

# Primary Health Care Symposium Programme

Te Papa, Wellington | 15 November 2017

Time & Room	Subject and Presenter
8:15am–8:55am	<b>Registrations – Delegates arriving</b>
9:00am–9:10am	<b>Welcome / Mihi</b>
9:15am–10:00am	<b>Plenary Session</b>
Oceania Room	<p><b>Hearing the patient's voice. Developing resilience – the highs and lows of treatment and recovery</b></p> <p><b>Jake Bailey</b>, <i>ex Head Boy, Christchurch Boys High School</i></p> <p>In 2015 Jake Bailey was diagnosed with stage 4 Burkitt's Non-Hodgkin's Lymphoma. Now in remission, his journey is teaching us all - how to live.</p> <p><b>Mind the Gap!</b></p> <p><b>Dr Nick Chamberlain</b>, <i>CEO Northland DHB and national DHB lead for Primary Care</i></p> <p>Ensuring primary care quality, access, equity, prevention and sustainability to support the New Zealand Health Strategy.</p>
10:00am–10:25am	<b>Morning Tea</b>
10:30am–11:20am	<p><b>Session 1: concurrent sessions</b></p> <p>Pick <b>one</b> of these sessions.</p>
Angus Room	<p><b>A. Implementing a Chest Pain Pathway in primary health care</b></p> <p><b>Dr Gerry Devlin</b>, <i>Medical Director, Heart Foundation</i></p> <p><b>Tim Norman</b>, <i>Director of I've Got A Plan</i></p> <p>Chest pain presentations remain one of the most common conditions in emergency departments and in ambulatory sensitive hospitalisations (ASH) data.</p> <p>The Rural Accelerated Chest Pain Pathway (RACPP) focuses on reducing ASH rates. It also reiterates ministerial priorities of timely patient care closer to home and value for money. Improvements in community-based care can reduce avoidable hospitalisations, and free up hospital staff and resources whilst enhancing primary care to manage these types of presentation.</p> <p>Lead investigator: Tim Norman</p> <p>Co Author: Dr Martin Than</p>

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Rangimarie Room 3 **B. He Tangata – People at the centre**

**Sally Nicholl**, Practice Manager, HUCHS

**Sandy Bhawan**, Programme Development Manager and Clinical Pharmacist, Te Awakairangi Health Network

Hutt Union and Community Health Services (HUCHS), a community owned general practice with a very high needs population, is undertaking quality improvement activities with the support of their PHO (Te Awakairangi Health Network) and the Health Quality and Safety Commission (Whakakotahi programme). They have been able to significantly improve their acute care model (pleasing patients, increasing capacity and reducing staff stress levels) and their long term conditions management (diabetes). This work also demonstrates the value of clinical pharmacist skills being utilised in general practices.

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Rangimarie Room 1 **C. Mental Health knows no boundaries: WellSouth Primary Health Network, Family Mental Health Service, Dunedin**

**Terry Ebeling**, Registered Psychotherapist, Well South Primary Health Network

**Stacy Harborow**, Clinical Manager, Well South Primary Health Network

In this session you will hear how Well South's own in-house mental health service is spanning organisational boundaries across the sector including:

- Their prison in-reach service – supporting the transition of offenders with moderate to severe symptoms back into the community and to the ongoing support of their general practice and community mental health service.
  - Their single session family therapy intervention; which provides an interagency, safe forum for families to activate their own action plans based on an initiative developed at the La Trobe University in Melbourne.
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Rangimarie Room 2 **D. Partnership to improve lives: Better respiratory health outcomes for tamariki & their community**

**Letitia O'Dwyer**, Chief Executive, Asthma and Respiratory Foundation NZ

**Te Paea Winiata**, Chief Executive, Turuki Healthcare, Auckland

Turuki Healthcare and Asthma and Respiratory Foundation NZ see “reaching out” to the community and particularly tamariki will improve respiratory health outcomes, which is different to the old mainstream and traditional health system model which expects those in need to come to the clinician/nurse.

South Auckland has the highest preventable asthma rates in the country in 0 to 14-year-olds (CMDHB Māori Health Plan 2017/2018). This partnership project brings together the expertise of Asthma and Respiratory Foundation NZ with the expertise of Turuki who are contracted and have experience to provide health and social services to tamariki and their whānau in a school context, across South Auckland. Four primary schools in Mangere, Auckland with a total of 1100 children will be seen to assess respiratory health and for management plans to be completed and actioned. The 12-month project will be completed in the third quarter of next year with findings presented to the Minister of Health.

