

+64 21 131 5101



## **NEWSLETTER NOVEMBER 2023**

Welcome from Dr Jeremy Webber, Clinical Director Rural Health



Kia ora tātou

A fresh approach to the introduction of this edition as Grant enjoys some time connecting with whenua and whānau in the Tasmanian hills.

The anticipation of the new government is ringing a parallel with health reform. E noho eh, kia raungāwari (wait and be flexible, sit down and bide our time) - let's trust that time leads to a more considered and virtuous outcome. In the meantime, our mahi continues with the advocacy team preparing Briefings to the Incoming Ministers to ensure that rural as a priority population remains at the forefront.

The NZLocums team, flanked by many of our rural leaders, had a strong

presence at the WONCA conference in Sydney at the end of last month. It will take some further work to translate the recruitment interest into a clinician at our rural bedside however, there was certainly a unified presence with Hauora Taiwhenua joining with MCNZ, Immigration NZ and the College and the ongoing relationships that these projects build. In particular, it was great to see NZ research presented at that forum by Katelyn Costello as part of her thesis.

The other takeaway of note from the Australian experience was the profound sense of shame in the medical community around the recent referendum in Australia, where the vote to give First Nations peoples a voice in the constitution was rejected. It allows us all to reflect on the fundamental value of cultural safety in Aotearoa and continue our push for equitable health care across the motu.

Locally, we celebrate the Inaugural Professorship Lecture from the heart of rural academia this week, appropriately given at the Earnsclough Hall by Professor Gary Nixon, to a local and virtual cast of hundreds.

I've also had the pleasure this week of joining our Hauora Taiwhenua rural health students on their rural school visits. Their enthusiasm and the warmth of their reception in sharing the opportunity of a health career, with six professions represented, from paramedicine to occupational therapy to the year 9 and 10 students was great to see.

This time of year is typically a flurry to round off projects before the summer break however, we well know that each of you are likely to be investing more hours than you're paid for in preparation for holiday influxes into rural, and we thank you for this. Enjoy the warming weather and look after each other.

Mauri ora **Dr Jeremy Webber**Clinical Director Rural Health

Hauora Taiwhenua Rural Health Network

### A note from the Board - Rhoena Davis

Kia ora tātou

Ki ngā Mataa waka o ngā hau e whā, tēnei te mihi atu kia koutou. He uri āhau nō Ngāti Te



Maara, Ngāti Kahu rātou ko Ngaitakoto. Ko tōku mahi, he Mātanga tapuhi me te Kaitohu Whakatapuhi O Mahitahi Hauora PHE. Ko Rhoena Davis āhau, Te Rōpū Ārahi Vice Chair and the Hauora Taiwhenua Vice Chair

I have had the privilege of being the vice chair of the Hauora Taiwhenua Board, and Te Rōpū Ārahi for the past two years. I am on the Financial and Audit Risk Committee, the NRHC24 Conference Committee, the Rural Nurses Chapter and support the Whānau Whānui Chapter. My journey with the NZRGPN began as a NZ Rural Nurse representative in 2017 and was later nominated to the Board as the northern North Island Representative in 2018.

Over the past 30 years, I have worked in various rural settings. My first job was at the Bay of Islands Hospital as a general rural nurse, including paediatrics, coronary care, and acute emergency care. I later undertook a role with Public Health and have had the privilege of working with Ngāti Hine Health Trust as a mobile rural nurse before moving into a clinical management role. In 2010, I qualified as a Nurse Practitioner with a scope of practice in Whānau Ora and have practised throughout the far and mid-North. As an early Māori Nurse Practitioner pioneer, it was obvious that the skills of Nurse Practitioners would be better suited in primary care and rural communities, where my advocacy continues for the workforce and resourcing needs of the communities within rural health.

I married my teenage love, Patrick, and we have four adult children – Our daughter is the eldest with three brothers – and I am Gamma to seven grandchildren. I enjoy being at the beach, swimming, paddle boarding, and relaxing under a tree reading a book.

**Te Ao Hurihuri** – Rural health is my vocation – My focus, passion, and commitment have been with Māori Health and remote rural communities, advocating for solutions that will enable a sustainable rural health sector to deliver an equitable service. Workforce issues, pay parity, and appropriate funding streams continue to challenge rural health and care.

Te Rōpū Ārahi partners with Hauora Taiwhenua to enhance the goals of our objectives for equitable quality healthcare for rural communities. Our purpose is to achieve wellbeing for Māori by exploring and researching creative and innovative rural solutions. I am honoured to be part of a dynamic team with a high calibre of skills. Hauora Taiwhenua has been the foundation of whānaucentric and general practice professionalism, ensuring rural health receives the attention and focus it deserves.

