Long Term Conditions Forum 2020

Collaborating to improve equity for the missing and missing out PCW Partnership Community Worker Service

Melissa McCreanor, Maureen van Venrooy and Susan Bidwell



"Rātou ngā karu, ngā taringa, ngā ringa atawhai, ringa manaaki, kei te ngakau manawa rātou o tō tātou hāpori."

"They [PCWs] are the eyes, the ears, hands helping and supporting, and the heart of our community." Hori Poi (First PCW)



PCW- Partnership Community Worker Service

- A health navigation service that supports people who are not enrolled, or who are enrolled but experiencing barriers that prevent them from having their health needs met.
- PCWs work in collaboration with Pegasus PHO General Practice Teams and their local communities to support those with unmet health needs to access health services.
- Established in 2006 by Partnership Health PHO as part of the Services to Improve Access (SIA) initiative and became part of Pegasus Health PHO in 2013.

The aim: to reduce healthcare inequalities AND improve access pathways.



Who do we work with?

PCWs work with people in Canterbury

- Who are vulnerable, may be socially isolated and alienated from support networks and have unmet health needs.
- Who experience barriers to accessing health and other support services.
- All ages.

Referral criteria for PCW Service:

People who are

- Maori, Pacific, Low income, Refugee and Migrant.
- Have physical and/or mental health issue/s.
- Currently enrolled with an Pegasus PHO Practice, those seeking enrolment with a Pegasus PHO Practice and those who are not enrolled with a general practice (GP).



What is the role of the PCWs?

- PCWs identify, manage and reduce the barriers that a person/family/whanau may encounter when accessing health care e.g. financial, lack of information, lack of transport, social isolation, language or cultural.
- PCWs increase independence so individuals have the information, skills and support to manage their own health & wellbeing.
- Focus: sustained change and improving health literacy.

What do we encounter?

- People with long term health conditions with comorbidities and multifaceted social issues.
- Non-engaged, significant hardship / increased complexity.



Partnering for improved health outcomes

- PCW Service, partner agencies, general practice teams and community work together in unity in the shared vision to improve the health and wellbeing of the people of Canterbury.
- Unique Partnership Model between Pegasus and the contracted community organisations- collaboration
- 18 PCWs working across 9 Partner organisations (15.5 FTE).
 Based in community.
- PCW Workforce reflects the diversity of the target population served (multi cultural, multilingual, gender, age).

Nāu te rourou, nāku te rourou ka ora ai te tangata

With your contribution and my contribution we will nourish the people



Partnering for improved health outcomes continued

- NZ Red Cross Funding (2016-2018) to reach those still impacted by the CHCH Earthquakes with unmet health needs.
- Targeted- how we work/ who we work with (Social Housing providers/ churches/ Hospital/ Family violence services etc).
- Discretionary Funding/ Service transformation.
- Partner across sectors (Health, Justice and Education).
- Responsive, flexible established pilots projects.
 (ED, Paediatrics, Guided Release, CHCH City Mission)
- System integration, collaboration, joined up services.



Results 2018-2019

- 4,600 client referrals (25% Maori, 7% Pacific).
 (2018-19 DHB population Maori 9.1% (National 15.1%), 2.5% Pacific (National 6.5%)
- 40% from General practice, 60% wider community.
- The main barrier identified to accessing health care lack of information, physical health, transport, financial and no support/ isolated.
- 48% individuals were connected back to General practice for further interventions and treatment. While 30% where linked to other health which includes community based health services – e.g. physiotherapy, eye specialists, podiatrists, diabetes nurses.

Ehare taku toa I te toa takitahi, engari he toa takitini My success is not my own, but from many others



Benefits

- Improved healthcare for those with the worst health inequities.
- Reduction in Hospital DNAs/ Reduced ED presentations.
- Positive client experience of engagement with health services.
- Improved patient/general practice relationship.
- No waitlist Actively facilitate contact & address determinants of health.

He aha te mea nui o te ao? He tangata! He tangata! He tangata!

What is the most important thing in the world? It is people, It is people, It is people



Client Voice

"Client perceptions of engaging with a health and social care Navigation service: A qualitative study"

Wilkinson, Atlas, Nelson, Mulligan 2019

- Contributed to WellConnected NZ research project.
- Little known client experience.
- Overarching theme Regenerative approach of the navigators towards restoring the clients essence or being (Wairua), and a sense of belonging (Turangawaewae).
- Clients appreciated a service approach that enabled they to feel re-valued as human-beings and were able to re-build autonomy, agency and self-determination because of the therapeutic interaction.





ມs[™] | PCW role

A day in the life of a PCW



No two days, no two clients are ever the same. I know I'm making a difference every day (Sue Amtman, PCW)



What do Partnership Community Workers do?

PCWs role is short term and task focused. It is not an emergency or acute intervention service. While we can support people to attend appointments this is limited and primarily in relation to their health.

PCWs can assist people

- To gain access to health care and social services
- To navigate the health system
- To attend appointments
- To identify and address the wider needs that are impacting on their health
- To link with other community support services
- In the provision of cultural support and ensure people are linked with interpreter services
- To increase their independence and give them information, skills and support to manage their own health and wellbeing



PCW Model of Practice

- Brief Intervention
- Person centred
- Strengths based
- Solution focused
- Sustained change

(Navigate, Empower, Advocate, Link, Broker, Educate, Bridge, Walk alongside, Sustainable change...)

PCW Process





Case Study

53 year old male, Maori

Referral information: Referral was received from GP. Client presents with multiple health issues and unable to afford his medications. When PCW first made contact he had not had any medication for over 3 months. No social supports and socially isolated.



Support given:

- Pegasus prescription voucher used to pay for 11 medications
- Sleep Clinic referral
- CPAP machine replaced, vital for his sleep apnea
- Reviewed benefit entitlements. Application for Disability Allowance
- Support/ advocacy at GP appointment
- Support/ advocacy at MSD/WINZ appointment
- Facilitated/ educated 3 x food parcels
- Supported client upon his request to claim with ACC
- Advocated with ACC
- Referral made for peer support worker with Male Survivors Canterbury
- Christmas parcel for this children to assist with financial stress at Christmas





Evaluation

PCW-ED Collaboration

- PCW referrals through ED/After Hours for attendees with no GP.
- Initial Red Cross funding 2016 now taken over by Pegasus Health.
- Evaluation early 2018:
 - Success factors: clarity of roles, simple referrals, trust.
 - Limitations: better data needed; struggle to find GPs to accept referrals.
- Data from following year (Jul 18-Jun19)
 - 256 referrals: 85 (33%) enrolled with GPs; 19 (7.4%) given other support.
 - Others: declined support, uncontactable, ineligible, relocated
 - Now well established and ongoing; more GPs involved.



Other Evaluations

- "Did Not Bring In" Evaluation
 - Non-attendance of children with complex needs at Paediatric Outpatient Department, Hospital. PCW input decrease in DNAs.
- Pikinga (Steps to Change)
 - Low cost, proactive primary care for reintegrating prisoners and others on society's margins.
 - Linked with PCWs.
 - Highly valued but ultimately unsustainable under current funding
- PCW-Corrections The Guided Release Collaborative Pilot
 - Some successes but hampered by underlying differences in core responsibilities between Health and Corrections.
 - Valuable experience and contacts made initiative now redirected.



Questions and Answers

How do you find the missing and missing out? Do you collaborate for improved equitable health outcomes? What are the challenges?



