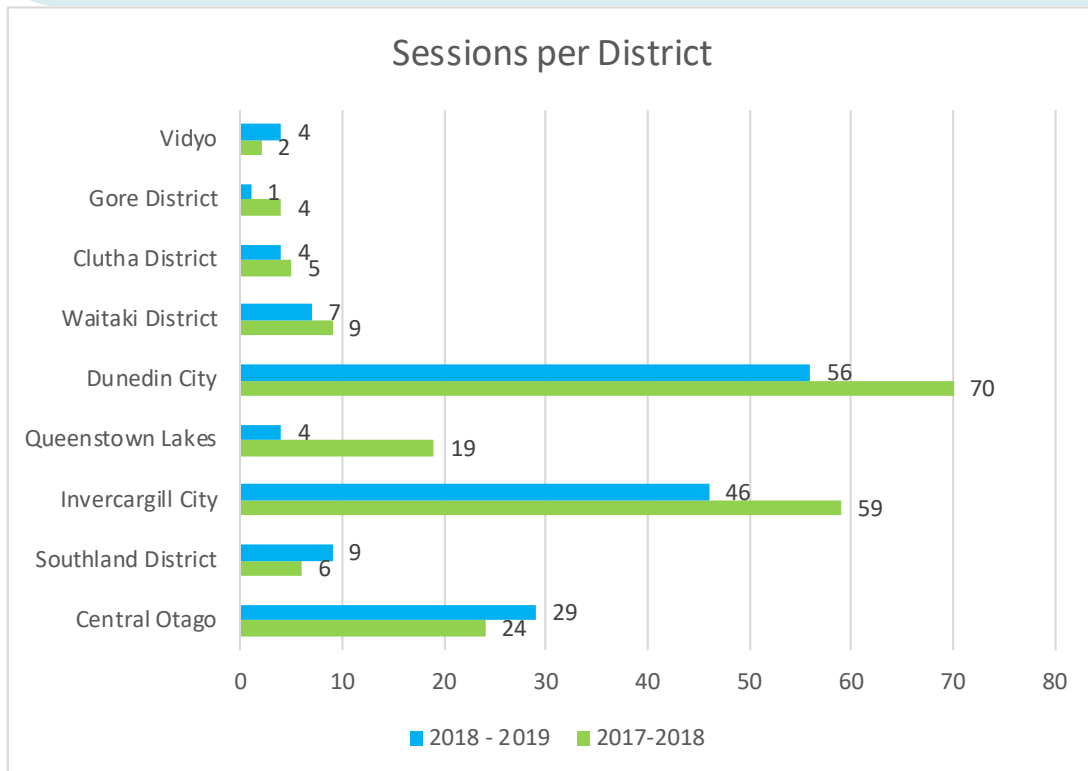
WellSouth increased the number of Cultural Competency sessions offered this financial year to 14 from nine last year. Cultural Competency points were also offered for the first time at this year's GP Education weekend in Rakiura Stewart Island.



# Professional Development

A total of 160 sessions were undertaken over the 7 specialist areas:

- 57 GP education sessions offered a total of 95 CME points from 21 different workshops.
- 145 clinical education sessions offered a total of 349.5 professional development hours from 40 different workshops. This is an increase from 32 workshops last year.
- A total of 1980 people registered to attend sessions across the Otago and Southland regions.
- Across the three regions, 267 people attended the 14 Triage (clinical and non-clinical) sessions, 250 people attended the 14 Cultural Competency sessions and 255 people updated their CPR.



# 2019 Southland GP Educational Weekend Rakiura Stewart Island 3 to 5 May 2019

WellSouth and the Southland Faculty successfully hosted our second GP Education weekend, this time in beautiful Rakiura Stewart Island. 41 delegates attended from across the district and two GP's from the northern regions of Christchurch and Wellington.

Eight speakers presented 11 CME points across the 3 days on a variety of topics. Our speakers included GP's, SMO's and WellSouth's Associate Māori Health Officer.

