

## CONFERENCE ABSTRACT

# **An equitable, person directed approach to delivering wellbeing focused allied health enablement services in the community. The journey to transform clinical practice and gain the trust of a community**

21st International Conference on Integrated Care, Virtual Conference – May 2021

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The Bay of Plenty DHB identified that there was a significant gap in the provision of enablement focused, early intervention that provided equitable options, particularly for Māori clients. It was apparent that restrictive, criteria led service delivery was not meeting the engagement needs of clients, with few Māori trusting community services to assist with improving wellbeing. A new model of care was endorsed to promote equitable, person-directed wellbeing services. The challenge ahead was to operationalise this at practice level in an environment where systems, processes and cultures were orientated around criteria led delivery with a strong medical model influence.

Secondary care allied health clinicians were seconded within a kaupapa Māori community health team to co-design the service independently of the constraints of the system. It was predicted, that by allowing the service to develop outside of the DHB and within a kaupapa Māori working environment we would begin to see practice transformation.

It aimed to;

- To enable, engage, empower, and enhance a person to remain well or get well within their own home.
- Provide a joined-up, seamless approach which is easy to navigate for people and their family/whānau to access.
- Improve current state of the system by removing barriers that exist to reduce inequalities and improve health and wellbeing outcomes.

Māori clients were specifically targeted via the development of wayfinding pathways to access the service. This allowed clients to access the service through already established trust and connection points held with the community teams.

To date the service has maintained 85% caseload of māori clients to non-māori compared to an average of 22% prior to this. Fulfilment of wellbeing has been rated highly following intervention with positive feedback re the cultural integrity of the service. Clients are exceeding their previous level of wellbeing and are building skills to manage their health. The service is proactive and reaching those in our population that have not engaged with community services. The trust created has allowed us to weave in specialist services utilising the trusted networks now built with the community.

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The clinicians involved have experienced significant practice transformation with inter-professionalism and cultural intelligence emerging in their practice.

Further research is underway to look at the conditions that were required for this practice transformation to emerge.

To date we have found the following cornerstones are key to this practice transformation.

- The integration of secondary services workforce with kaupapa māori workforce to improve cultural intelligence and ensure trust is established with the community (authentic partnership).
- Ensure that services can be woven in around community health and General practice once this trust is established to provide services closer to home and encourage a holistic view of client need away from secondary care clinic environments.
- Develop wayfinding access points in addition to the traditional referral approaches and ensure that there is care coordination to find proactive solutions for clients.
- Provide a less bounded environment to allow features such as inter-professional practice to emerge.