



Pegasus Health (Charitable) Limited Annual Report 2018

Welcome to the 2018 Pegasus Health Annual Report

Pegasus Health is a primary care network, providing leadership, support and services to general practices and community organisations with the aim of ensuring Canterbury people are well and healthy in their own homes and communities.

We are often asked questions about what we do and the purpose of our organisation. We have developed some infographics to help explain the depth and breadth of our activity and how we partner with a wide variety of groups and organisations to provide supports and services to general practices and the community.

These infographics will be positioned throughout this report along with a variety of stories to provide readers with context and insights of the valuable partnerships and relationships we have with many organisations and how we all work together to benefit the people of Canterbury.

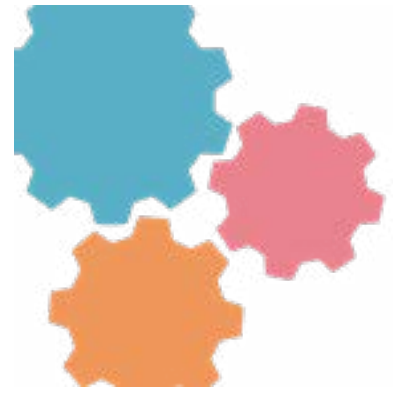
Professor Les Toop
Chair, Pegasus Health Board



Vince Barry
Chief Executive, Pegasus Health



Contents



Introduction

[Chair's Report](#)

[Chief Executive's Report](#)

[Clinical Quality Advisory Board Report](#)

[Population Health Advisory Board Report](#)

[Nurse Membership Limited Report](#)

[Facts and Figures](#)

[Congratulations to individuals recognised for their outstanding contributions](#)

Spotlight on general practice

[Health professionals on the run](#)

[GPs as Leaders Programme](#)

[Gender diversity education timely](#)

[Sirius goes live](#)

[Supporting Nursing Entry to Practice at the 24 Hour Surgery](#)

[BeeFoundNZ one year on](#)

[24 Hour Surgery's first year at Pegasus House](#)

[Rural health – quite a different flavour](#)

[System Level Measures funding](#)

Community Close-up

[Putting study into action](#)

[Re-launch of Reading in Mind for mental health and wellbeing](#)

[Community Support – Children's Day, Senior Chef and Nursing support leads to trampoline donation](#)

[Health students supported by scholarships](#)

[Leadership in Pasifika health recognised](#)

[Te Kāhui o Papaki kā Tai – narrowing the gap](#)

[Reducing barriers to primary health care – the missing and the missing out](#)

System Synopsis

[Network 4 – a year of collaboration](#)

[Breathing programme adapting to patient needs](#)

[Personalised Care Plan – what matters most to the patient](#)

[Your friendly local Community Pharmacist](#)

[Busy year for Homecare Medical](#)

Financial Statements

Statistics and facts

Charitable Objects

Introduction

Partnering For Good Health

Pegasus Health was founded over 25 years ago around organised General Practice and based on the ethos of partnering for the better outcome of patients in Canterbury. Today, with General Practice still at our core, we partner with hundreds of organisations and groups across professions, communities and the regional and national healthcare system to ensure:

- General Practice teams are well supported to provide the best outcomes for their patients
- The voice of primary care is represented and advocated for at both regional and national levels
- We work closely with professional groups to provide an integrated approach to patient care
- Our communities are provided with services to support improved access and equitable healthcare for all



Chair's Report

Professor Les Toop

Pegasus Health (Charitable) Ltd



Above: From left: Arron Perriam (Board Intern), Dr Simon Wynn Thomas, Ms Nicky Scott, Dr Gayle O'Duffy, Prof. Les Toop (Chair), Dr John Coughlan, Dr Caroline Christie, Ms Jane Huria, Dr Sharon Ashmore and Mr Peter Townsend.

2018 has once again been a busy year for Pegasus. This will be my last Chair's report as I will be standing down from the Pegasus board at the upcoming AGM after more than twelve years, including four as Chair.

Firstly, I would like to thank all of those working in Pegasus practices and the many Pegasus teams and management for continuing to move us all forward apace. Throughout this annual report you will read about many of the projects and stories describing the complex web of support that Pegasus provides to practitioners, to practices, to the wider Canterbury health system and increasingly beyond. 2017 saw the end of the first 25 years of Pegasus, a cause to celebrate (and was celebrated in style at Wigram just a few weeks before this year's AGM).

Rather than detail the last 12 months of ups and downs, having had the privilege of being on the journey since the very beginning, I would like the indulgence of sharing my reflections on just a few of the notable and enduring high level successes achieved by our organised general practice group. Successes that have made Pegasus so special and talked about not just nationally but increasingly around the globe. This unity has survived during a turbulent and fast moving quarter of a century. Governments have come and gone, funding formulae and funding bodies have changed but Pegasus has survived and indeed flourished as it has adapted to the changes. The unity of purpose and cohesion shown by such a large and growing group of clinicians, rugged individualists to a one, over such a long period of time has in my view been quite remarkable, even in the face of unfortunate and disruptive behavior by a few of our own at various points along the way.

The wide and increasing array of supports for practices are collectively too many to list has grown and grown and is the envy of colleagues around the country and beyond. I am particularly pleased to see the flourishing leadership programme started in the last twelve months. Succession

planning is crucial for any organization and if we are to maintain our clinically led, management supported ethos then bringing on the next tranche of leaders is all important. The need and willingness to make hard decisions to ensure sustainable provision of our world class after hours care and the recognition of the pressing need to move onto smarter IT systems to keep up with the changing health world are testament to the long legacy of Pegasus leadership and resolve. The courage to roll out a Pegasus adapted Patient Management system (Sirius) with the ambition to have it adopted across most if not all of the network and locally beyond, is testament to the “no problem is too big and no nettle is too painful to grasp” Pegasus philosophy.

The way in which the Pegasus family has embraced the integration agenda whilst maintaining independence and a strong commitment to patient centred care, to being guided by evolving evidence, to distancing itself from vested commercial interests and to embracing and relishing uncertainty and simply to unswervingly stick to doing what seems right have been major strengths that have gained respect from all parts of the system in a way rarely seen in other parts of the country and beyond.

This endeavour has been supported and underpinned by a world class ahead of its time interdisciplinary education programme, one that now is being distributed to many other parts of the country. We have also been fortunate to be in a region with like-minded innovators in other parts of the health system and those facilitating joining up the dots to rebuild a system that has the patient at the centre of design. Canterbury rightly is seen around the world as an exemplar for transformation and integration and along with key leaders in the CDHB, Canterbury initiative and secondary care, Pegasus has been a key player in that success. Of course there is much still to do and there are as always uncertain clouds on the horizon.

Unmanaged corporatisation as is occurring in other parts of the country will, I believe represent a threat to our shared purpose and to many of the things we and our patients hold dear, continuity of care being the most obvious and the economies for shared support and ability to gather the information we need to better understand and manage the needs of our system.

As you read on you will find many interesting stories which illustrate the breadth and depth of activity within the wider Pegasus which I believe is in good shape in good heart and has a bright future with many bright and enthusiastic young colleagues coming through to pick up the baton. I wish you all and the refreshed board the very best of luck and the fervent hope that you won't need to rely on it.

Chief Executive's Report

Vince Barry

Pegasus Health (Charitable) Ltd

It is important for me to take this opportunity to acknowledge and thank Prof Les Toop for his incredible commitment and leadership in primary care and with many aspects of Pegasus functions over many years. As a highly credible, local, national and international leader in primary care Les has ensured the Pegasus network is an international area of excellence.

Working in an integrated health system requires strong and enduring system relationships and Pegasus continues to work effectively to achieve those with our District Health Board and Canterbury Clinical Alliance partners.

Over the past few years we have been listening intently to our networks and I'm proud to acknowledge the very good work on our GPs as Leaders programme which will be rolled out to other professional groups. It's a programme aimed at supporting the next generation of leaders in primary care. We've had six booked-out symposiums looking at everything from governance to developing business acumen this year. The highlight was the 'Peg Talks' evening event based on the successful TED Talks format where peers share their inspirational stories with an audience of 80 colleagues.

Peg Talks included a very thought-provoking presentation about the lives of GPs and families who choose to work in rural practices, given by Chessie Henry, daughter of Dr Chris Henry GP in Kaikoura. Chessie has recently launched an insightful family memoir, 'We Can Make a Life', where she outlines the huge sacrifices that our colleagues in rural communities make every day. In her remarkable book, Chessie interviews her father and considers the psychological cost of heroism in relation to the February 2011 Christchurch earthquake where Chris crawled into makeshift tunnels in the collapsed CTV building to rescue the living and look for the dead. The book was launched at Word Writers Festival in August.

Peg Talks included a very thought-provoking presentation about the lives of GPs and families who choose to work in rural practices, given by Chessie Henry, daughter of Dr Chris Henry GP in Kaikoura. Chessie has recently launched an insightful family memoir, 'We Can Make a Life', where she outlines the huge sacrifices that our colleagues in rural communities make every day. In her remarkable book, Chessie interviews her father and considers the psychological cost of heroism in relation to the February 2011 Christchurch earthquake where Chris crawled into makeshift tunnels in the collapsed CTV building to rescue the living and look for the dead. The book was launched at Word Writers Festival in August.

An enormous effort has gone into preparing for the roll out of 'Sirius', our new Patient Management System platform. It is critical that general practice has the technology to enable a more effective general practice team and patient experience. The first practice went 'live' in early August we are now working to support all those practices choosing to transition over the next two years.

A personal highlight for me this year was attending an event where 16 year old Nico Porteous (Winter Olympic bronze medallist) presented a trampoline to the residents of Te Puna Wai Youth Correctional Facility. The Pegasus nursing team who work at the facility coordinated this fantastic and impactful event which illustrated to me how a group of young people can be at such different places in their lives.



Vince Barry, CEO

The one area that continues to challenge us is the provision of effective primary mental health care support to our practice teams and the patients of Canterbury. Our drive to reduce the impact of mental illness within the Canterbury community has contributed to significant pressure on the capacity of our primary mental health resources. We continue to seek solutions and are continuing to refine the programme to ensure the accessibility of primary mental health care.

I want to acknowledge the work of all the teams at Pegasus from 24 Hour Surgery Team to our Events Team, who every day work to their best abilities to support our primary care teams across Canterbury. Thank you for your dedication and striving to make it better.

Clinical Quality Advisory Board Report

Ben Hudson, Chair

The Clinical Quality Advisory Board (CQAB) is a new group. Along with the newly formed Population Health Advisory Board, CQAB aims to continue and build on the work previously done by CPEC and the Clinical Board.

CQAB's remit is wide: we aim to oversee any activity within Pegasus that involves the clinical care of patients, and to support and advise the Pegasus Board in achieving its mission to improve health through high performing teams and innovative community and primary healthcare. As such, our approach is to take both the big picture view, for example in promoting and supporting quality improvement; and also to provide a more focused response to specific questions and emerging governance issues.

CQAB held its first meeting on 14 June 2018 and has so far advised on matters relating to direct to consumer laboratory testing, Pegasus' programmes such as smoking cessation and the development of Pegasus' approach to clinical quality improvement.

CQAB looks forward to fulfilling this role. Its professionally broad-based and experienced membership places us in an excellent position to fulfill this wide-ranging role.

Below: The Clinical Quality Advisory Board - from left Kim Burgess (Clinical Lead for Population health and Deputy Chair), Mick Ozimek (Clinical Lead for Business and Clinical Quality), Ben Hudson (Clinical Lead for Education and Chair), Simon Wynn Thomas (Senior Clinical Lead), Gareth Frew (Clinical Lead for Pharmacy), Pamela Campbell (Nurse Practitioner in primary care).

Absent from photo: Les Toop (ex officio – Chair of PHCL Board), Joy Harding (Nurse in Primary Care) and Ann Richardson (Chair of Population Health Advisory Board)



Population Health Advisory Board Report

Ann Richardson, Chair



Above: Back row: Karaitiana Tickell, Yvonne Crichton-Hill, Ben Hudson. Front Row: Mastura Abd Rahman, Helen Lockett, Ann Richardson – Independent Chair, Vicky Brewer, Sandy Brinsdon. Absent from photo: Kim Burgess, Les Toop.

The Pegasus Population Health Advisory Board (PHAB), was established by Pegasus Health to support the organisation to ensure that the people of Canterbury receive quality, coordinated care that is easy to access and is community based, and to support all population groups to achieve optimum health outcomes and reduce disparities. PHAB has a particular focus on equity and places an 'equity lens' over the activity of the organisation, especially newly proposed programmes and services. PHAB also focuses on the quality of the patient experience; fostering engagement with the community and Pegasus partners; and advocating for an environment that promotes, and supports wellbeing.

Since establishment, PHAB has received reports on the health status of the Canterbury population and have had presentations from Pegasus Health staff. PHAB has identified the following initial priority areas:

- Equity – overarching PHAB priority
- Pacific ambulatory sensitive hospitalisation (ASH) rates for children aged 0-4 years
- Oral Health
- Amenable mortality

We have also identified the following evidence-informed preventive strategies to address these priority areas:

Primary prevention

- Fluoridation of drinking water.
- Decrease risk factors (tobacco, alcohol, obesity, poor nutrition, decrease sugar and salt intake, decrease red/processed meat intake).
- Increase protective factors (physical activity, breast feeding, increased intake of plant-based foods).
- Enhance existing partnerships between oral health services, public health, and primary care.