11:20am–11:30am Delegates move to next session

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11:30am-12:20pm **Session 2: concurrent sessions**

Pick **one** of these sessions.

Rangimarie Room 1 **A. CVD – So we have consensus what next?**

**Dr Gerry Devlin**, Medical Director, Heart Foundation

**Dr Fraser Hamilton**, GP Liaison, Heart Foundation

The Heart Foundation has supported the Ministry of Health to develop a CVD Risk Consensus Statement. Come and hear the recommended changes to best practice CVD management.

Rangimarie Room 2 **B. Developing general practice skills in motivational conversations to meet System Level Measures. Evidence from three Canterbury PHO's**

**Dr Lynley Cook**, Pegasus PHO

**Dr Mark Wallace-Bell**, Director of Behaviour Change Consultancy Ltd

Over the last 12 months, this collaborative PHO project has delivered a motivational conversations project to rural and urban GP teams. This presentation will describe the project process and deliverables and outcome measures.

Angus Room **C. Primary health connected to workplace wellbeing in Turanganui a Kiwa**

**Rewiti Ropiha**, CEO of Turanga Health

Engaging primary industry employers and employees with a workplace wellness platform that connects to primary care. Turanga Health have been at the forefront of connecting primary care alongside primary industries within Turanganui a Kiwa (Gisborne) for over the last two years. Turanga Health will outline the pains and gains in unlocking unchartered fields and realizing real worth- Primary Health fusion.

Come and be enlightened.

Rangimarie Room 3 **D. Improvement science in action: Joining up teams to join-up care in Nelson**

**Dr Rachel Mackie**, G.P., Harley Street Medical

**Fran Mitchell**, Quality Improvement Co-ordinator, Nelson Marlborough Health

**Jane Cullen**, Quality Improvement Advisor, Health Quality & Safety Commission

Nelson Marlborough Health, Cardiology, Nelson Bays Primary Health, three Nelson general practices, Te Piki Oranga, hospital and community pharmacy, and the Heart Foundation are all working together in collaboration with the Health Quality and Safety Commission to develop joined-up care for patients post discharge from hospital for insertion of a stent. This work is part of the Commission's primary care innovation programme, "Whakakotahi", which means "to be as one". This is the first time in Nelson that such an integrated team have worked together to improve health outcomes. The insights gained from working together and using the methods and tools of improvement have been beneficial beyond the scope of this programme. The team will share both the challenges and the lessons learnt from their journey so far.

12:30pm-1:20pm

Lunch

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1:30pm–2:20pm

### Session 3: concurrent sessions

Pick **one** of these sessions.

Rangimarie Room 1 **A. CVD – So we have consensus what next?**

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**Dr Fraser Hamilton**, GP Liaison, Heart Foundation

The Heart Foundation has supported the Ministry of Health to develop a CVD Risk Consensus Statement. Come and hear the recommended changes to best practice CVD management.

Rangimarie Room 2 **B. Lifestyle Behaviour Change**

**Dr Maria Stubbe & Dr Tony Dowell**, Otago University, Department of Primary Health Care and General Practice

This interactive presentation will explore some of the common communication challenges that arise in consultations when discussing lifestyle behaviour change in the context of long term conditions.

We will discuss specific problem areas and possible strategies for managing these, as illustrated in video clips from real consultations and interviews with patients collected by the Applied Research on Communication in Health (ARCH) Group. (<http://www.otago.ac.nz/wellington/research/arch/>)

Angus Room

**C. The Treatment Gap - What Auckland is doing about it!**

**Dr Allan Moffitt**, Clinical Director, Procare

**Pauline Sanders-Telfer**, Nurse Leader, Procare

A description of collaboration in the Auckland health system to improve management of cardiovascular risk and improved care for people with diabetes. The seven PHO's and three DHB's have agreed a standard set of five clinical indicators that we are reporting on quarterly. Hear about the trials and tribulations of data definition and reporting.

Rangimarie Room 3 **D. What matters to you, matters to us: challenges in supporting patient-centred interdisciplinary care – Northland's e-shared care experience**

**Dr Andrew Miller**, Northland GP and Chair of Manaia Health PHO

Andrew explores the benefits of having electronic shared care plans allowing secure messaging and patient information summaries to be available to any registered Northland health provider for all Northlanders.