Our special thanks to the Southland and Otago faculty for supporting their members financially to attend. Thanks also to both the Southland Medical Education Foundation and SouthLink NZ for their generous financial contribution towards this weekend.

We are already working on plans for when and where the next GP educational weekend will be held.

## What did our attendees think of this weekend?



**Weekend Overall**  
**94% Excellent**



**Networking Opportunities**  
**98% Excellent**



**Location Overall**  
**100% Excellent**



**43 attendees**  
**60% Southland practices**  
**had at least one attendee**



**8 speakers**



**11 CME Points**



# Summary Financial Statements

## 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, 2019 is available from the office at Level 1, 333 Princes Street, Dunedin.

#### Statement of Comprehensive Revenue and Expense For the year ended 30 June, 2019

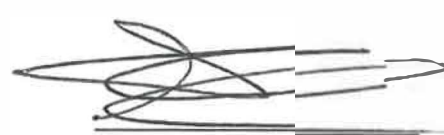
	2019	2018
	\$	\$
Operating Activities		
Income from Operating Activities	80,070,895	70,231,512
Contract Payments	(68,475,091)	(59,465,529)
	<u>11,595,804</u>	<u>10,765,983</u>
Surplus from Operating Activities		
Financing Activities		
Interest income	73,004	41,449
Interest on Borrowings	(4,753)	(6,297)
	<u>68,251</u>	<u>35,152</u>
Surplus from Financing Activities		
Operating Expenditure		
Depreciation, Amortisation and Impairment Expenses	(201,190)	(193,880)
Other Overheads, Staff and Administrative Expenses	(11,490,749)	(10,458,410)
	<u>(11,691,939)</u>	<u>(10,652,290)</u>
Total Operating Expenditure		
Surplus (Deficit) for the Year	<u>(27,884)</u>	<u>148,845</u>
Other Comprehensive Revenue and (Expense)	<u>-</u>	<u>-</u>
Total Comprehensive Revenue and (Expense) for the Year	<u>(27,884)</u>	<u>148,845</u>

#### Statement of Financial Position As At 30 June, 2019

Current Assets	7,427,801	5,431,445
Non-Current Assets	752,729	497,109
	<u>8,180,530</u>	<u>5,928,554</u>
Current Liabilities	(6,511,792)	(4,290,862)
Non-Current Liabilities	(7,404)	(35,260)
	<u>(6,519,196)</u>	<u>(4,326,122)</u>
<b>Net Assets (Trust Funds)</b>	<u>1,661,334</u>	<u>1,602,432</u>

Approved on behalf of the trustees:

  
Chairperson  
8 October, 2019

  
Trustee  
8 October, 2019





**Statement of Cash Flows**  
**For the year ended 30 June, 2019**

	2019	2018
	\$	\$
Net cash flows from/(used in) operating activities	1,877,747	1,248,870
Net cash flows from/(used in) investing activities	(456,810)	(240,070)
Net cash flows from/(used in) financing activities	-	-
	<hr/>	<hr/>
<b>Net increase/(decrease) in cash and cash equivalents</b>	<b>1,420,937</b>	<b>1,008,800</b>
Cash and cash equivalents at the beginning of the year	3,147,745	2,138,945
	<hr/>	<hr/>
<b>Cash and cash equivalents at the end of the year</b>	<b>4,568,682</b>	<b>3,147,745</b>
	<hr/>	<hr/>

**Statement of Changes in Net Assets**

Trust Funds at the Beginning of the Year	1,602,432	1,457,964
	<hr/>	<hr/>
Net Surplus	(27,884)	148,845
Movement in Restricted Funds	(38,590)	(4,377)
Other Comprehensive Income	125,376	-
	<hr/>	<hr/>
Trust Funds at the End of the Year	1,661,334	1,602,432
	<hr/>	<hr/>

**Notes to the Summary Financial Statements for the year ended 30 June, 2019**

**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, 2019, authorised for issue by the Chairman, Mr D Hill, on 8 October, 2019.