Secondary prevention

- Improve access to primary care. Important barriers to access are cost, appointment not available at usual medical centre within 24h, and lack of transport (Ministry of Health NZ Health Survey 2016/17).
- Prioritise access for Māori and Pacific in order to improve equity.
- Reviews show consistent findings that community health workers (CHWs) can improve access to primary care for disadvantaged/ under-served groups. Shared culture/experience and strong links with the communities they serve, and strong partnerships with providers, are important, and CHWs must be supported by appropriate, accessible services.
- Pathways to primary care – Awareness, Accessibility, and Acceptability are important.

PHAB has already made one recommendation to the Pegasus Health Charitable Ltd Board, about supporting fluoridation of drinking water, and we will be discussing further recommendations related to the above priorities at further meetings.

Pegasus Health Nurse Membership Limited Report

Nicky Scott, Chair

It's been a year of changes for Pegasus Health Nurse Membership Limited. Included in this were a number of personnel changes to the Nurse Membership Board since our last annual report.

At our AGM held September 2017:

We thanked Gill Currie, a director of three years who stood down to focus on her Nurse Practitioner role. Her dedication to the director role, passion for enhancing nursing and support of the directors were all very much appreciated.

We welcomed two new directors to the board, Karen Carpenter and Kerrie Hutchings who was previously a board intern. They have both embraced their new roles with great energy and are proving to be valuable additions alongside Jeanette Hight, Professor Les Toop and myself.



Above: From left: Karen Carpenter, Jeanette Hight, Kerrie Hutchings and Nicky Scott.

Retiring Professor Andrew Hornblow, an avid advocate for nursing, talked about his thoughts for the future of nursing which generated lively discussion. We are very grateful for his support throughout his years as director on the Pegasus Health Charitable Board.

For the first time at our AGM, we celebrated two retiring nurse members, Norma Heese and Janet Lockyer. They and their past colleagues Donna Allen and Jeanette Hight respectively told fabulous stories and anecdotes of their careers. It was an evening highlight and we plan to continue celebrating retirees at future AGMs.

During the year we have welcomed six new members, and said farewell to three - two members left General Practice and one member retired.

There were also a number of constitutional changes approved and carried.

The resolutions on constitutional changes were all carried:

- The quorum size for shareholder meetings was reduced to 40%.
- A director may be removed from office on the grounds of loss of trust and confidence.
- No auditor be appointed for the financial statements for the 2017-2018 year.
- Change to accounts preparation under the special purpose reporting framework.
- Change to the constitution: Tenure (Chair) - maximum of three terms, renewed annually.

We had a wonderful turn-out to our mid- year meeting held in May. It was an informal get-together for colleagues outside of the formal general meeting environment. Members Fiona Blair and Sahra Ahmed spoke about their experiences spent working with the Red Cross on overseas humanity missions. Both nurses shared their clinical experience, the strength of the human spirit and the wealth of experience they both have had to apply to these challenging situations.

We had very positive feedback about the format with one member saying “Just wanted to say a big thank you to you and the membership leaders for organising a fantastic meeting this week. All your efforts are very much appreciated by those who get so much out of these meetings”.

As a result we have decided to take a different approach, choosing to celebrate our successes and provide a forum for innovative ideas or any changes which would enhance nurse membership.

Other highlights of the year include:

We gained some great insights from a Nurse Membership survey conducted earlier this year which had a 75% response rate. Support and collegiality were common responses to why nurses became members.

We have updated short videos from new and longstanding members and directors and produced a new brochure about membership. We encourage all our members to check these out and help promote nurse membership. They can both be seen on the [Pegasus Health website](https://www.pegasus.health.nz/health-professionals/become-a-pegasus-health-member/nurse-membership/) (<https://www.pegasus.health.nz/health-professionals/become-a-pegasus-health-member/nurse-membership/>)

Applications for our Nurse Membership scholarships (valued at \$1500) will now be accepted all year round. This means members can apply when the opportunities present themselves. It's great to see the BeeFoundNZ Practice Nurse Locum service up and running. This is a direct result of consultation of the needs of members at a previous special general meeting put into action. We now encourage all practice nurses to use this service.

Acknowledgements

We sadly acknowledged this year the death of a retired member Cushla Shearer. Cushla spent many years as a practice nurse at Eastcare Health and was a supportive Nurse Member.

Thanks to Di Bos in the nursing team who is now our conduit to the organisation and fabulously helps us with our newsletters and accessing information.

Thanks also to Sue Zorn who is extremely efficient and works in the background keeping record on the activities of members and membership.

We thank Susan Taylor (who is leaving Pegasus Health) very much for her skilled work with our meeting minutes and organisation of all things governance. Susan, your help has been much appreciated.

Last but not least, to Professor Les Toop our fellow director who is retiring this year, we whole heartedly thank you. Your unwavering collaborative support, wise counsel and dedication to nursing and the organisation has been second to none. We wish you all the best, enjoying your director retirement.

Facts and figures

GP members

323

PHO Affiliated Nurses

447

Enrolled population by ethnicity 2018
Quarter 2018 Q3 (July 2018)

Ethnic group

Asian	39709
European	343647
Māori	36508
Not stated	2463
Other	4986
Pacific Nations people	11895
Grand Total	439208



Asian	9%
European	78%
Māori	8%
Not stated	1%
Other	1%
Pacific Nations People	3%

Enrolled population by age 2018
Quarter 2018 Q3 (July 2018)

Age band

0-6	32712
6-12	40909
13-17	26828
18-24	35434
25-44	112894
45-64	118768
65+	71663
Grand Total	439,208



<6 years	8%
6-12 years	9%
13-17 years	6%
18 - 24 years	8%
25 - 44 years	26%
45 - 64 years	27%
65+ years	16%

Congratulations to individuals recognised at the 25 year anniversary event for their outstanding contribution made to...



Left: Acute community care beyond General Practice
Dr Dave Richards (left) with Sponsor: Canterbury DHB - CEO, David Meates



Above: Practice nursing
Joy Harding (left) with Sponsor: Nurse Maude - Chair, David Lang



Left: General Practice and population health
Dr Kim Burgess (left) with Sponsor: Homecare Medical - Chair, Roger Sowry



Above: Health system integration
Carolyn Gullery, Executive Director Planning, Funding & Decision Support - Canterbury and West Coast DHB (left) with Sponsor: KPMG - Managing Partner, Andrew Hawkes



Left: Improving the health response to family harm
Dr Clare Healy (left) with Sponsor: St John - Clinical Practice Manager, Curt Ward



Left: General Practice by a GP
Dr John Hudson (left) with Sponsor: Lane Neave - Managing Partner, Andrew Shaw



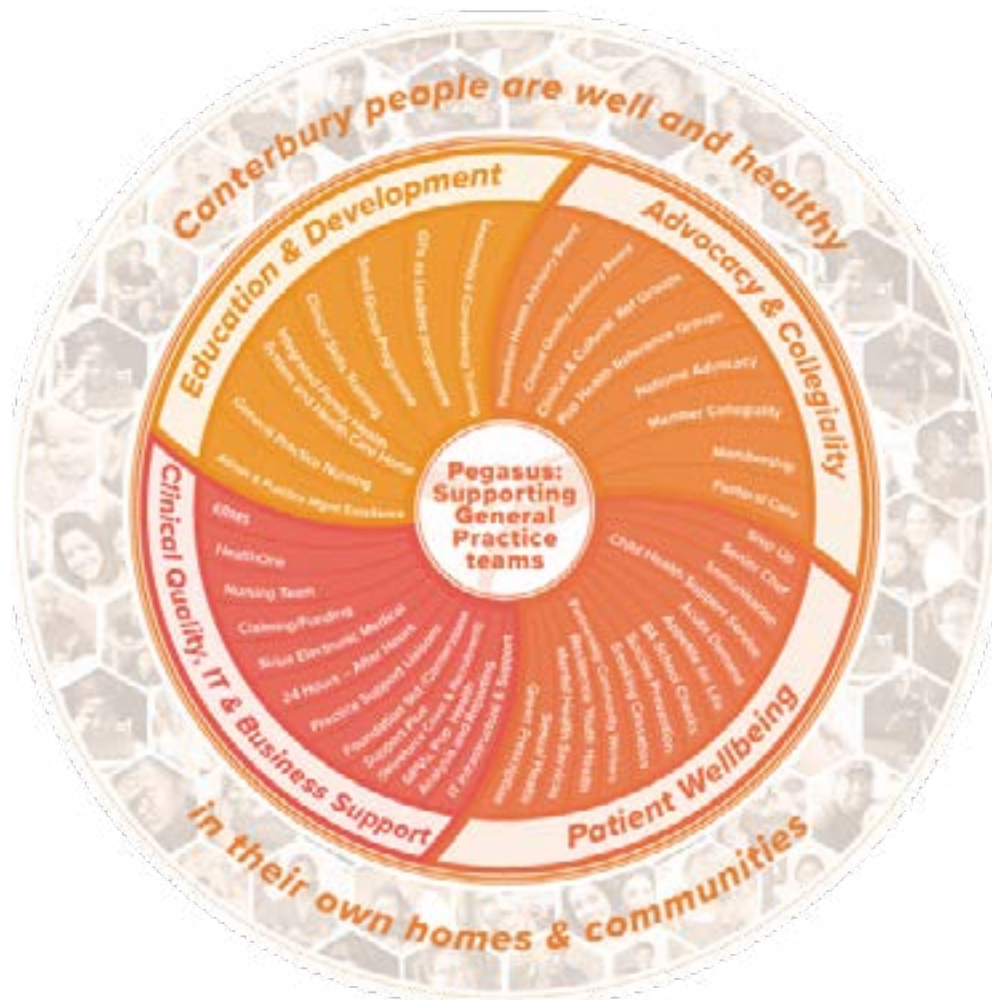
Above: General Practice and its future
Dr Marie Burke (left) with Sponsor: 2degrees - Head of Public Sector, Oliver Richardson

Spotlight on General Practice

For over 25 years Pegasus Health has provided services and supports for general practices in Canterbury. Today, with general practice teams still at our core, this range of services has grown substantially for our GP and nurse members, PHO affiliated practices and general practice teams located from Kaikoura through to Ashburton.

How we support Practice Teams

- Advocacy and Collegiality – Pegasus would not exist in its current position without its strong membership base that incorporates both GPs and Practice Nurses. We have a clinically led governance structure that ensures our membership focus remains at the forefront of our activities and its collective voice is represented on a regional, national and international level.
- Clinical Quality, IT and Business Supports – Pegasus provides a range of services to support the smooth running of a general practice. From IT including infrastructure, the Sirius electronic medical record platform and helpdesk functions, 24 hour medical care for their patients when general practices are not available, and nursing support, through to advice on compliance and services to manage their workforce requirements.
- Patient Wellbeing – Pegasus provides a range of services and support staff to enhance the care provided by their General Practice team. These include services such as immunisation and B4 schools checks through to more specialised supports such as mental health, health promotion and smoking cessation.
- Education and Development – Providing optimal patient care requires a continued focus on learning and development. At Pegasus we are proud of our learning and development programme which incorporates our gold standard small group programme as well as clinical skills training, leadership and competency training, Admin and practice management education and more recently, our GPs as Leaders programme.



Health professionals on the run

Pegasus Health entered a team of 145 people in this year's City2Surf run on Sunday 18 March. The team was made up of Pegasus staff and general practice teams in our network. General practitioners, practice nurses, administrators, 24 Hour Surgery and Pegasus support services staff all donned sports gear to complete the 6km (Hansen's Park to Ferrymead) or 14km (Centennial Park to Ferrymead) course.

The fun run is all about participation, team building, reaching personal goals, and having fun while improving your health and wellbeing. Participants were rewarded at the finish line with a place they and their families could gather, cool off and refuel with a drink and sausage sizzle. Free massages were also provided from our masseuse team, these were very popular.

Papanui Medical Centre had eight participants. Practice Manager Kevin Smith said it important for people who work in health care to support community events such as the City to Surf.

"The leadership provided by Pegasus in encouraging participation in this annual event is an opportunity for members of practice teams to reinforce the benefit of exercise in our busy daily lives. It was great to see so many of the Papanui Medical Centre team take part," says Kevin.



Above: Papanui Medical Centre City2Surf entrants. From left: Holly Barratt, Natalie Powell, Emily Clelland, Kim Jones, Maria Kennedy, Lyndsay Baxter, Linda Newsome and Julie Kember.

GPs as *Leaders* Programme

The aim of this programme, which was launched in March 2018, is to provide Canterbury general practitioners and registrars the opportunity to network and further develop their non-clinical skills with a series of workshops. It was developed by a working group of local GPs supported by Dr Olivia Currie and members of the Pegasus team.

Throughout the year, GPs and registrars have been invited to a range of events where highly qualified and experienced speakers share their expertise and knowledge. Examples of recommended practice are highlighted alongside networking and mentoring opportunities.

Sessions thus far have included finance basics, medical business models, employment basics and governance essentials. Effective communication, dealing with difficult personalities and managing complaints, financial forecasting, debt collection and strategy basics will all be provided before the year ends.

Programme lead, Dr Olivia Currie says it's a real privilege to be part of supporting Pegasus Health's GPs as Leaders programme.