Andrew will share the technical and health provider “cultural” challenges that have transpired over the last year.

2:30pm–3:20pm

### Session 4: concurrent sessions

Pick **one** of these sessions.

Rangimarie Room 1 **A. Childhood obesity – what primary care can do – realistic expectations**

**Prof Hayden McRobbie**, Raising Healthy Kids, Target Champion, Ministry of Health

Brief interventions for unhealthy weight – evidence and practical steps.

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Rangimarie Room 2

**B. Equally Well - Collaborative action to address the physical health disparities of people who experience mental health conditions and addiction**

**Helen Lockett**, Strategic Policy Advisor, WISE Management services

**Alex Loggie**, Clinical Educator for Primary Care, Whanganui DHB

This workshop will be a chance to hear the findings from the 2017 evidence update, conducted by Te Pou o te Whakaaro Nui, on what interventions are effective to improve physical health outcomes for people who experience mental health conditions and addiction. It will also provide the opportunity to hear about and discuss some examples of innovative practice in different parts of the country. In particular the primary care initiatives in Whanganui, Canterbury and Tairāwhiti.

Angus Room

**C. Integrated Case Management and Diabetes/CVD self-management services**

**Greig Dean** (Service Manager), **Karli Rowe** (Dietitian) and **Caroline Steens** (Long Term Conditions Lead), Eastern Bay Primary Health Alliance

We are a Primary Health Organisation (PHO) that delivers quality primary health care services to the Eastern Bay communities through our General Practices, community health workers and sub-contracted health providers. We would like to showcase two initiatives.

**1. Integrated Case Management – Greig Dean**

A redesigned model of care that integrates existing services and minimises duplication.

**2. Diabetes/CVD Self-Management – Caroline Steens and Karli Rowe**

Making a difference for rural Māori.

Rangimarie Room 3

**D. Stubborn about our goals, flexible about our methods - Health Care Home**

**Astuti Balram**, Integrated Care Collaborative (ICC) Programme Manager; Strategy, Innovation and Performance, CCDHB

**Mabli Jones**, General Manager Service Development; Compass Health

Partners in the Capital & Coast District Health Board – the DHB, PHOs and Hospital Services have together developed and implemented our Health Care Home model. We will reach 80% of the DHBs population and enable the integration of District Nurses and Community Allied Health with all these team within three years. To achieve our goals, we are working with teams on the ground to shape our approach and learning a lot as we go. While it is early days, progress is positive and key to this has been our shared goals.

3:20pm–3:45pm

Afternoon Tea

3:45pm–4:30pm

**Plenary Session - Digital Health**

Oceania Room

**Dr Robyn Whittaker**, Associate Professor Health Informatics & Technology, National Institute for Health Innovation (NIHI)

Dr Robyn Whittaker is a public health physician, CD of Innovation at Waitemata DHB, and mHealth (mobile health) researcher at the National Institute for Health Innovation. She will present some of the mHealth developments and research her team at NIHI have been working on recently, and particularly how these are/can be implemented in primary and community care. She will also talk about the importance of ‘mobility’ in healthcare – not just from the perspective of current developments at the DHB but also how future developments may disrupt the way we provide health services.

4:30pm–5:00pm

**Evaluation/wrap up - Whakamutunga**

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# Speaker Biographies

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## Jake Bailey

Jake Bailey is the ex-Christchurch Boys' High School senior monitor, whose end of year speech made worldwide headlines after going viral in November 2015. A week before he was due to deliver this speech, Jake fell ill and was diagnosed with Burkitt's Non-Hodgkins Lymphoma, the fastest growing cancer known to man. Jake was given two weeks to live if this was left untreated. He persevered through to make his speech to his school, and the video of this went on to touch the hearts of millions and draw support from across the globe. Since being announced in remission in January 2016, Jake has gone on to share his experiences, his story, and the things he has learnt that have given him clarity throughout his journey, in the hopes of helping others facing difficulties. He has presented over 100 speeches to a vastly wide range of audiences across many locations, and while based on the Gold Coast full time, he travels most weeks for these presentations. He is the author of the #1 Bestselling book, 'What Cancer Taught Me'; a weekly columnist for the NZ Herald, and the subject of the documentary, 'The Common Touch'. He is also an official ambassador for two charities- Maia Health Foundation in New Zealand, and Tour de Cure in Australia, and is incredibly passionate about these organisations and the differences they make.