In the upcoming months, Hauora Taiwhenua will focus on facilitating the Board and Chapter AGMs. We are currently in a time of many changes, and we will support our members – the rural health workforce across Aotearoa, providing a

strong voice in advocating for structural and sustainable change in rural health.

In addition to my role as Vice Chair, I serve as the Co-Chair of the College of Nurses Aotearoa (Fellow) and hold various key positions in Nurse Leaders of General Practice New Zealand, the New Zealand Nursing Council, the National Nurse Leaders Group, the Te Tai Tokerau Nurse Practitioner Forum, and the Māori Nurse Practitioner Group.

Recently, I was invited to WONCA 2023 as a Board member of Hauora Taiwhenua. With 4,500 registrations representing 112 countries and featuring 600 presentations, the event focused on the theme "Universal Health Coverage: Moving Together to Build a Healthier World," highlighting the crucial role of rural healthcare professionals.

During the conference, global problematic trends were discussed, including health workforce challenges, specialisation, market mechanisms, overdiagnosis/overtreatment, low-value care, and the impact of commercialisation and consumerism in the digital health landscape.

My primary responsibility was to engage with Nurse Leaders and participate in workshops on rural general practice and Indigenous health. I also had the opportunity to share my views on cultural safety within general practice alongside Dr David Tipene Leach, drawing upon Kawa Whakaruruhau principles.

The conference emphasised the need to scale up efforts for recruiting and retaining competent health workers, advocating for incentives to ensure equitable distribution. It also underscored the pivotal role of General Practitioners, rural and remote nurses, and midwives in effecting positive change. Nurse Leaders were identified as key players capable of understanding and responding to political imperatives, emphasising strategies like involving them in decision-making, advocating for equity and promoting generalist training. The conference stressed active research and data collection to demonstrate the value of rural and remote nursing.



Shelly Nowlan, Chief Nurse from Brisbane, Joyce B Kenkre, an English nursing Academic, and I shared a viewpoint regarding the WONCA Albuquerque Statement on the key role of the Rural Nurse. The proposed steps included strengthening primary care for universal health coverage, ensuring quality and affordable access to medicines and health technologies, protecting individuals from financial ruin due to health costs.

implementing high-impact health interventions, and reinforcing governance capacity. Joyce shared her insights on integrating thought into practice and emphasised a new career pathway for nurses and midwives in Wales that integrates research and clinical practice.

I am incredibly grateful for the opportunity to have attended WONCA 2023 and work with many delegates from around the world. The insights and calls for action signal a renewed focus on empowering rural healthcare professionals and overcoming challenges hindering equitable healthcare delivery worldwide —a collaborative blueprint for building a healthier world.

Ngā mihi Rhoena Davis

### Rural Health Careers Programme





# Mobile Health Group and Hauora Taiwhenua Scholarship - An update from our Winners

Mobile Health partnered with Hauora Taiwhenua Rural Health Network to offer rural youth financial support in pursuit of their health studies by way of scholarships. We received 64 applications in total, and as always, we are impressed by the calibre of applicants detailing their interests in rural health and the activities undertaken to show their commitment. It was incredibly difficult to narrow down the applicants to just four, but the chosen recipients are now going through the final stages of the scholarship process. We look forward to announcing the winners in the New Year. Thank you to everyone who applied – it is encouraging to see the volume and standard of applications, as well as the dedication to improving the future of rural health in Aotearoa New Zealand.

We would also like to provide an update on the winners of last year's

scholarship. Click the link below to read what they had to say about their first year of studies.

### Read more here!

### **Rural Communities**

# Telehealth Pilot in Canterbury Reduces Emergency Department Pressure

A three-month Telehealth pilot launched by Te Whatu Ora Canterbury proved successful in its aim to improve service for patients and reduce pressure on Emergency Departments (ED) through the use of technology.

Completed at the end of October, the Specialised Telehealth Aotearoa (STAR) project was an initiative funded by Te Whatu Ora within the public health service and with collaboration from St John Ambulance. Providing remote support for health professionals who are dealing with complex health situations, the ED at Christchurch Hospital was able to offer a telehealth service via video technology called GoodSAM. Teams from St John were able to dial in to access specialised information, in particular for their Status 3 and Status 4 patients.

The GoodSAM video call allowed the team at ED to assess the patient remotely, which then guided the development of a clinical pathway. Some patients were assessed as being able to be monitored in their own home or were referred to their local GP or nurse practitioner. For patients who required more immediate care, the consultant on the video call could arrange for the patient to be transferred directly to the appropriate unit at the hospital on arrival. This provided faster care for the patient and reduced pressure on the ED.