"It is a great resource for Pegasus members and the greater primary healthcare community. Many who have come along to the workshops have found the networking really beneficial for their own practice. They can get together with others in a non-threatening environment and get access to a wealth of resources. The networking events are enjoyed by new and experienced GPs alike," says Olivia.

In June an invitation was extended to all working in Canterbury primary healthcare to come along to the very first Peg Talks event. Based on TED Talks, Peg Talks is all about ideas worth sharing, but within primary healthcare in the Canterbury region.



Around 80 people braved a frosty night to listen to six inspiring speakers:

- Dr Adrienne Chin spoke about her 23 years-experience as a general practitioner obstetrician (GPO). Adrienne is one of only two GPOs still practising in Christchurch.
- Verna McFelin spoke about the impact imprisonment can have on families. She started Pillars in 1988, a charity to support forgotten victims of the criminal justice system - the families of offenders, especially their children.
- Travis Medical Centre GP and sexual assault assessor at the Cambridge Clinic, Dr Heather Peacock, spoke on behalf of Nicola Woodward. Nicola is the Chief Executive of Aviva (formerly Christchurch Women's Refuge), an organisation that aims to free New Zealand families from violence.
- Francesca Henry, daughter of rural doctor Chris Henry spoke about her memoir, which explores her father's harrowing experiences of the Christchurch and Kaikoura earthquakes, and the impact his job has had on him and their family.
- General Practitioner Dr Eugene Sia shared his deeply personal health journey and how his experiences have helped him to develop his interest in holistic and nutritional medicine.
- Fitness professional Bevan James Eyles, shared some of the insights that he has discovered since shifting his career focus to helping beginners. The biggest observation he identified was how the number one key to success for a beginner exerciser was social interaction.

More information about the GPs as leaders programme can be found [here](https://pegasusworld.srphc.health.nz/MyPractice/GPLeaders/Home.aspx).
(<https://pegasusworld.srphc.health.nz/MyPractice/GPLeaders/Home.aspx>)

*To access this link you will need a Pegasus World login.

Gender Diversity education timely

Pegasus Health has been providing Small Group education for General Practitioners since 1993. Today the education groups are open to GPs, nurse practitioners, practice nurses and community pharmacists. Small Group Education meetings are peer-led, evidence informed and encourage teamwork, communication and behaviour change. Topics are chosen based on what is current and where there is a gap between evidence and practice, in order to improve patient care.

A decision was made to offer Small Group Education meetings on gender diversity in April 2018. Louise Kennedy, Team Leader says that as the topic was developed it became apparent just how topical gender diversity is today, and that there was a significant knowledge gap for many health professionals.

“There have been increasing numbers of general news reports on this subject. New Zealand research has reported increasing numbers of transgender patients being referred to Endocrinology services. We had a lot of interest in gender diversity following a 2016 large group session by medical students at Pegasus, it was the right time to deliver this topic,” says Louise.

Ester Vallero, Pegasus Culturally and Linguistically Diverse (CALD) Manager was instrumental in initiating the education.

She says that in spite of increasing awareness of gender diversity in our society, when people who identify as transgender¹ speak of their experience of using primary care services it is obvious that there is space for improvement.

“Many Canterbury GPs and pharmacists told us they want to provide better care for this community but are unsure how. Some are concerned about not having enough specialised expertise. It’s been amazing to see many health professional and the community working together. This is the first step to filling the knowledge gaps and making welcome spaces where transgender people can feel safe and get access to good quality primary health care,” says Ester.

A long list of health professionals and members of the transgender community worked with the Education team to develop the materials. A pre-meeting survey was done to assess attitudes, clinical skills and knowledge about Gender Diversity. Results from a post-meeting survey are currently being analysed.

The education is an introduction to the topic of gender diversity and gender affirming practices. It covers the basics of what GPs, nurse practitioners, practice nurses and community pharmacists need to know to provide safe and respectful patient care to people who identify as transgender.

The sessions covered: Duty of care, barriers to health care, health outcomes for gender diverse patients, transgender health issues, the importance of words and patient experiences. One of the tools used in the session was 'The gender unicorn' – an exercise to reflect on the concepts of gender identity, gender expression, sex assigned at birth, physical and emotional attraction.



Handouts with practical tips like 'Changing Gender on official documents,' 'Importance of pronouns, using preferred name and gender neutral language' and lists of online resources were also made available.

A total of 688 health professionals attended the Gender Diversity Small Group Education sessions in April/ May.

The knowledge made available in the sessions has also been shared much wider than the education groups. Ester and her colleagues presented a session at the Administration and Practice Management Excellence (APEX) forum in August this year incorporating content from equity and gender diversity materials used in Small Group sessions.

The Pegasus Mental Health team and Partnership Community Workers have also taken part in workshops on gender diversity and gender affirming practices. Education materials have been shared with the University of Otago. Directories to further professional development opportunities for health professionals, and to information and resources for transgender patients and their whānau have been developed and are now available to all Canterbury GP practices.

Pegasus Health is also supporting work towards the update of the new Community Health Pathway for gender affirming care, and a co-design project with health professionals and members of the community to continue improving Canterbury health services responsiveness to the needs of transgender patients.

Read more about Pegasus Health's [Clinical Quality and Education Programme](https://www.pegasus.health.nz/health-professionals/clinical-quality-education-programme/).
(<https://www.pegasus.health.nz/health-professionals/clinical-quality-education-programme/>)

¹ Transgender is used here as an umbrella term for people whose gender identity is different from their sex assigned at birth. We acknowledge that people may use this term or other terms to describe their gender identity, including Māori and Pasifika terms.

Sirius goes live

A two year project by the Pegasus Health Business Information System team to develop and launch a new Electronic Medical Record (EMR) system has gone live.



The Sirius EMR system is now operating in two Christchurch general practices and an alpha site in Ashburton. Further practices are booked in to transition to Sirius by the end of the year, and we are expecting a significant number to transition to the new system over the next 12 months’.

Initiated in 2016 in response to membership demand for a future focused patient management system, the Sirius EMR includes a patient management system, a patient portal, and portals for clinicians and extended care teams (e.g. pharmacists). It is based on Intrahealth’s widely used Profile platform and has been designed by local clinicians and practice managers for use here in Canterbury.

Pegasus Clinical Leader Information Technology and Sirius Clinical Reference Group member, Dr Martin Wilson, says Pegasus members asked for an EMR platform that would support a comprehensive and cohesive system of health care that was proactive, responsive and effective.

“We listened, we researched and we worked with the experts to configure an EMR that would meet the needs of our membership and patient communities. We knew it would be a huge challenge and we feel that the Sirius suite of products we’ve come up certainly fit the bill – for now and for the future.

It’s incredibly exciting to see this project come to fruition. The Sirius project has given Pegasus Health an opportunity to help shape the response to challenges facing general practice in Canterbury. We’ve taken ownership of our future,” says Martin.

The project team has worked with the first practices to thoroughly test the product and the data migration tool, and to help develop and refine a 12-week implementation process that guides a practice through the change.”

“Some of the key learnings involved data migration. Our team was forced to find innovative ways to deal with duplicate data and worked hard to fine-tune the migration process. From a practice perspective, we learned the importance of ‘clean’ data and working with the practice early on to clean up files in their current system.

From an implementation perspective we learned the importance of making sure clinicians freed up time for the ‘Go live’ week so they could bed-in the new system without the pressure of a heavy patient load,” says Martin.

Feedback from reference groups, the alpha site and the first two production sites has inspired confidence that Sirius will meet the needs of Pegasus members.

“It’s intuitive, user-friendly and we know it will save them time and money while providing a great experience for the patient. We’re also incredibly proud of our 12 week implementation process. That 12 week period readies the practice for change with trainers and implementation team members supporting practice staff on the journey. Feedback shows that the support and implementation programme is what sets us apart,” says Martin.

The Sirius Team has a two year roll-out programme ahead.

Read more about [Sirius](https://sirius.health.nz/). (<https://sirius.health.nz/>)

Supporting nursing entry to practice at the 24 Hour Surgery

The 24 Hour Surgery (24HS) continues to support the Nursing Entry to Practice (NetP) programme. Graduate nurses, Natalie Hughes, Danielle Kirkwood currently work at the 24HS.

Both 'sing from the same song sheet' when describing their time at the surgery. They agree that the support offered to them is amazing and there is nowhere they would rather be.

NetP provides graduate nurses with additional guidance throughout their first year of practice as newly qualified registered nurses. It allows them to begin their careers safe and confident in their clinical practice.

Bernadette Hayes, 24 Hour Surgery Clinical Nurse Leader, says we value the opportunity to have NetP nurses like Natalie and Danielle working at the surgery. They are a real asset to the team and the 24HS.

"We offer them education and learning opportunities in a safe and supported environment and we're committed to investing in their nursing future."



Above: Danielle Kirkwood and Natalie Hughes

Natalie says she is learning every day, thanks to the team.

"Whether you ask a team leader, a doctor, or anyone on the floor, they are all happy to help. There is so much knowledge here and there are no silly questions."

"It wasn't until I was interviewed for the 24HS that I realised how much I wanted to work here. It fits perfectly around my family and I love the acuity and variety," says Natalie.

"There are lots of opportunities for learning more. Pegasus is a supportive environment with lots of systems in place to help. Everyone is friendly, from the IT staff and so on."

"When you start NetP at the 24HS your first year is protected and supported. In your second year you can buddy with a NetP graduate and during your third year you are assessed and progressed into other areas of the 24HS, so there is plenty of scope. I may look at training to be a triage nurse. It's also good that sometimes we get shifts that aren't so busy, so we can take a step back, share and talk with colleagues and do some online and practical education sessions," says Natalie.

Danielle was at the 24HS as a student nurse for 10 weeks last year and is pleased to be back.

"24HS is where I want to be, as there is so much variety and so many opportunities. You can spend a long time here learning new skills. For a new graduate at the 24HS you have all the support you need."

"It's reassuring to see the other 24HS nurses who have completed NetP and how experienced they are. It makes me feel confident that I'm on the same path," says Danielle.

Bernadette believes the future is definitely looking bright for nursing at the 24HS and within Canterbury and is impressed by the calibre of graduates coming through the NetP programme.

BeeFoundNZ one year on

The Pegasus Health online tool that helps General Practices in Canterbury to find short-term GP and Nurse locums, has shown to be of great value since its launch in June 2017.

General practices have taken advantage of the opportunity to book 1,848 sessions with locums over the last year. Nurse locums were added to the service in December 2017 and now register their availability alongside General Practitioners.

The programme's one simple search function and absence of agency fees has led to Registered Nurse Alison Cane, becoming a regular user.

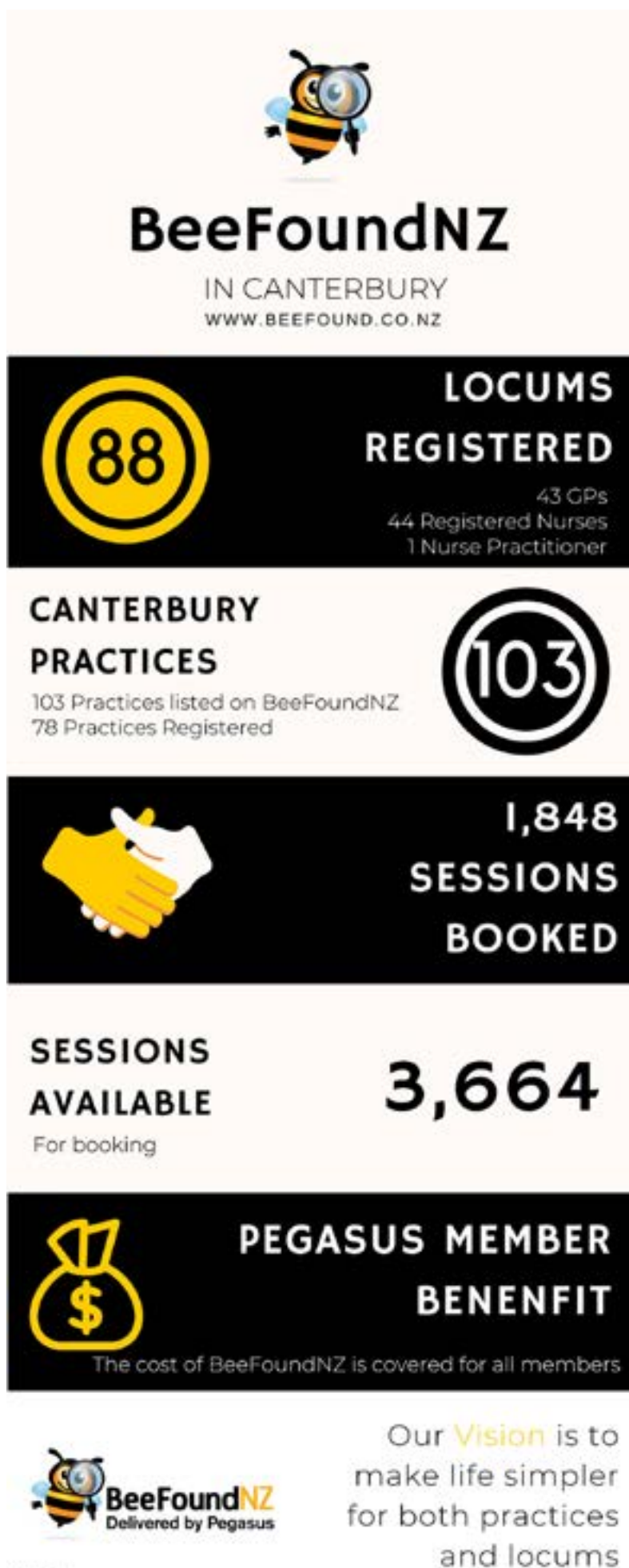
"I've used BeeFoundNZ multiple times since April this year and had almost full time work in practices from Lyttelton to Casebrook. I will soon be working at Etu Pasifika and Travis Medical. I found the calendar and text service especially useful. This keeps all my bookings and info in the same place and reminds me of bookings," says Alison.