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## Astuti Balram

Astuti Balram is an Integrated Care Collaborative (ICC) Programme Manager; Strategy, Innovation and Performance, Capital & Coast DHB, Wellington.

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## Sandhaya (Sandy) Bhawan

Sandhaya (Sandy) Bhawan is the Programme Development Manager at Te Awakairangi Health Network, a primary health organisation in the Hutt Valley, Wellington, New Zealand. She is also a registered pharmacist with extensive experience and background across a number of pharmacy sector settings. She is one of the current recipients of the Health Quality & Safety Commission's scholarship for the PHO Improvement Advisor Programme with Ko Awatea, and is the project lead for one of the Commission's Whakakotahi primary care improvement challenge projects in a Hutt Valley general practice. In all her roles, her passion for enhancing healthcare quality and medication use is evident.

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## Dr Nick Chamberlain

Nick Chamberlain has specialist qualifications in Medical Administration and General Practice. He has previously had roles as General Manager of Clinical Service at Northland DHB, General Manager of Planning and Funding at Capital & Coast DHB, Clinical Advisor and GP Liaison, Northland DHB, and 11 years in his own General Practices. He has clinical interests in Sports Medicine, Geriatrics, and Addiction, and has management interests in clinical governance and patient safety, improving the patient journey, chronic care management, and preventing avoidable hospitalisation. Dr Chamberlain enjoys the challenge of building an effective team that makes a real difference and helps enable improvements in health outcomes for our population.

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### Dr Lynley Cook

Lynley Cook is a public health physician, who for the past eight years has been working in the intersection between population health and primary health care. She has a particular interest in strategies to increase access to services that achieve more equitable health outcomes. Her recent move into quality improvement resulted from a recognition of the need to fully embed a population health approach within health services design and delivery.

Lynley has been instrumental in leading the development of the education programme "Motivating Conversations" that aims to enhance the motivational interviewing skills of primary health clinicians. The uptake of this programme is one of Canterbury's contributory measures for the System Level Measures and is linked to the amenable mortality measure.

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### Jane Cullen

Jane Cullen is a quality improvement advisor working with the Health Quality & Safety Commission's primary care improvement programme: Whakakotahi, meaning 'to be as one'. Jane is a registered nurse. She holds a masters in quality systems (with distinction) from Massey University. Her masters research was conducted in primary health care improvement. Prior to working for the Commission she worked for Central PHO and has also worked in aged residential care, hospice and DHB in quality improvement roles.

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### Greig Dean

Greig Dean is responsible for the Integrated Case Management (ICM) model which supports General Practice in the care of patients with chronic conditions and / or complex needs by providing case management services that support and compliment the clinical objectives.

*"I own a Café/Bar/ SUP/KITE business at Ohope beach with my daughter and work for the EBPHA part-time. I started my career as a Social Worker in the Eastern Bay before returning to university and completing post-graduate business qualifications at Monash. Roles in Australia, Hong Kong and London followed over the next twenty-five years in the areas of organisational design, strategy and business improvement for large corporates.*

*On returning to NZ, I worked for Zespri International and Sky City before hanging up my suit. Over the past three years I have enjoyed the challenges of developing a service and a team which supports General Practice in the care of patients with chronic conditions."*

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### Dr Gerry Devlin

Gerry Devlin has been Medical Director since 2014. A general and interventional cardiologist at Waikato Hospital, Gerry is also Associate Professor in Medicine, Waikato Clinical School, Auckland University. He is an accomplished clinical academic cardiologist who is a highly effective regional and national leader in heart health care. An active researcher, Gerry has over 60 publications to his name. Research interests include: acute coronary syndromes, heart failure, valvular heart disease and systems of care.

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### **Dr Tony Dowell**

Tony Dowell is Professor of Primary Health Care and General Practice, and Head of the Department of Obstetrics and Gynaecology at the University of Otago in Wellington and a GP at Island Bay Medical Centre. He has worked in primary care in New Zealand, the UK and Central Africa. His current research interests include health care interactions and communication, and primary mental health care. Tony is co-director of the Applied Research on Communication in Health (ARCH) Group at the University of Otago – Wellington.