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 8 October 2019 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, 2019 and for the year ended 30 June 2018, have been audited with an unqualified audit opinion.



## **Report of The Independent Auditor on The Summary Financial Statements**

### **To the Trustees of WellSouth Primary Health Network**

#### **Opinion**

The summary financial statements, which comprise the summary balance sheet as at 30 June 2019, the summary statement of comprehensive income, summary statement of changes in equity and summary statement of cash flows for the year then ended, and related notes, are derived from the audited financial statements of WellSouth Primary Health Network for the year ended 30 June 2019.

In our opinion, the accompanying summary financial statements are consistent, in all material respects, with the audited financial statements, in accordance with FRS-43: *Summary Financial Statements* issued by the New Zealand Accounting Standards Board.

#### **Summary Financial Statements**

The summary financial statements do not contain all the disclosures required by New Zealand equivalents to International Financial Reporting Standards (NZ IFRS). Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements and the auditor's report thereon. The summary financial statements and the audited financial statements do not reflect the effects of events that occurred subsequent to the date of our report on the audited financial statements.

#### **Other Information**

The Trustees are responsible for the other information. Our opinion on the summary financial statements does not cover the other information and we do not express any form of audit opinion or assurance conclusion thereon. We have read the other information and, in doing so, considered whether the other information is materially inconsistent with the summary financial statements, or our knowledge obtained in the audit of the summary financial statements or otherwise appears to be materially misstated. We have nothing to report in this regard.

#### **The Audited Financial Statements and Our Report Thereon**

We expressed an unmodified audit opinion on the audited financial statements in our report dated 27 September 2019. That report also includes:

#### **Directors' Responsibility for the Summary Financial Statements**

Directors are responsible on behalf of the entity for the preparation of the summary financial statements in accordance with FRS-43: *Summary Financial Statements*.

#### **Auditor's Responsibility**

Our responsibility is to express an opinion on whether the summary financial statements are consistent, in all material respects, with the audited financial statements based on our procedures, which were conducted in accordance with International Standard on Auditing (New Zealand) (ISA (NZ)) 810 (Revised), *Engagements to Report on Summary Financial Statements*.

Other than in our capacity as auditor we have no relationship with, or interests in, The Trust.



**Crowe Horwath New Zealand Audit Partnership**

CHARTERED ACCOUNTANTS

Dated at Invercargill this 8<sup>th</sup> day of October 2019

# Our Team

## Senior Management Team



**Andrew Swanson-Dobbs**  
Chief Executive



**Wendy Findlay**  
Director of Nursing



**Peter Ellison**  
Māori Health Director



**Moira Finn**  
Senior Communications  
Advisor



**Graeme Quinn**  
Chief Financial Officer



**Kyle Forde**  
Chief Information  
Officer



**Paul Rowe**  
Practice Network  
Director



**Stephen Graham**  
Medical Director



**Katrina Braxton**  
Clinical Services



**Grant O'Kane**  
Human Resources  
Manager

## Board Members



Doug Hill



Tony Hill



Stuart Heal



Sue Creggle



Paul Larson



Norman Elder



Keith Abbott



Donna  
Matahaere-Atariki



Tony Dunstan



Amanda  
McCracken

# Contact Details

Email: [info@wellsouth.org.nz](mailto:info@wellsouth.org.nz)

## Dunedin Office

### Physical Address:

WellSouth Primary Health Network  
Level 1, 333 Princes St, Dunedin 9016

### Phone:

03 477 1163 or 0800 477 115

### Fax:

03 477 1168 or 0800 477 116

### Postal Address

WellSouth Primary Care Network  
P O Box 218, Dunedin, 9054

## Invercargill Office

### Physical Address:

WellSouth Primary Care Network  
40 Clyde Street, Invercargill, 9810

### Phone:

03 214 6436 or 0800 800 249

### Fax:

03 214 0325

### Postal Address

WellSouth Primary Care Network  
P O Box 649, Invercargill, 9840



**WellSouth**  
**Primary Health Network**  
**Hauora Matua Ki Te Tonga**