Harewood Medical Centre has been using BeeFoundNZ since January. Practice Manager, Johanna Geertsema says it is a great way to see who is available when looking for a locum.

"It's very easy to load information into the system. We use BeeFoundNZ quite regularly – virtually monthly. It's a great tool," says Johanna.

Pegasus Health is now offering the BeeFoundNZ platform to PHOs across New Zealand for licencing, and will also develop the platform to include Pharmacy.

For more information go to the [BeeFoundNZ website](https://www.beefound.co.nz/) - <https://www.beefound.co.nz/>



24 Hour Surgery's first year at Pegasus House

One year has come and gone since the 24 Hour Surgery (24HS) opened the doors to its new facility at 401 Madras Street.

The 24HS team say "The transition has gone smoothly with the new facility providing an improved working environment for our staff and a much better experience for our patients."

The busiest day in the first year was Christmas Eve with 411 patients walking through the door, while the busiest hour was between 11am and noon on 2 July with 44 patients presenting.

"It feels like we have settled into business as usual, providing urgent around the clock care to the community, with an emphasis on team work and communication," says Bernadette Hayes, 24HS Clinical Nurse Leader.

Medical officers (MOs) have covered 70% of the shifts (56% of Public Holidays, 88% of Weekdays; and 43% of Weekends). Nine of the medical officers are now Fellows of the Royal NZ College of Urgent Care, with a further five MOs currently undertaking study in order to attain their fellowship.

At the end of June 2018 the team celebrated Simon Brokenshire's leadership as Clinical Director (CD) for the past nine years and the start of a new era for him back on the floor as a Senior Medical Officer (SMO). Simon has been central in the ongoing growth of the 24HS service and the vital role it plays to help look after the Canterbury community and support general practice. He was also instrumental in the planning and seamless move to the new facility. Simon felt that with these milestones achieved, it was now time for him to return to a clinical role. "We were delighted and fortunate that Simon decided to stay with us in an SMO role," says Claire McQuilken, Operations Manager.

The team also welcomed back Dr Jasmine MacKay who had been on Maternity leave and has now taken on the CD role. Jasmine had been working at the 24HS as an SMO for six years and is looking forward to helping make a difference at the surgery. "We have the best support within Pegasus, with the best facility. It's a unique situation being part of a primary care organisation like Pegasus and one of the best facilities in New Zealand," says Jasmine.

Jasmine is also looking forward to Dr Alf Scragg starting as GP Clinical Leader in late September this year. This is a new role that, in liaison with the Clinical Director, will have a major focus on supporting GPs working in the facility. Other duties will include clinical shifts as a SMO.

During the last year the nursing leadership team has also developed and now includes, Clinical Nurse Educator Sheena McLeod, Acute Demand Coordinator Team Leader Cathy Cooper, Acute Demand Team Leader Debbie Marsden, and Acute Team Leaders Ann Ridden, Sylvia Russell and Kathleen Ashby each of whom have their own portfolios of responsibility.

"The team is committed to developing pathways for professional development, extending nursing roles and quality improvement to ensure our patients are well looked after", says Bernadette.

We are delighted to report that Acute Demand Registered Nurse Chelsea Jones, completed the Registered Nurse (RN) Prescribing Pathway and achieved authorisation to prescribe in April 2018. This achievement is a milestone for the 24HS and the Acute Demand Community Nursing Team, as Chelsea is the first RN Prescriber to work at the 24HS.

This year a review was undertaken of the Fracture Clinic service we offer – the main aim was to streamline the process for patients, ensuring they received appropriate and timely follow up, as well as where possible reducing the need for multiple visits.

Supporting the clinical work of the 24 Hour Surgery is a large contingent of staff from reception, facility assistants and administration staff. These people are integral to the smooth running of the facility.

Michelle Fritz was employed in the Facility Assistant Lead role, and this has strengthened the Facility Assistant team and the processes that allow the clinical area to be kept tidy and stocked, which is difficult task over a 24 hour period. The team is excited about how far we have come and the opportunities ahead.

Below is a small sample of the feedback we have received in the last year:

'The 24 Hour Surgery doctors and nurses are amazing....They helped me so much, and kept me calm. My son suffers from really bad croup, so last night he was seen super quickly and was treated like a celebrity. The nurses Louise and Joshua were fantastic. And the nurse at the front counter was amazing and helped hold him.... He was given a DVD player and popsicle and when we left, he said, "again, again, ok," which means he wants to go back... keep up the hard work.'

'Ata mărie,From the moment I walked in the door and was greeted by the receptionist, I was made to feel at ease. The nurses and doctor who saw me were all professionally friendly, made sure I was well informed and comfortable at all times. Some of the staff were at the end of their shift, and yet they were still bright and engaging. I feel confident I understand what I need to do next, to take care of my wound.'

'I brought a colleague in for medical attention. We were seen by Michael. I wish to say thank you to Michael for the service he offered my friend. We both felt he was patient centred and provided great assessment of my colleague's medical history. Once again thank you for the friendliness of the service.'

'Outstanding team and facility you operate at Pegasus Health Madras Street.'

'Dee, Arthur, Jacqui and Steve were all amazing, Great new building and facilities. Thank you.'



Rural health – quite a different flavour

There are a number of differences between providing primary health care in an urban setting and treating rural patients.

Dr Gayle O'Duffy from the Methven Medical Centre says that working and living in a rural practice has unique challenges.

"We are essentially caring for our neighbours, so the relationship is different. It helps us see our patients in their social context and make decisions using that information," says Gayle.

Methven Medical Centre has 4,100 enrolled patients, a seasonal staff influx of around 500 and a variable number of tourists up to 2,000 during winter. Understandably the rural environment plays a large role in medical presentations to the centre.

"Mycoplasma Bovis disease amongst cows and other stressors on the dairy industry are clearly visible in the mental health of our farming population. The shift from sheep/cropping to dairy over the last 10 years has increased our population with many of the dairy workers being quite transitory. This leads to family issues around the instability of their occupation. We also have an ageing population with insufficient infrastructure to assist. There are no Non-Governmental Organisations in most rural environments," says Gayle.

The centre is also open 24 hours a day and offers ambulance assistance for serious call-outs. Trauma cases that would be sent to the hospital emergency department in towns also go to the local medical centre. Methven Medical provides x-ray and minor fracture management and acute demand home services.

"Our patients have always been keen to be treated at home so we are good users of acute demand with some Point of Care (POC) testing to help us achieve this," says Gayle.

Pegasus Health created a Rural Health Manager role in June 2014 to better support rural general practices, particularly those transitioning to Pegasus, of which there were four initially. That number has since increased to 10. Carol Glover accepted this role. The rural practices she works alongside are located from Kaikoura to Ashburton so Carol is often 'out and about'.

"One of my responsibilities is to help settle a new practice in with Pegasus. I am their initial liaison point, I answer their questions, look at any challenges they may be facing and identify solutions. Having been a practice manager myself at two large rural general practices in Canterbury, I know the complexities involved. I love my time visiting practice teams – it's like coming home,"



Methven Medical Centre staff, from left Kathryn Hellyer and Carol Ashworth

says Carol.

Once the relationship is developed Carol says practices are then linked with other Pegasus personnel including a Partnership Community Worker (PCW), a Practice Support Liaison (PSL) and the Child Health Support Service. All practices are very keen to take advantage of scheduled educational opportunities. The geographic distance of some remote rural practices can make access to these opportunities challenging and Carol is continually looking at innovative ways to make access for these practices more equitable.

Gayle backs up the value of having Pegasus support. She says that it is comforting to feel Pegasus is in the background taking care of general practice – whether that be lobbying, negotiating with the Canterbury District Health Board, or looking to the future for what may be needed.

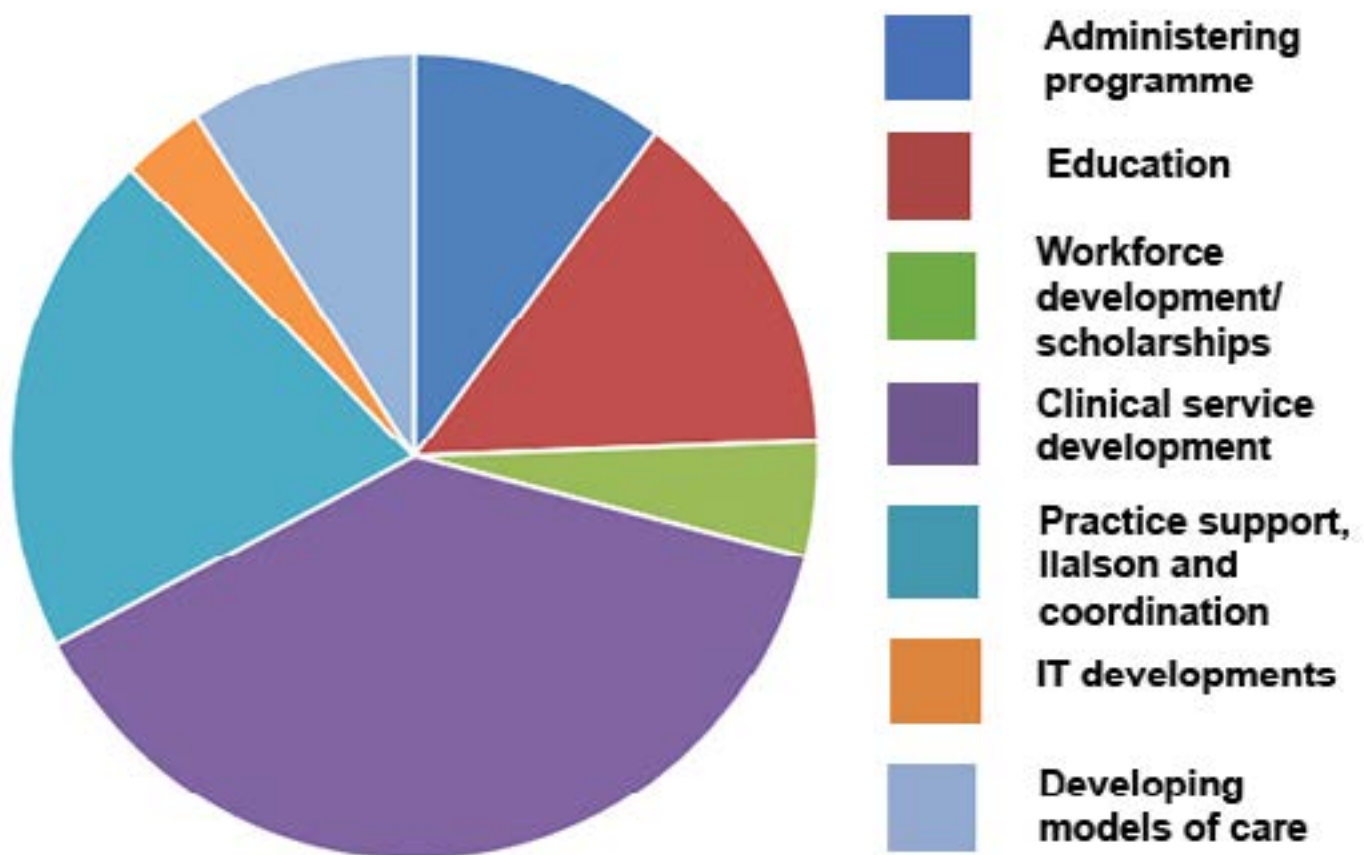
“Pegasus has resources when we need it. IT help is always greatly appreciated and Support Plus (Human Resources services) has also been an enormous help. The partnership between Pegasus and Canterbury DHB means better access for our patients to health services compared with other areas in New Zealand,” says Gayle.

System Level Measures funding

The System Level Measures (SLM) framework continues to develop. Pegasus, along with other PHOs, receives a portion of Canterbury's funding which is provided both to build capacity and to achieve quality improvements across the system. The pie chart which is similar to last year, shows that most of this funding is used to support quality improvement at practitioner and practice level, education and innovation in planning new ways of working.

Income has increased slightly again this year reflecting the improved capability and capacity across the Canterbury Health System which is successfully delivering improvements in the system level measures as part of a wider programme of clinical governance.

Pegasus, as a key partner in the Canterbury SLM group, continues to be influential in the development of the SLM framework and pleasingly the Ministry continues to use our processes and plans as exemplars for the developing national programme.