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### **Terry Ebeling**

Terry Ebeling is a highly regarded clinician and clinical supervisor and also teaches in this field. He has 35 years clinical experience in both inpatient and outpatient psychiatric services, (which makes him extremely old) employee assistance work and clinical supervision. Since obtaining a Master's Degree in social work in 1987, (which still makes him extremely old) he has worked as a Registered Psychotherapist and is a member of New Zealand Association of Psychotherapists. In addition to his work with Family Mental Health Services, Terry provides family therapy services for Otago Youth Wellness and is in private practice at Delta Psychology.

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### **Dr Fraser Hamilton**

Fraser Hamilton is a General Practitioner in Hamilton. He also works as a Medical Officer for the Cardiology Clinical Trials Unit at Waikato Hospital. In July 2014 he became the GP Champion for the Heart Foundation helping to advocate for, and support the delivery of, cardiovascular risk assessments and management.

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### **Stacy Harborow**

Stacy Harborow has had a number of years' experience working in Mental Health both with Adults and Children and Young people both in Australia and New Zealand. Since graduating with her Bachelor of Nursing and Post Graduate Certificate in Mental Health she has worked in Forensic Mental Health and Adult, Child and Adolescent Mental Health. She was originally the Child and Youth Specialist Clinical Nurse at Family Mental Health Service for eight years before she became the Clinical Nurse Manager. Stacy has been at the forefront of several innovative initiatives in Primary Mental Health Care including Taieri Health and Social Service Partnership and also securing and administering the Corrections contracts for WellSouth Primary Network, all this while raising her young children.

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### Mabli Jones

Mabli Jones trained as a nurse in London in the 1980's, specialising in the care of patients with HIV/AIDs. She subsequently worked in a variety of roles across the National Health Service, in general management, education and service development programmes in both primary and acute care.

In 2014 Mabli moved to New Zealand with her family to take up a two-year opportunity to work for Pinnacle Health Network as a General Manager. This visit has now been extended to a longer stay, and she moved to Wellington in 2017 to take up her current role as General Manager, Service Development at Compass Health. Her discovery and passion since arriving in New Zealand is waka ama (out-rigger canoeing).



### Helen Lockett

Helen Lockett is an experienced director and researcher and is the strategic policy advisor for the Wise Group, New Zealand's largest non-government organisation in the mental health and addictions sector and is also a Director of Weaving Threads Consultancy Ltd.

Helen's focus is on how to influence and bring together policy, research and practice to improve outcomes for individuals and families/whānau. Helen is acknowledged internationally as an expert on employment and mental health. Indicators of this include her appointment in 2011 to the Ministry of Social Development's health and disability expert panel for welfare reform and as the lecturer on mental health for AUT's post graduate vocational management and rehabilitation paper.

Prior to moving to New Zealand in December 2010, Helen was director of programmes at the UK's Centre for Mental Health, a leading international policy centre.

In 2013, Helen was appointed onto the Community Board of Pegasus Health, PHO in Canterbury.

Helen is also currently working as a contractor for the OECD, to develop a country report and recommendations for mental health and work in New Zealand. <http://www.oecd.org/health/mental-health-and-work.htm>



### Alex Loggie

Alex Loggie trained as a registered mental health nurse in the UK qualifying in 1989.

After working for several years in acute inpatient units where Alex progressed from staff nurse to unit manager of an acute 32 bedded unit he eventually transitioned to a Community Psychiatric Nurse position.

The CPN positions he held covered both inner city and rural localities. This work was directly linked to primary care and community providers. During his time as a CPN he became interested in talking therapies. This led to qualifying as a cognitive behavioural therapist.

Prior to leaving the UK in January 2005, Alex managed a Community Mental Health Team covering a practice population of 150K.

*"My Current position as of Jan 2017 is - 0.5 (fte) clinical educator mental health and addictions for primary care and 0.5 (fte) Mental Health Liaison. The latter is a therapy focused role. I also remain the co-lead for Whanganui Rising to the Challenge (WRTTC) adult work-stream and am the primary care representative for the Mental Health and Addictions Regional Leadership Group under Central TAS.*

*Goals for WRTTC are to have healthier more informed communities, be more focused upon and systematically attentive to social determinant aspects of health and wellbeing, enable access to resources appropriate to the needs of the individual and by doing so reduce prescription rates for SSRI's, Benzo's and Hypnotics. Nothing too big....*

*We are at a time of transition and both hope and expect to move from disease models to a health focus and start creating win/win scenarios.*

*In summary lots of challenges and lots of possibilities."*

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### Dr Rachel Mackie

Rachel Mackie is a GP at Harley St Medical in Nelson and developing an interest in quality improvement. Rachel is on the Nelson Bays Primary Health clinical governance committee, Quality Advisory Committee at the RNZCGP and one of the GPs on the Whakakotahi project in Nelson. After completing training at medical school in Auckland, Rachel returned to Hawkes Bay for her house surgeon years and Fellowship in General practice at Totara Health in Flaxmere, Hastings. Rachel and her family then moved to Nelson in 2014 where she now practices part time and looks after her daughter Neave.