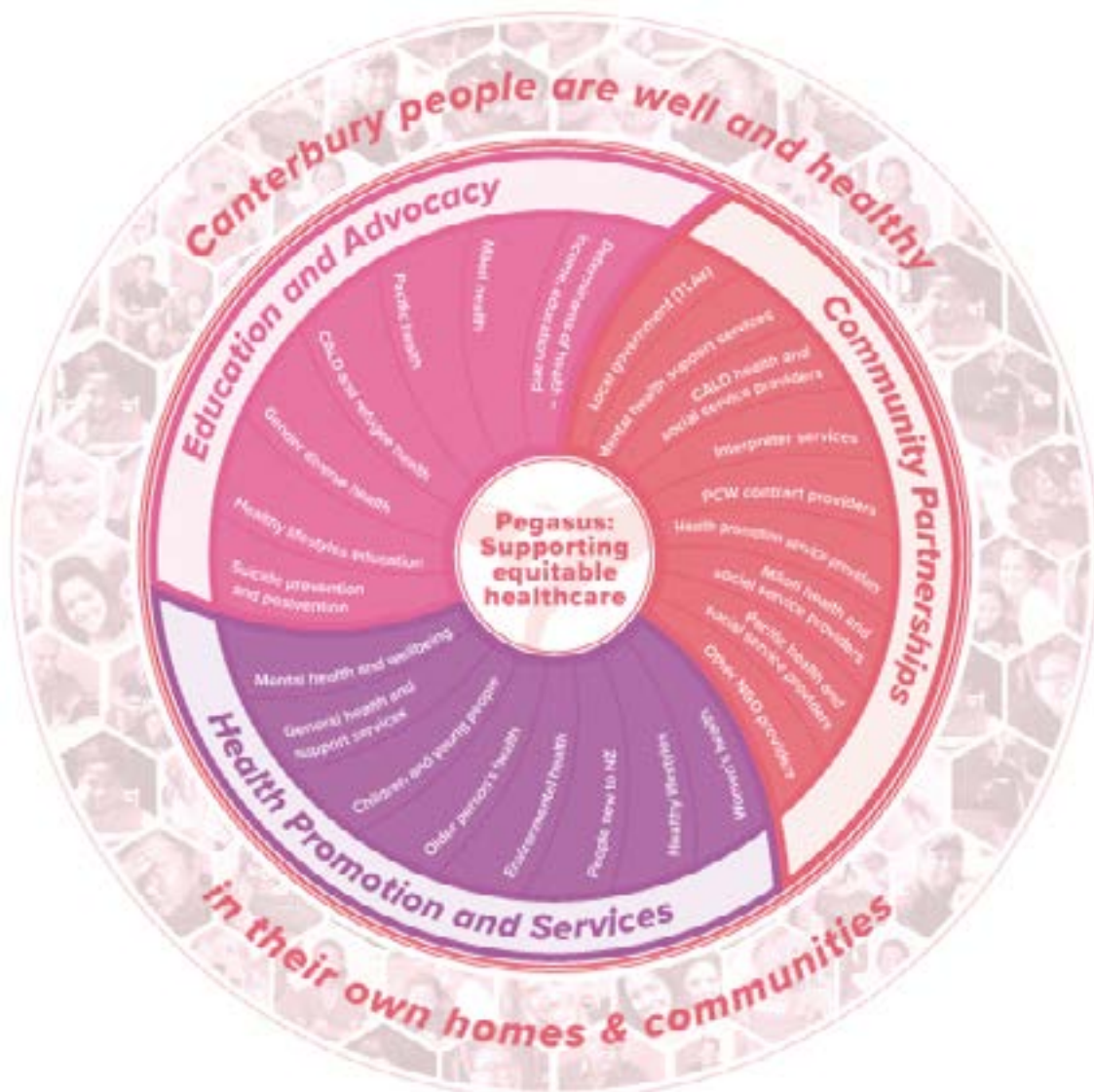


Community Close-Up

Since Pegasus merged with Partnership Health and took over the provision of PHO functions, our services and supports direct to the community have grown considerably.

We are driven to provide equitable healthcare for all and offer the following services and supports in the aim of achieving this.

- Health promotion services – we provide a range of services directly in the community to support health and wellbeing, interpretation and counselling services for refugees and people from various cultures, support for reintegration from prison and right service right time.
- Education and Advocacy – we provide education and advocacy for determinants of health, indigenous and minority groups including Māori, Pacific, CALD and refugee and gender diverse people, have a strong involvement with suicide prevention and postvention and champion causes such as water only in schools.
- Community partnerships – none of these activities or services would be possible without the strong support of our many community partners. We partner with a wide range of organisations, groups and agencies including local government, mental health supports, interpreter services, health and promotion service providers, Māori, Pacific and CALD health and social service providers, our contract providers who support the delivery of our Partnership Community Workers service as well as a range of other NGOs.



Putting study into action

Each year the University of Otago, Christchurch hosts a Summer Studentship that is made up of a number of research projects. Pegasus Health is a proud supporter of the programme and 'hosts' and supports 4th year medical students from the University of Otago, Christchurch to undertake research for Pegasus Health in the community.

The summer studentship programme enables students to gain real world hands-on research experience and helps to provide a launch pad for long term research. These projects can also make a real difference to the care or treatment of patients in our health system. This year, five students and their projects were chosen as Pegasus Summer Students:

- Aaspreet Boparai - "Motivators for integrated primary care between general practitioners and pharmacists."
- Lauren Smith - "Development of Nurse Led Models of Care for People with Heart Failure – a descriptive study."
- Jane Reeves - "Meeting cultural competency learning needs of general practice reception staff."
- Suli Tuitaupe - "Understanding the ASH rates for Pacific children in Canterbury".
- Jamie Go - "Diabetes Care in General Practice – Access to the Retinal Screening Pathway."

[View the reports](#)

Di Bos, Pegasus Summer Studentship Programme Co-ordinator says this year's projects were especially interesting as they covered a range of healthcare services.

"Our students worked with health professionals from across the health spectrum, from general practitioners to pharmacists and practice nurses to district health board personnel," says Di.

It was also found that even though each project had its own specific outcome and set of recommendations, some common elements were found within them all. Communication between the service and the community was highlighted in each project.

"Jamie's project identified a real challenge of linking communication type to patient. Sending people with eyesight problems a written letter inviting them to do a retinal screen has not proved effective in the past. New technology needs to be looked at for better ways to get the message to them. Jane's research on medical receptionists highlighted that they are administrative professionals working in a clinical environment who have to communicate with patients," says Di.

This year Suli Tuitaupe's project on understanding the ASH rates for Pacific children in Canterbury was awarded the Community Prize at the official prize giving.

Meet the 2017/2018 Pegasus Summer Students and hear how they found the experience - [view video](#).



Above: Jamie Go at work at Pegasus Health.

Re-launch of Reading in Mind for mental health and wellbeing

Pegasus' Reading in Mind book scheme supports people across Canterbury to better manage their mental health by providing online lists of recommended books on a range of mental health and wellbeing topics. Reading in Mind is for people of all ages and backgrounds, and those looking to support family/whānau or friends who may be experiencing poor mental health.

The scheme began in 2016 as a collaboration between Pegasus Health, Christchurch City Libraries (CCLs) and Canterbury's Mental Health Education Resource Centre (MHERC). The group used bibliotherapy programmes available in New Zealand and internationally as its base. The book scheme provided lists of books on mental health topics such as anxiety, depression, post-traumatic stress disorder and worry. Books included were recommended by CCLs and MHERC librarians (who have a background in mental health) and Pegasus mental health professionals, as well as Christchurch-based mental health organisations and the Mental Health Foundation of New Zealand. The scheme was endorsed by Pegasus, CCLs and MHERC. Reading in Mind's initial website was hosted by HealthInfo.

In August this year, Reading in Mind moved to the Pegasus website and expanded its site to include a wider range of recommended books – including selections of books for children, young people and parents/caregivers of children and young people – and links directly to the CCLs and MHERC library catalogues. The new site also includes a 'featured book of the month', invites users to provide feedback on books and offers a promotional poster for download.

Sheree Menzies, MHERC Information Technology and Resource Librarian, says "Reading in Mind has enabled our clientele to easily select the resources best suited to their needs. It has assisted in building trust with service users because these books are well researched and reviewed, and it takes the confusion out of trying to search through multitudes of information. It also allows anonymity by people being able to access this initiative via the internet and the provision of our free postal and courier service. I can't recommend Reading in Mind enough!"



To learn more about Reading in Mind, visit www.readinginmind.org.nz

Community Support

Children's Day March 2018



Sunday 4 March was a fantastic day with perfect weather for this year's Children's Day. There were many families seeking health information either for themselves, their children or for others in their community who they thought would benefit from it.

Pegasus Health staff volunteered at a stall which offered information alongside buckets of coloured slime and an amazing Superhero Treasure Hunt.

Community Liaison Access Manager, Melissa McCreanor says she will never forget the children's looks of excitement finding their superheroes in all that slime.

"It was messy and so, so much fun," says Melissa.

Senior Chef nears 2000

This Spring, Senior Chef Canterbury will celebrate its 2000th Senior Chef graduate from more than 200 courses held.

Senior Chef is a free 8 week cooking class for older people who want to improve their cooking skills, confidence, or motivation around cooking for one or two people.

The classes are 3 hours long, and run once a week during the daytime. There are usually 10-12 people in a class. Everything, including the ingredients for the cooking class and recipe book are provided.

Each weekly class includes:

- Nutrition education, for example, eating well for older people, menu planning, budgeting and shopping tips.
- Preparing and cooking a meal in pairs.
- Sharing the meal with the group.

Classes are held in various locations around Christchurch and Canterbury from Rangiora in the north to Ashburton in the south.



From its beginnings in 2009 and move across to Pegasus Health in 2016, Senior Chef has evolved and grown over the years. New developments mean that people aged 60 years can now attend (previously you had to be 65 years or older) and people can refer themselves to the programme (previously you had to be referred by a health professional). The 55 year entry level age for Māori and Pasifika remains the same.

Senior Chef Programme Co-ordinator, Wendy Scanlon says that Senior Chef used to be thought of as only about nutrition, but now it is being recognised as much more than that.

“Senior Chef is so good on so many levels. It helps prevent social isolation. It gets people who are lonely out of their homes. We find that the Senior Chef groups just keep on meeting after the course finishes, that’s the beauty of it,” says Wendy.

Find out more at the Senior Chef [website](http://www.seniorchef.co.nz/) - <http://www.seniorchef.co.nz/>

Nursing support leads to trampoline donation

What do you get when you cross a dedicated Residential Youth Health nurse, a piece of innovative sports equipment and the generosity of Bronze Medal Olympic skier Nico Porteous.

Young people at Te Puna Wai o Tuhinapo (TPW) Youth Justice Facility (Oranga Tamariki) in Rolleston found out on Tuesday 29 May.

Through the hard work of Annie Hofmeester, Pegasus Nurse and Team Leader Residential Youth Health Service, a Springfree trampoline was gifted by the company and Nico to the young people at the facility. It was presented at a special ceremony which included waiata, haka and kai.

Much is known about the physical benefits of trampolining but this form of exercise can also be great for mental health and wellbeing. The increase of oxygen to the brain, release of ‘feel good’ hormones, improvement in co-ordination and sheer joy of movement can lift mood and increase self-confidence.

Annie says she is sure the trampoline will be well used.

“It was great to have Nico here to share his inspirational messages along with the donation of the trampoline. The ‘one on at a time’ safety rule led to a long line of keen participants but everyone who tried out the trampoline came off with a smile on their face,” says Annie.



Above: Nico Porteous stands next to the trampoline gifted to the residents at Te Puna Wai o Tuhinapo (TPW) Youth Justice Facility (Oranga Tamariki).

Health students supported by Scholarships

This year's Pegasus Health Workforce Development Scholarships were awarded to 23 students from a wide variety of health studies at a community event on Thursday 31 May.

Pegasus Health established the Māori scholarships in 2001 and followed up with Pacific scholarships in 2007. Scholarships for CALD health students became available in 2014. Health students who identify as Māori, Pasifika or from Culturally and Linguistically Diverse (CALD) communities, studying medicine, nursing or allied health are invited to apply for the scholarships.

Seungjun Lee, known as Steve to his friends, has just finished a nine week work placement in Ward 19 at Christchurch Hospital. The placement is part of his Bachelor of Nursing Degree. Choosing exactly which area of nursing to focus on once he completes his degree is going to be hard for Steve who has volunteered and worked in many health areas from the deaf community to aged residential care and supporting people with autism.

"I have really enjoyed all my work experiences. In my last placement I was able to watch a patient having surgery and then be responsible for helping them through their post-operative care. I was impressed that the nurses had so much knowledge and they were willing to share it with me. The teamwork was amazing. My intention though, has always been to help people with disabilities. I'm so glad I chose nursing as a career," says Steve.

Medical student Lucy Munro has a deeply personal interest in healthcare. As the oldest tamaiti in her whānau, Lucy was around while her mother was pregnant and during the birth process (with her siblings). She has enjoyed helping with them as they grew.

After studying health science for a year in Dunedin Lucy decided she wanted a more 'hands-on' medical career. She is currently in her fifth year of medical study and will graduate as a doctor at the end of 2019.

"I'm looking forward to moving more towards the practical application of my knowledge," says Lucy who plans to go on to specialise in obstetrics which she finds "fascinating". She is also keen to help make health care for Māori and Pasifika people easier to use.

Currently living in her home town of Christchurch, Lucy has plans for a rural general practice placement and a medical elective in Tanzania next year.

"The plan was always to come home and practice medicine in Christchurch. The rural placement and overseas elective will be wonderful experiences. However, they do cost and that's where the Pegasus scholarship will be so useful," says Lucy.

One scholarship recipient, Raina Tekii will be using his skills in the area of mental health nursing. At last night's ceremony Raina spoke of the support he had received from his tutors and family as he "battled his way through" his Bachelor of Nursing Degree. He also said that being a Pasifika male in what was predominately a career for pakeha and females, was quite daunting but highlighted the need for more Pasifika and Māori males in nursing.

Suli Tuitaupe, who is already a Registered Nurse and is about to complete a Master of Health Sciences, said he was looking forward to using his clinical expertise to advocate for Pasifika health.

"My voyage of becoming a Pasifika nurse has the goal of improving health equity for all," says Suli.

Māori Scholarship recipients:

Māori scholarships: Matthew Sollis (Medicine), Nikola Fraser (Medicine), Lucy Munro (Medicine), Kylie Walker (Nursing), Leigh McConchie Nursing), Savannah Stewart (Medical Imaging), Talei Stuart-Eason (Social Work).

Pacific Scholarship recipients:

Mosana Evagelia (Medicine), Raina Tekii (Nursing), Marita Naoupu (Nursing), Jessica Tolo (Nursing), Faamele Tuipulotu (Psychology/ Education), Samsara Guillemot-Mene (Science/ Psychology), Alice Makaafi (Speech/ Language), Suli Tuitaupe (Health Sciences).

CALD scholarships recipients:

Kemintra Phongkaso (Nursing), Rakhi Kuttikattu Prakash (Nursing), Dilsa Davis (Nursing), Seungjun Lee (Nursing), Maria Zawari (Medical Imaging), Sirwan Mohamadi (Social Work), Phillipa Muza (Health Science), Zane Stankuna (Science Nutrition).



Above: Pegasus Health Workforce Development Scholarships recipients 2018:

Back row from left – Raina Tekii, Rakhi Kuttikattu Prakash, Dilsa Davis, Zane Stankuna, Phillipa Muza, Alice Makaafi, Kemintra Phongkaso, Nikola Fraser, Lucy Munro, Sirwan Mohamadi, Suli Tuitaupe.

Front row from left – Marita Naoupu, Seungjun Lee, Kylie Walker, Samsara Guillemot-Mene, Mosana Evagelia, Savannah Stewart, Leigh McConchie, Jessica Tolo.

Absent from photo: Faamele Tuipulotu, Matthew Sollis, Talei Stuart-Eason and Maria Zawari.

Leadership in Pasifika Health recognised

Trusted relationships often form the basis for provision of good healthcare. Taking the time to build those relationships within the community can pay off in many ways, from gaining knowledge to making a real difference in health outcomes. This has certainly been the case for Maria Pasene.

Maria is the Pegasus Health Pasifika Health Manager and of Niuean and Cook Island descent. She is the project lead for the Tutupu project involving health champions in Pasifika churches and facilitates the Pasifika Caucus group for the Canterbury Clinical Network (CCN). On Monday 21 May 2018 Maria was presented with an **Open for Leadership Award** from the Health Quality & Safety Commission New Zealand.

The Award recognises Maria's efforts to support Pasifika health in the community through the Tutupu project by increasing the health literacy of Pasifika communities, supporting Pasifika churches to identify health champions and creating environments that support healthy choices for the congregations.

The award was presented by Sir John Hansen, Chair of Canterbury Clinical Network's Alliance Leadership Team. He said the national award recognised Maria as a leader, specifically for her work on the Tutupu Project. He added that Maria is involved across the health system through Canterbury Clinical Network and Canterbury DHB.

"The CCN Alliance Leadership Team is painfully aware that there is still inequity in our health system and of what these inequities mean for our people. To achieve success we must achieve equity and people like you will enable us to do that.

"You're a staunch advocate and champion for Pasifika people across our health system, but you also excel in identifying talents in others and working with them to develop these skills.

"While I was reviewing your achievements I noted that you do not seek praise or recognition - you simply get on with it - and this award is evidence that it's making a huge difference. We are so very proud of you and the contribution you make," said Sir John.

Maria is quick to point out that the project was very much a team effort. The Tutupu Project is a collaborative partnership involving Healthy Families Christchurch (Sport Canterbury), Pegasus Health (Charitable) Ltd, Canterbury District Health Board (Community and Public Health), Etu Pasifika Trust and the Rural Canterbury PHO.

Maria spent a year building on existing and creating new relationships within the Pasifika and health community in Canterbury before launching the health education sessions with the eight Pasifika churches who participated.

"I have a public health background and I knew that here in Canterbury the Pasifika community works really well collaboratively with strong relationships. Church is a key setting for Pasifika people – somewhere they gather regularly, so this would be fitting place to spread good health messages," says Maria.

The basics of the project involved presenting churches with health topics that may be of interest to their parishioners, getting feedback from churches regarding the value of these, securing funding and then providing interested churches with access to health, sports and nutrition professionals and equipment.

Two way conversations between the project group and the churches meant programmes were adapted and extended so they would provide the most benefit. Health champions were identified within each church and they helped get the health messages across and encourage activities.

Health and exercise experts visited churches to share their knowledge. The project offered six week exercise sessions, exercise equipment and supervised games events. This inspired some churches to raise their own funds so the exercise classes could continue once sponsorship finished.

Some churches created community gardens that encouraged their congregation to grow healthy, organic and fresh vegetables. Others promoted and implemented health policies to improve nutrition, promote water as a first choice and celebrate their Smokefree status.

For many health services the Tutupu project has provided a way for health experts to connect with and support Pasifika communities. This included Oral Health, Smoking Cessation, Screen South, Active Canterbury, Healthy Lifestyles, Sports Canterbury, Diabetes Centre, Community Pharmacy and Community Respiratory Service.

Success has been measured in a variety of ways from participation numbers (just under 1000 parishioners took an active part) to personal stories of triumph. Rather than rest on her laurels however, Maria and the project team have plans to continue on with the programme and mental health is one topic currently being developed so it can be offered later this year.

Kia 'akameitaki'ia no runga i taau i rauka - well done on your achievement Maria.



Above: Health Quality & Safety Commission New Zealand Deputy Chair Shelley Frost, award winner Maria Pasene and Sir John Hansen, Independent Chair of the Canterbury Clinical Network's Alliance Leadership Team.

Te Kāhui o Papaki Kā Tai – narrowing the gap

Te Kāhui o Papaki Kā Tai, a Canterbury-wide Māori health reference group of primary care organisations, clinicians, community organisations, Manawhenua ki Waitaha (local iwi representation), Māori community providers and the Canterbury District Health Board including Community and Public Health has been in operation since 2009.

The name, Te Kāhui o Papaki Kā Tai, refers to ‘the coming together of the seas’.

The group plays a lead role in Māori health improvement by influencing across the health system to achieve health equity for all Māori living in Canterbury. A review of relationships and the group’s position in the Canterbury Health System is currently underway.

This year Dr Ramon Pink stepped down as Chair after five years of leadership, and was acknowledged for his continued contribution to improving health outcomes for Māori. The group is now chaired by Karaitiana Tickell, Kaiwhakahaere/Chief Executive Officer of Purapura Whetu, a kaupapa Māori health, mental health and social services provider.

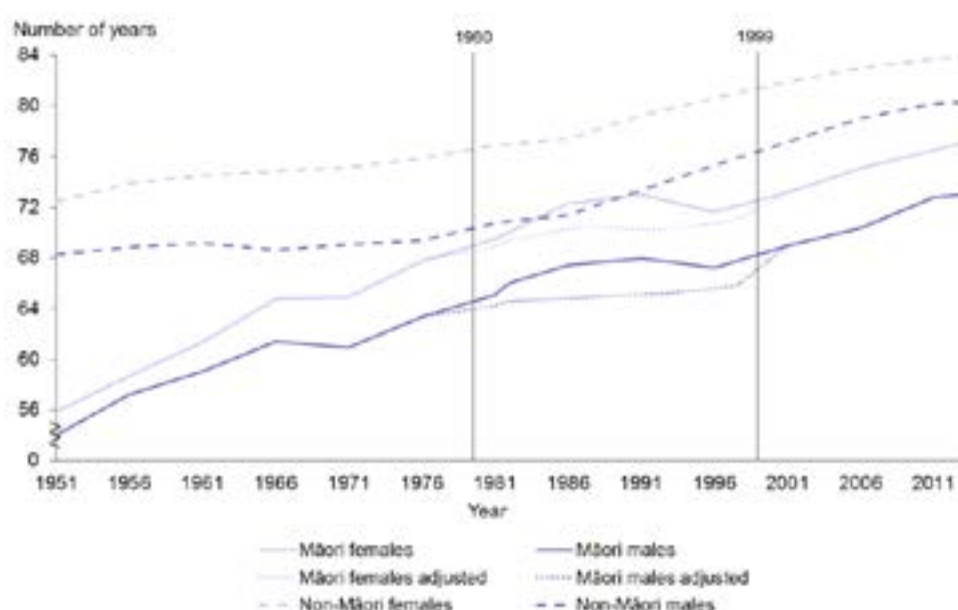
This year, Te Kāhui o Papaki Kā Tai is re-focusing its priority toward health service design and ensuring pro-equity for Māori. Some of the groups’ aims for the Canterbury health system include:

- Challenging institutional racism
- Building partnerships with Māori
- Promoting indigenous leadership
- Systematic monitoring and assessment of equity with quality data
- Equity-focused quality improvement with consequences for lack of progress
- Changing the workforce to promote equity
- Improving accessibility to healthcare

These objectives form the strategic plan to achieve the ultimate goal of closing the amenable mortality gap between Māori and non-Māori.

Statistics such as the gap in life expectancy between Māori and non-Māori (shown below) are being closely monitored and Pegasus Health is working hard to improve the situation.

Life expectancy at birth, by gender, Māori and non-Māori, 1951-2013 (Source figure: Ministry of Health)



While the gap between Māori and non-Māori life expectancy is narrowing¹, there is still much work to be done.

This year showed a significant improvement in the number of B4 School checks for 4 year old Māori children in Canterbury. Health and well-being is promoted at the visit which helps to identify and address any health, behavioural, social, or developmental concerns that could affect a child's ability to get the most benefit from school. This includes hearing problems or problems communicating.

Last year (2016/2017) 442 Māori children enrolled in Pegasus PHO affiliated practices attended checks (86%).

This year (2017/2018) 518 Māori children (91.8%) attended checks.

Mark Liddle, Pegasus Chief Operating Officer and attendee at Te Kāhui o Papaki Kā Tai meetings, says it is great to see initiatives coming to fruition.

“When we focus on Māori we can make a difference. The statistics show us that,” says Mark.

¹: The gap between Māori and non-Māori life expectancy at birth has narrowed to 7.1 years (average of male and female combined) in 2012–14. This compares with 8.2 years in 2005–07, 8.5 years in 2000–02, and 9.1 years in 1995–97. Lower death rates in the older ages (50–79 years) has contributed the most to the narrower gap between Māori and non-Māori life expectancy. 7 The gap between male Māori and non-Māori life expectancy has fluctuated from 8.8 years in 1995–97, to 8.2 years in 2000–02, to 8.6 years in 2005–07, but dropped to 7.3 years in 2012–14. In contrast, the gap between female Māori and non-Māori life expectancy has dropped from 9.3 years in 1995–97, to 8.8 years in 2000–02, to 7.9 years in 2005–07, and to 6.8 years in 2012–14.

Source: http://archive.stats.govt.nz/browse_for_stats/health/life_expectancy/NZLifeTables_HOTP12-14/Tables.aspx

Reducing barriers to primary health care – the missing and the missing out

The PCW - Partnership Community Worker Service in Canterbury was set up by the Partnership Health PHO in 2006. The programme was assimilated into Pegasus Health in 2013 when the two organisations merged.

A PCW- Partnership Community Worker is attached to all Pegasus PHO Practices. They also work closely with the communities they are located in. The role of the PCW is to reduce barriers to primary health care for Māori, Pasifika, refugee and migrant and low income groups.

Pegasus Health funds the programme and has oversight as a whole while the workers are employees of the community agencies where they are located. There are currently 19 PCWs located in nine community agencies.

Over the last year of number of significant initiatives have shown success:

- Collaboration with Christchurch Hospital Emergency Department
- Working with Community Dental
- A Guided Release pilot with the Department of Corrections
- Enlisting the help of a Mental health Educator to train and support PCWs

Collaboration with Christchurch Hospital Emergency Department

In 2016 Christchurch was still feeling the impacts of the 2011 earthquakes. People had been displaced and there was an influx of people here for rebuild work. As a result many people were using the Emergency Department as their only option for health care. The reason for this are many including poverty (ED care is free), combined with mental illness, addictions, homelessness and family violence. These are all barriers to patients enrolling with a General Practice.

This led to problems – the true level of need for primary health care via general practices was under measured, there was no provision for on-going care, and the ED was being overwhelmed.

The aim of this collaboration was to identify patients who were attending ED for non-urgent medical care and link them to general practices as enrolled patients.

The process had a number of steps which are detailed in a report produced by the Pegasus Health Population Health and Community Engagement Team in May this year '[The PCW-ED Collaboration – A Pegasus Health initiative](https://www.pegasusannualreport.co.nz/assets/Uploads/PCW-ED-Collaboration-May2018.pdf)' (PDF, 265KB).
<https://www.pegasusannualreport.co.nz/assets/Uploads/PCW-ED-Collaboration-May2018.pdf>

One example of success is documented in the report:

A client who presented at ED, homeless and without a GP was referred to me by one of the social workers. 'M' (another PCW) and I were able to meet her at the 24 Hour Surgery and talked to her about her situation.