### Prof Hayden McRobbie

Hayden McRobbie is Professor of Public Health Interventions at Barts and The London School of Medicine and Dentistry, Queen Mary University of London (UK) and Director of the Dragon Institute for Innovation (NZ).

He is a medical doctor with a PhD in psychology with over 16 years' experience in the provision of behaviour change interventions in the fields of smoking cessation and weight management and has international experience in implementation of evidence-based practice.

Professor McRobbie's clinical expertise is in behavioural medicine, with a specialist interest in tobacco use and obesity. He was involved in implementing the Clinical Guidelines for Weight Management in New Zealand in 2012 and has, more recently, been involved in assessing innovation projects on pre-diabetes and long-term conditions. Hayden has also been involved in the development and delivery of a weight management programme (The Weight Action Programme) that was designed to help underprivileged groups achieve a healthy weight. He has played a key role in the implementation of the Tobacco Health Target in New Zealand and is an advisor to the Tobacco Team at the Ministry of Health. More recently Hayden has taken on the role of 'Raising Healthy Kids' Target Champion.

Professor McRobbie provides technical and clinical advice to healthcare organisations, NGOs, and governmental departments on smoking cessation and weight management, in New Zealand and internationally, and services on numerous expert bodies, committees, working groups and conferences. He is Assistant Editor of Addiction, Deputy Editor of the Journal of Smoking Cessation, and a member of the Society for Research of Nicotine and Tobacco (SRNT).



### Dr Andrew Miller

Andrew Miller has been a GP for the last 25 years over which time there have been continuous discussions about the likely benefits of having electronic shared care plans.

Due to a period of ill health, Andrew was unable to work as a GP for 16 months during which time the Northland DHB saw him idling around at home and kindly put him to work. Following the lead of Counties Manakau who had already embarked on creating electronic shared care plans, Northland dived in boots and all to not only start creating shared care plans but also use the shared care tool to allow secure messaging and summary patient information to be available to any registered Northland health provider for all Northlanders.

If we ask patients "what matters to them" they're telling us:

*"I can plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me".*

*"We are sick of falling through gaps. We are tired of organisational barriers and boundaries that delay or prevent our access to care. We do not accept being discharged from a service into a void. We want services to be seamless and care to be continuous".*

What has transpired over the last year is an interesting story of technical and health provider "cultural" challenges. We've made considerable progress but have a long way to go to get the IT solution fully functioning and to try and embedded a patient centred paradigm of care.

Fortunately, Andrew has thick skin and a bloody-minded drive to get this across the line. Having been at the receiving end of a "care planning void" during his own ill health it's not been hard for Andrew to remain motivated. None of us are as smart as all of us, and if "what matters to you, doesn't matter to me" then it's time to leave the health sector and find a new job.

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### Fran Mitchell

Fran Mitchell is a Quality Improvement Coordinator at Nelson Marlborough Health and is passionate about quality improvement and making positive changes. She is currently doing the Improvement Facilitator course at Ko Awatea and leading the Whakakotahi 'heart attack' project with a diverse and enthusiastic team. Previously, Fran has worked as quality manager at Auckland District Health Board and a project manager at Auckland Council before her and her partner made the wise move to Nelson where they now live in one of Nelson's oldest houses on a (mostly) organic lifestyle block. Fran is a keen promoter of integration between primary, community and secondary care.



### Dr Allan Moffitt

Allan Moffitt joined ProCare in July 2014. He has held positions in a range of health care organisations, including the role of Director of Primary Care at Counties Manukau DHB, Medical Director for Midlands Health Network, Deputy Chair and Clinical Lead for Greater Auckland Integrated Health Network (GAIHN), and Clinical Director for PHOs: EastHealth Trust and Alliance Health Plus. He was foundation Deputy Chair for the IPA Council.