The client was interested in our service and we were able to enrol her with a GP who was within walking distance from where she was sleeping at nights. The GP was able to fit her in the following day for an appointment. 'M' was able to support the client at the GP, who was fantastic with her, and used Services to Improve Access (SIA) funding to ensure the client did not have to pay. The client had another appointment scheduled for the following week, and was making her way there when M picked her up to take her the rest of the way.

The GP has made a referral to mental health services and the client is able to pop in to the GP at any time to collect any medical mail as she does not have an address for it to be sent to. The client is now able to manage her primary health care herself. This would not have been possible without the speedy and effective response of the General Practice team and their willingness to use SIA funding for her.

The PCW Service is currently receiving on average 50 referrals from ED per month.

Working with Community Dental

In Christchurch, parents of children who did not make sure they attended their dental appointment (DNAs), were referred to the Child and Family Safety Team by Community Dental and elevated to cases of potential neglect. The PCW Service was keen to intervene earlier as often the reasons why the child did not attend their dental appointment was a lack of transport or the appointment had been forgotten and the Dental team had been unable to contact the patient. The PCW Service worked with Community Dental Health Services to provide patient support to physically get them to their appointment. They re-established the link between patient and dental service and helped parents make a plan for ongoing care.

This collaboration was evaluated in June 2018 and the following positive outcomes were identified:

- There were fewer did not attends (DNAs) for children.
- Links were made with families to reduce barriers to oral care interventions for children.
- Fewer referrals to the Child and Safety team.
- Families were linked to other community services.
- Education of families to improve health literacy and empower clients to have a more active role in their own family's oral health care.

Guided Release pilot with the Department of Corrections

On 27 March 2018 a Hui took place between Pegasus Health, He Waka Tapu, Corrections Guided Release and Christchurch Men's Prison Health Team to discuss how all agencies could work together to help prisoners that are part of the Guided Release process better reintegrate in terms of receiving primary health care.

The following decisions were made at the Hui:

- PCWs could help prisoners with high needs / complex health needs on guided release to support them with General Practitioner enrolment, ensure their health needs are being seen to and addressing any barriers around accessing health services
- This collaboration would start with a small group as a Pilot.
- The Pilot will begin in September 2018 and initially be reviewed three months later.

Enlisting the help of a Mental Health Educator to train and support PCWs

In October 2017 Pegasus Health applied to the New Zealand Red Cross (Canterbury) for funding to employ a Mental Health Clinician (Educator) to train and support PCWs working with people experiencing mental health issues.

The Mental Health Educator would work alongside individual PCWs to enhance their learning, their skills and confidence, and identify gaps they may have in accessing mental health care for these clients.

The application for funding was successful and on 1 July 2018 Dr Chris Taua, a mental health nurse by profession with a Doctorate in Mental Health, was contracted to the Mental Health Educator role.

Chris says she is looking forward to supporting the PCWs advancing knowledge, skills and confidence to respond to people who have mental health issues.

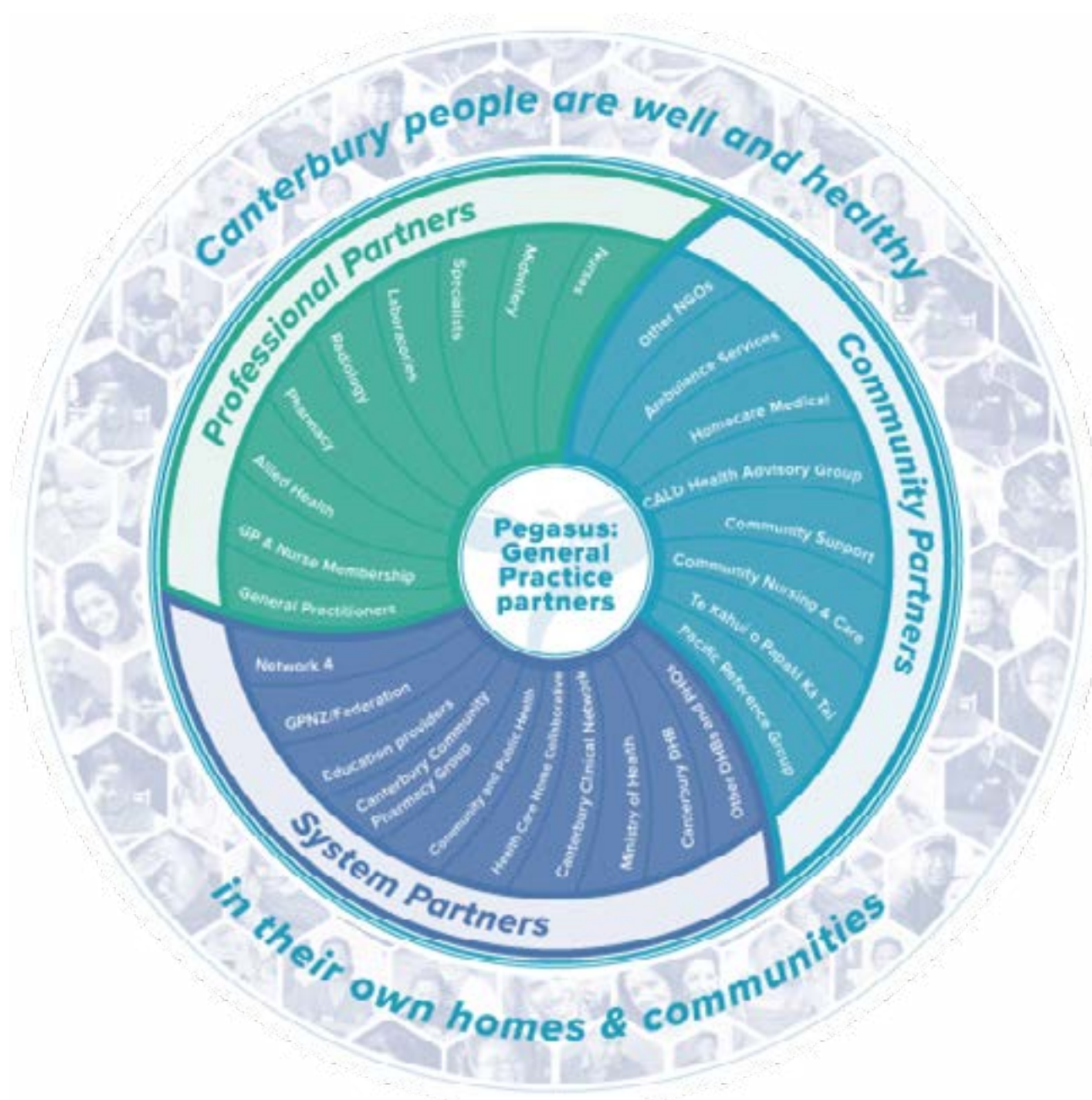
“I see my role as providing mentoring, guidance and education according to individual PCW learning needs. Sometimes I will work with the individual and at other times in groups depending on needs and focus,” says Chris.



System Synopsis

Our Partners and Stakeholders

- Professional Partners – good health outcomes require an integrated approach. We work closely with many professional groups to provide well supported primary health care.
- System Partners – Healthcare today requires many systems working together collaboratively. We work closely with government departments and agencies, DHBs and PHOs, professional bodies and education providers to develop and provide services, advocate for primary care needs and ensure general practice teams and primary care providers are up to date with the latest in clinical education and health information.
- Community Partners – General practice remains at the heart of primary care, enhanced by many services provided by community based organisations. We partner with numerous community groups and organisations to ensure the people of Canterbury have the best access to healthcare and information to help them manage their health and wellbeing.



Network 4 - a year of collaboration

Pegasus Health has been working with three large networks - Tū Ora Compass Health, Pinnacle Health and ProCare – in a collaboration known as Network 4 or N4.

N4 has co-developed a range of initiatives including innovation in Primary Mental Health service delivery, launched the Health Care Home (HCH) Collaborative which is now nationwide and growing, as well as having input into the design of the National Primary Care Data Service. We have also worked with partners on a new pilot with ACC.

Primary Mental Health and Closing the Loop

Published around two years ago 'Closing the Loop' was the manifestation of an N4 lead collaboration across the Mental Health sector. It set out five themes for change in the provision of mental health and addiction services. Subsequent to that a stepped model of care was developed to deliver meaningful change to the experience of people seeking and delivering mental health services.

This model prompted engagement across the sector and with various ministries and is reflected in the emerging government approach to mental health. The place of primary care is re-stated and in Canterbury the Primary Mental Health Service is evolving to better support General Practice to care for its patients experiencing non-acute mental health needs. Through Closing the Loop and work that followed, N4 is positively influencing the shape of mental health care throughout New Zealand.

The Health Care Home and Canterbury

Launched just over a year ago, the HCH Model of Care is a nationwide model of core components that, as part of a change programme, is intended to make for a better patient experience and support the viability of General Practice. In Canterbury our Integrated Family Health Services team has incorporated the HCH into the local change and support programme. The HCH collaborative comprises of PHO, DHB and RNZCGP members from around the country and is growing. There are currently almost 900,000 enrolled patients in practices that are part of the HCH process.

Pegasus is about to embark on taking some Canterbury practices through the certification process whereby their commitment to change and demonstrated progress will result in them becoming a Certified Health Care Home. Unlike other quality initiatives, the HCH certification process is based on continuous improvement and is fully supported by the IFHS team. There is no audit, no compliance checks and the IFHS team do the work to help practices achieve certification.

There is also growing interest in this programme at government level and the collaborative will advocate for more resources to support a different way of working.

ACC and High Tech Imaging

The reach and influence of the larger networks was recognised last year when ACC approached N4 to seek our support with a proof of concept/ pilot project. The project will provide training and support to GPs to enable them to order an MRI for patients with non-acute knee, shoulder or spinal pain. This project, working with Health Pathways, ERMS, local radiology, surgeons and General Practitioners will remove the need for a referral to a specialist for MRI and will enable a GP to order MRI and receive the reports before making a decision on the right care pathway. This is due to commence in spring 2018 in Canterbury with Pegasus coordinating a pilot programme.

These are just some of the N4 initiatives that Pegasus has helped shape, design and inform. All are designed to support and enable General Practice.

As always, Pegasus works to ensure that Canterbury is well represented at all tables with a view to ensuring that the national developments in primary care have a Canterbury perspective.

The ProCARE logo features the word "ProCARE" in a bold, blue, sans-serif font. The "P" and "C" are slightly larger and more prominent than the other letters.

Breathing programme adapting to patient needs



When Canterbury Clinical Network's (CCN) Integrated Respiratory Service was established in 2008, the aim was to move services that were only available in hospitals at the time, out into the community.

Swing forward 10 years and the Better Breathing Pulmonary Rehabilitation (BBPR) programme is firmly embedded in the community, so much so that the work of a Marae volunteer for the programme was acknowledged and celebrated at the 2018 Minister of Health Volunteer Awards.

Mac Renata, volunteer for the BBPR programme, received an Award for his contribution to a Māori Health service. The eight week programme is overseen by the team of specialist nurses and physiotherapist and runs at different locations across Canterbury.

Mac joined the Canterbury Respiratory Consumer Working Group two years ago after he had gone through the programme himself. He was nominated for the Volunteer Award by Community Respiratory Clinical Nurse Specialist, Louise Weatherall.

The programme was adapted last year and delivered at Rehua Marae in Richmond, Christchurch to make it easier for Māori to take part in the programme. Changes included running the programme onsite and carrying out group assessments rather than one-to-one.

Mac played a key part in supporting CCN's clinical team at the Marae and has lead the Kaumātua group in exercise regularly ever since.

In her nomination Louise said: "Mac brings wisdom, calmness and his understated knowledge to guide us to be inclusive of Māori in all our activities.

"He is a clear and frank communicator who helps others understand the complex health system, and respiratory health specifically. He has contributed to the redesign of patient and clinician materials such as letters, flyers and pamphlets.

"He often leads the exercise component of the programme and is willing to share his health journey to help everyone. He is a tireless advocate for Māori."

Consumers are an integral part of the Integrated Respiratory Service.

[Read more about the Canterbury Clinical Network.](#)

Right: Mac Renata (Right) receiving his Outstanding Achievement Award from Director-General of Health Dr Ashley Bloomfield in June 2018.



Personalised Care Plan – what matters most to the patient

A new electronic shared care plan was added to the Canterbury Health System's suite of patient care plans on 14 February. The Personalised Care Plan (PCP) is designed to help people with moderate to complex health needs who use primary, community and secondary health care services.

The PCP sits alongside the Acute Plan which has been created through collaboration and integration with Canterbury Health System partners under the umbrella of Canterbury Clinical Network (CCN).

An Acute Plan is put together detailing the complex and/or specific health needs of a patient during an acute episode of care. If the patient is treated by a health provider who is not the patient's regular provider, the Acute Plan provides the means to support safe, effective and patient specific assessment, management and transfer of care. The patient may be involved in the writing of the plan and they give their consent to have this information shared.

The Personalised Care Plan outlines the patient's needs and goals to achieve better daily health. It also documents who is involved in the care of the patient and how each team member contributes to the goals and action negotiated with the patient and whānau allowing visibility of team activity and collaboration between services.

Here's a fictional example of how a PCP can help

56-year-old Bridget has social anxiety and inflammatory arthritis. She struggles to get out and about and often fails to take her medication.

Bridget's health care team can work with her to put together her PCP and then support her to achieve her health goals.

What matters most to the patient at the moment?

Bridget would like to feel confident enough to go to the mall with her daughter.

Goals (supporting goals)

1. Emotional wellbeing/ mental health (life area)
Issues: social phobia, self-conscious of teeth which are painful and several are rotten
Goal: to be able to go out comfortably
2. Managing medicine and other therapy (life area)
Issues: Forgets to take medications
Goal: Take meds as prescribed at least 80% of the time

Actions (needed to achieve goals)

1. Emotional wellbeing/ mental health
 - Follow up with the oral health department and Work and Income re dental care
 - Referral Anxiety Disorders Unit
2. Managing medicine and other therapy
 - Pharmacy to blister pack medicines

The Collaborative Care Team from CCN says the PCP is a great addition to the suite and is an extension of a trend towards a more integrated approach to health care.

A poster, outlining how the PCP works won an accolade at Health Informatics New Zealand's (HiNZ) conference in October last year.

[View the poster](#)

http://ccn.health.nz/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core_Download&EntryId=3939&PortalId=18&TabId=1288

CCN's collaborative care team, in partnership with the wider Canterbury Health System and Orion Health were also finalists in the NZHIT Innovation Awards at the Conference for the Shared Care Planning Service.

Read more about the [Personalised Care Plan](#)

http://ccn.health.nz/DesktopModules/Bring2mind/DMX/Download.aspx?Command=Core_Download&EntryId=3762&PortalId=18&TabId=1288

[Read more about Canterbury Clinical Network's Strategic Focus.](#)

<http://ccn.health.nz/Portals/18/Documents/2016-19 Strategic Focus.pdf>



Above: Rebecca Muir (Collaborative Care Liaison, CCN) and Donna Hahn (Collaborative Care Liaison, CCN) being presented with the certificate for the PCP poster at the HiNZ Conference.



Your friendly local Community Pharmacist

The Canterbury Community Pharmacy Group (CCPG) is 10 years old in October. Since its inception it has formed close working relationships with the Canterbury DHB, Canterbury Clinical Network and Pegasus Health. CCPG aims to ensure pharmacists are core, valued members of the primary care team and able to deliver an enhanced range of evidence-based health services to improve patient outcomes, or in other words, better patient outcomes.



Canterbury Community Pharmacy Group

CCPG is involved in many services from a Medication Management Service to reaching out at community events to showcase pharmacy and its services. It also contracts pharmacies to provide services and act as referrers for Stop Smoking Services. Nineteen community pharmacies are currently contracted by CCPG to deliver the Smoker Motivation and Referral Service. Pharmacy workforce development is promoted by offering education sessions in topics like motivational conversations and cultural competency.

The Medication Management Service (MMS) was launched by CCPG in 2012. It is a free service to people who are eligible for New Zealand public health care and who live in the Canterbury Region. It offers Medicine Use Reviews (MURs) and Medication Therapy Assessments (MTAs) and provides a mobile MMS pharmacist service allowing in-home visits.

During a MUR a Pharmacist helps people better understand and self-manage their medicines while a MTA is a Pharmacist and General Practitioner collaboration, designed to make the most of the patient's medications in line with their goals of care.

During quarter four this year (April/ May/ June) a total of 252 MMS sessions were delivered.

- 54 in-pharmacy MURs
- 182 in-home MURs
- 16 MTAs (in-home)

One happy customer is Lincoln resident Coral (pictured left). Re-adjusting to life following the passing of both her husband of 60 years and a daughter, plus a move to the Selwyn District, Carol used the MTA process to refine her medicine regime. Pharmacist Shirin Namjou worked with both Carol and her General Practitioner, to remove some medications that were no longer needed and reduce the dose of others.

Coral says that "This has made it a lot easier for me."

Read more about the Canterbury Community Pharmacy Group on the [website](http://www.ccp.org.nz).
(www.ccp.org.nz)



Homecare Medical has had another successful year. CEO Andrew Slater says the nationwide social enterprise has its roots in Canterbury and has continued to work with the Canterbury community, central government and regional health care providers to guide and shape new types of health support and services.

“Over the past year we’ve developed and established new services in Canterbury and then been able to roll them out across the rest of the country. Our staff base has also increased over the last year to more than 350,” says Andrew.

Homecare Medical staff work from its Auckland, Wellington, Christchurch and Dunedin contact centres, from their home offices from Kaitiāia to Bluff and some staff are based in the St John and Wellington Free Ambulance communications centres.

One of the new initiatives created this year is the national sexual harm helpline - Safe to talk He pai ki te korero, a text, email and live webchat service.

Safe to talk He pai ki te kōrero, provides nationwide 24/7 access to free confidential information and support to people affected by sexual harm in any way. It’s for survivors, concerned whānau and people who are worried about their own sexually harmful thoughts or behaviours.

The service was officially launched by the Minister for Social Development, Carmel Sepuloni on Friday 1 June 2018. It went ‘live’ nationally on 16 April 2018 after a successful pilot in Canterbury.

“It can be really hard for people affected by sexual harm to reach out for support. Anyone contacting the Safe to talk helpline can say as little or as much as they like – and they can remain anonymous if they want to. Early feedback from the service has shown being able to remain anonymous or provide only a first name is helping people to feel comfortable with using the service. The online chat function is also proving to be a popular communication method, followed by calls, text messaging and then emails,” says Andrew.

Since going live in April this year more than 1400 people have made contact with Safe to talk (to end of June 2018).



Another new service - etalk, is now available for people living in the wider Canterbury District Health Board region following a successful pilot project for people living in rural Canterbury. etalk is a virtual intervention counselling service offered over the phone that aims to improve access for people to connect with a counsellor. Referrals are made by a patient’s GP through their PHO.

Safe to talk and etalk are just two of the services provided by Homecare Medical. Find out more at the [Homecare Medical website](#).

Above: The Minister for Social Development, Carmel Sepuloni at the official launch of Safe to Talk.

Pegasus Health (Charitable) Ltd

Financial Statements Commentary

Year Ended 30 June 2018

The financial statements for the year ending 30 June 2018 illustrate what has been another sound year for the company. Highlights of interest include:

- Sirius preparation is nearing completion with the first implementation carried out in August 2018. Sirius is a transformational electronic medical record platform that will replace the Patient Management System in those practices that choose to adopt it, providing the technology to enable changes to enhance patient care, improve business efficiency and encourage innovation.
- Extending the delivery of our Workforce Solutions programme to members under the Support Plus Banner. This includes the BeeFoundNZ locum matching service which is now available for Nurses as well as GPs and has gained considerable momentum;
- Continued focus on advocacy re General Practice funding concerns at a national level in conjunction with our N4 Partners;

These initiatives, and many others, continue to increase the value of our services to patients and practices and position Pegasus well as an integral partner in the Health Sector.

Comprehensive Revenue and Expenses (aka Profit and Loss account)

We present consolidated “Group” Financial Statements.

The Company consists of Pegasus Health (Charitable) Ltd and its associates – the most significant being After Hours Properties Ltd.

The Group consists of the Company and its subsidiaries, most notably Pegasus Health (LP) Ltd, which holds our 50% investment in HomeCare Medical (NZ) Limited Partnership (HCM).

The Company’s operating result, a surplus of \$453k, was \$376k better than budget \$77k and \$226k better than prior year.

Revenue from the delivery of health services increased by \$4.1M. The increase in revenue was across the business, for example incremental increases for HealthOne and ERMS and increased activity in Mental Health (Enhanced Recovery Practitioners), plus a range of other smaller contributions.

Operating expenses increased by 3.8M. Expense movements are consistent with activity levels; the most significant component of expenses, after wages and salaries, continues to be the data related support of general practice information systems.

Net finance costs increased (133k). This is due to a small reduction in interest received and an increase in Finance costs of 108k. Finance costs include a small-unrealised loss due to financial derivatives in place to manage risk on floating rate loans.

Pegasus has not revalued property this year, whereas last year there was a significant gain in value of 401 Madras Street once works were completed for the 24 Hour Surgery and the building was fully occupied.

The Group's operating result also includes the 50% Pegasus' share of HCM's surplus of \$544k.

The overall Group operating surplus of \$985k (2017:\$2425k) demonstrates another good year of continued prudent management.

Financial Position (aka Balance Sheet)

The strengthening of the balance sheet reflects the investment in Intangible assets such as Sirius. Intangible assets have increased by \$2.5M.

Our investment HomeCare Medical has decreased as a result of a partial repayment of advances of which \$125k remains as receivable at balance date.

Pegasus refinanced borrowings during the year; \$4M of Loans have been classified as Current, leaving Non-Current of \$9M.

Our investment properties are recognised in the financial statements at their 30 June 2017 valuations.

Pegasus' equity has increased by \$442k to \$18.5M.

Cash flow

Cash has been well managed to ensure Pegasus could continue to fund development of Sirius along with other asset purchases whilst remaining within banking covenant requirements. A net decrease in cash of \$596k resulted, leaving a year end cash balance of \$1.9M.

Cash generated from operating activities totalled \$1.7M, and the Company received a cash repayment \$875k due to a capital distribution from Homecare Medical (NZ) Limited Partnership. \$327k was received from draw down of loans to fund the final payments in respect of Pegasus House fit-out.

Payments for property, plant, and equipment including the development of Sirius amounted to \$3.5M.

Primary Health Organisation (PHO) Functions Special Purpose Financial Statements

These separate special purpose financial statements are produced specifically to meet PHO reporting requirements. They are an extract from the full financials commented upon above.

The PHO had a stable twelve months of operations. This culminated in an operating surplus of \$221k for the year. As expected the cash position remained at \$2.3M.

Summary

In summary Pegasus remains in a sound financial position, demonstrates prudent governance and management practices, and maintains a measured approach. This year's initiatives continue to position Pegasus well to support general practice through the challenges and opportunities ahead, enabling Canterbury people to be well and healthy in their own homes and communities.

We hope this commentary assists your understanding when reading both sets of enclosed financial statements. We look forward to seeing you at the Annual General Meeting where we will be happy to answer any questions you may have or provide further explanation.

Statistics and facts

Better Help for Smokers to Quit

41,610 smokers received smoking cessation advice and support from their General Practice team in the 2017/18 year, taking overall coverage to 93.7%.

The Stop Smoking Support team, based at Pegasus, contacted 12,314 people on behalf of their General Practice team to offer brief advice and cessation support. Of those contacted, 1146 accepted a referral to a cessation support service.



Referrals were made to external organisations, mainly Stop Smoking Canterbury Te Hā Waitaha or, if the practice preferred, people were referred to the General Practice for a consultation with their GP or PEGS nurse.



More Heart & Diabetes Checks

In the last five years, 106,765 people had been assessed for cardiovascular risk, as at 30 June 2018. This represents an increase of 2,888 assessments completed in the last year, with 81.5% of the eligible population having had a risk assessment by their General Practice team.

Cervical Screening

72.9%* of women aged 25 to 69 had received a cervical smear in the last three years (as at 30 June 2018).

*Note – the screening coverage period changed in 2017 to 36 months from 39 months previously. This has had a minor negative impact on overall coverage statistics.

Increased Immunisation

In the 2017/18 year, 95% of all eight-month-old and 94% of two-year-old children enrolled with Pegasus General Practices were fully vaccinated on time.

B4 School Checks

Pegasus General Practice teams completed a total of 3,722 B4 School Checks in the 2017/18 year, of which 337 checks were completed in the community by the mobile outreach B4 School Check Nursing team.

The Public Health Nursing service completed 1,399 checks on behalf of Pegasus General Practices which don't provide the B4 School Check. This equates to an overall coverage of 97.7% of four-year-old children receiving a check.

A total of 338 dental referrals; 232 vision referrals; and 186 hearing referrals were made as an outcome of the checks. Three hundred and forty three children were referred to a health professional due to concerns about growth/weight, while 127 families declined a referral.



Charitable Objects

Purpose and charitable objects

The purpose for which the company is established is to apply and utilise the assets and investments of the company in furtherance of the exclusively charitable objects of the company (as approved and recognised by the Commissioner of Inland Revenue) which include, without limitation, the following objects:

- (a) the enhancement of health and health care and facilitation of the provision of health care to individuals, their whānau/ families and all the population of Canterbury;

- (b) the improvement of the health status of individuals, their whānau/ families and all the population of Canterbury;

- (c) the reduction of disparities between the health of Māori and other identified groups within the population of Canterbury and the reduction of barriers to the timely access to appropriate health services;

- (d) the education of the public and health care providers as to health related issues;

- (e) the greater participation of the population of Canterbury in health related issues, through proactive consultation and communication with communities and in keeping with the spirit of the Treaty of Waitangi;

- (f) the improved availability of health related information;

- (g) the improvement of integration and liaison between health care providers and others in Canterbury to ensure that health care services are co-ordinated around the needs of the population of Canterbury; and

- (h) the creation or development of or the enhancement of co-operation with other entities that have similar objects.

Canterbury means the areas within the jurisdiction of the Canterbury District Health Board pursuant to the provisions of Schedule 1 of the New Zealand Public Health and Disability Act 2000 or such larger areas as may be determined by the Board; and the Communities means and includes primarily the population of Canterbury.