Allan owned his own practice in Howick for 18 years and has been working in Otago as a part-time GP for more than 10 years. He is a vocationally registered GP and ex-clinical teacher and was awarded a distinguished service medal from the RNZCGP for his work with part examinations and membership of the Auckland Faculty Board. He has worked on and chaired a range of committees and working groups in the health care industry including at ministerial level.

Allan is a member of the NZ Institute of Directors. He currently chairs the Metro Auckland Clinical Governance Forum across all the PHOs and DHBs in Auckland.



### Sally Nicholl

Sally Nicholl is the Manager of Hutt Union & Community Health Service (HUCHS), a general practice with two health centres in the Hutt Valley, Wellington, New Zealand. She has a background as a nurse and a midwife but has been working as practice manager for the last 15 years. She is one of the current recipients of the Health Quality & Safety Commission's scholarship for the PHO Improvement Advisor Programme with Ko Awatea, and is co-leading the HUCHS Diabetes Improvement Project. Sally has a focus on health equity and improving health outcomes for high need populations.



### Tim Norman

Tim Norman is a trained NZ comprehensive Registered Nurse whom later went on to complete his Post Grad Dip in critical care at the Alfred Emergency Department, Melbourne Victoria and Latrobe University.

On his return to NZ Tim began his management acronym and has held positions as a national operations manager in the private sector before returning to the Waikato DHB clinical coal face.

Tim later went on to establish and implement the largest cardiac Cath labs in New Zealand as Charge nurse and finally holding the position of business manager for Cardiology, Cardio-thoracic and Vascular surgery CCTVs. Tim's current position as Regional Implementation Manager & Director of I've got a plan, Ventures, Pinnacle Midland Health Network and his innovative change have combined to design and implement current risk stratification tools, and a new technology "Point of Care Testing" to advance and support primary care to safely manage low risk chest pain in the community.

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### Letitia O'Dwyer

Letitia O'Dwyer was previously the Chief Executive for the New Zealand Organisation of Rare Disorders (NZORD) an organisation, which under her leadership raised its national awareness, professionalism and support group engagement. Letitia has over 20 years extensive experience in the health sector which includes the introduction of new health technologies, improving access to medicines, initiating imaging and diagnostic trials and establishing international healthcare networks. She holds a Bachelor of Science, a Post Graduate Diploma in Business and a Masters in Health Management all from the University of Auckland, School of Population Health. She has sat on a number of international and national advisory boards and most recently was an invited speaker to the World Orphan Drug Congress in Washington DC. She has held senior management positions in both the corporate diagnostic and pharmaceutical industry, and collaborated with many NGOs over the years.

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### Reweti Ropiha

Reweti Ropiha is the current CEO for Turanga Health. He has over 20 years' experience in delivering community and primary health services within Turanganui A Kiwa (Gisborne). Reweti is of Ngai Tamanuhiri and Rongowhakaata whakapapa.

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### Karli Rowe

Karli Rowe assists with support and education around Diabetes, CVD, weight management and respiratory disease for individuals across the Eastern Bay of Plenty, with both one-on-one clinics and group Self-Management Education Sessions.

Originally from Ohope, Karli spent a year in Argentina before beginning study towards being a Dietitian at Massey University in Auckland, graduating with an MSc at the end of 2015. Since then, she has been involved in a variety of roles including academic research, foodservice and corporate wellness, before moving into her current role of Community Based Dietitian (Adults) in Whakatane late last year.

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### Caroline Steens

Caroline Steens is of Ngai Tuhoe, Te Arawa and Dutch whakapapa born in the sunny town of Whakatane. After many years of travel she returned home in 1997 to begin her nursing journey and have since worked in numerous jobs including Mental Health Nursing, Practice Nursing and Kaupapa Māori Advanced Nursing. She has been in her current role for just over a year.

Caroline has both a professional and personal interest in diabetes with three of her siblings and many extended whānau members being affected by the condition. This motivates her in her work and she feels excited about having the opportunity to share information with rural communities in a way that engages them and helps them to understand further about their health and choices they can make to improve their outcomes.

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### **Pauline Sanders-Telfer**

Pauline Sanders-Telfer is the Nurse Leader for Alliance Health Plus PHO, Pacific-led PHO based in Metropolitan Auckland.

She has 20 years nursing experience in a range of settings and roles, and is involved in nursing models of care, nursing education and mentoring support for nurses in Primary Health Care.

Pauline is also involved in local and regional activities that inspire healthcare transformation in Primary Health Care. She has a particular focus on reducing health inequity for Pacific communities.

Pauline is completing her Masters in the Aniva Pacific Nurse Leadership Alumni and supports the development of Pacific Nurse Leaders across the health sector.

She is also a member the Nurse Executives of NZ, Metro Auckland Clinical Governance Forum and a founder of the Pan Pacific Nurse Association.

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### **Dr Maria Stubbe**

Maria Stubbe co-directs the Applied Research on Communication in Health (ARCH) Group in the Department of Primary Health Care and General Practice at the University of Otago, Wellington. She is an interactional sociolinguist by training, and has been researching and teaching in the field of health care communication and health service delivery since 2003.

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### **Dr Mark Wallace-Bell**

Mark Wallace-Bell is a New Zealand registered nurse and a former chartered health psychologist in the UK. Mark is the team leader for the Heart Foundation stop smoking team. He is also a lecturer in Health Sciences at Canterbury University where he teaches two post graduate papers on Motivational Interviewing (MI). Mark is a member of the Motivational Interviewing Network of Trainers (MINT). Mark is conducting MI research in the areas of MI training, investigating the relationship between MI skill development and client change talk. His other research interests include the impact of MI on adolescents with Type 1 Diabetes, the use of MI and MI buddies to increase physical activity and the use of MI to motivate young women to stop smoking in a young parent college setting.

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### Robyn Whittaker

Robyn Whittaker is a Public Health Physician currently leading the innovation stream within a newly established Institute for Innovation and Improvement at Waitemata District Health Board. She leads the Leapfrog Programme of enterprise wide strategic projects, partnerships with industry and academic institutions (such as the Precision Driven Health research partnership), and a Centre for Health IT & Creative Design that works with DHB staff to develop and trial new things.

Robyn is also an Associate Professor at the National Institute for Health Innovation, University of Auckland, where she co-leads the Health Informatics and Technology research team. Her research interests are in mHealth (mobile health) – particularly designing and trialling interventions to be delivered to people via their mobile phones. These include health behaviour change interventions, such as TextMATCHhealth information for pregnant women and families with young children to encourage healthy diet and physical activity, and self-management programmes for long term conditions, such as SMS4BG self-management support for people with poorly controlled diabetes.

Robyn contributes to several national and international groups including the World Health Organisation/ International Telecommunications Union's Informal Expert Groups for the 'Be Healthy Be Mobile' global initiative, the NZ Telehealth Forum Leadership Group, the board of the NZ Health Innovation Hub, the management team of the MedTech Centre of Research Excellence, the editorial board for JMIR mHealth & uHealth, and is a consultant on several international research projects. She was a NZ Harkness Fellow in 2010/11 during which time she was an invited expert on the Secretary of Health & Human Services' Text4Health Advisory Committee.



### Te Puea Winiata

Te Puea Winiata is of Ngati Ranginui descent with Tainui affiliations and was brought up in South Auckland. Te Puea trained as an Addictions Counsellor and later as a Care and Protection Social Worker to move into a role of Senior Social Work Competency Practitioner before moving into management about 25 years ago. She managed Community Alcohol and Drug services including a methadone service in South Auckland for Waitemata Health. While there she led the development of a kaupapa Māori Addiction service, Te Atea Marino.

Working in the Ministry of Health as a Senior Analyst for three years and then returning to the mental health and addictions sector, she also managed a number of regional mental health and addictions workforce development initiatives and was involved in national scholarship programmes.

Te Puea has been involved in Te Rau Matatini from its inception and is currently the Chair of Te Rau Matatini Company Board of Directors, the national Māori Mental Health and Addictions Workforce Development Centre. She is also community representative on two committees for the Royal Australasian College of Psychiatrists and has a passion for increasing access for whānau to quality primary mental health services.

Moving into Primary Care in 2009 as a private consultant, she was appointed to CEO of Turuki Health Care in 2010 which is an NGO providing integrated health and social services to people and their families in South Auckland. Turuki has its own Pharmacy and opened a new GP clinic in Panmure. The organisation is also a member of the Kotahitanga Whānau Ora Collective and has established a new company in partnership with PARS INC which has a focus on services for those who have been incarcerated and their whānau to address the cycle of intergenerational incarceration.

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## Notes

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# Primary Health Care Symposium 2017

Te Papa, Wellington | 15 November 2017

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