Paul Walmsley, Practice Manager at Hamner Springs Health Centre, recounts the story of a patient who came to their after-hours clinic during the weekend. The patient was in extreme pain with a large facial swelling. As a result of a telehealth consultation between the Hanmer Springs clinician via the STAR project, the patient was able to be seen by a specialist within 20 minutes of arrival at the ED in Christchurch, bypassing many hours in the waiting room.

Statistics provided during one week of the project during September

showed that of 54 calls made to the service, only 20 resulted in a transfer to hospital. With the remainder of the patients being managed in the community, this demonstrates the potential for significant cost savings in addition to improved outcomes, especially for rural-based patients.

### **Key benefits of the STAR project:**

- Reduces unnecessary travel time for the patient in the ambulance
- Reduces unnecessary travel time for ambulance and staff if the patient has no need to be transported to hospital
- Faster access to specialized care provided by telehealth thus reducing/removing extra time in hospital
- Opportunity for more culturally appropriate services
- Upskilling of staff who are involved on the call
- Less pressure on Emergency Departments

Conference 2024



## **Conference 2024: How to Sponsor**

### We look forward to partnering with you

Opportunities to promote your brand, product or service, make a positive first impression, or revitalise and reconnect with existing relationships include:

- Conference sponsorship: claim a high-profile position at this conference and demonstrate your commitment to the quality of rural health in NZ.
- Conference or service sponsorship: associate your brand,

- product or service exclusively with the conference- individual or multiple sponsorship.
- Exhibition stand: present your brand, product or service as part of the exhibition area where delegates socialise & enjoy their teal breaks & lunch

For all of the information, visit the conference website here: Home I NRHC (nationalruralhealthconference.org.nz)

For any questions/queries please contact: Ashley Darbyshire Conference Coordinator email: conference@htrhn.org.nz

View the sponsorship prospectus here

### Rural Health Careers Programme

# Hauora Taiwhenua Rural Student Research Scholarship winners announced

Hauora Taiwhenua Rural Health Network is pleased to announce the winners of the three Rural Student Research Scholarships for the 2023/24 year. Two of the Scholarships were to provide support to health students for a 12-week elective/studentship, and/or research placement within a rural community of the student's choice. A BNZ Rural Development scholarship was also available to any year two and above Medical Student for the same period.

One of our Hauora Taiwhenua Rural Student Research Scholarships was awarded to Geraldine Atchico. Read below for a summary of the research that she will be undertaking below.

# Understanding Inequity in Access to Specialised Healthcare in Rural Communities within Aotearoa

Access to specialised healthcare is a critical aspect of public health, and rural communities often face challenges in this regard. This is an issue highlighted strongly by the latest New



Zealand Health & Disability System Review, which stated that an unacceptable level of service accessibility has been witnessed to be forced upon our rural communities. This research aims to investigate the factors contributing to the inequity in accessing specialised healthcare services within rural communities.

This project will explore the access to rural healthcare and will assist in guiding rural health professionals in achieving a provision of care that aligns with both patient and whānau values, in order to improve the access and utilisation of services within our rural communities - a current focus for networked hospital and specialist service delivery of the Te Pae Tata Interim New Zealand Health Plan (2022)

A comprehensive investigation into inequity in accessing specialised healthcare services in the rural community of Kaitaia will take place. By utilising a mixed-methods approach, we aim to gain a holistic understanding of the barriers individuals face in accessing and using these services. The outcomes of this study hold the potential to inform policy and drive positive change, contributing to the betterment of rural healthcare in Kaitaia and beyond. To focalise this research, we will be specifically looking at the referrals made to the Orthopaedic Service at Kaitaia Hospital for any knee-related surgeries. By shedding light on these barriers, we aim to contribute valuable insights that can inform targeted interventions to improve access to rural healthcare services.

#### On the Ground in Healthcare

# **General Practice Referred MRI Service Expands to nurse practitioners**

### Please find the below note from ACC

We are pleased to announce that from 1 December 2023 nurse practitioners working in primary care will be able to refer eligible ACC kiritaki (clients) for MRI scans for knee, back and neck injuries.

The General Practice Referred MRI (GPMRI) service was established in December 2020 following a successful pilot programme. The service aims to improve timely access to assessment and treatment for kiritaki by reducing the time from MRI referral to specialist care and a return to work and independence.

Now that the national rollout of GPMRI is almost complete we are keen to expand access to the service, especially for kiritaki living in rural areas. We recognise that nurse practitioners are an important group of providers, particularly in rural communities where they may be the sole provider of primary care services. By expanding the GPMRI service to nurse practitioners, we hope that more kiritaki will benefit from this service.

To provide the service, nurse practitioners will first need to complete an ACC approved GPMRI training course. If you are interested in completing the training, please contact your PHO for upcoming training dates.



Esther Lee 2<sup>nd</sup> Year Medical Student, Paris Shen and Joanna Cao, both 3<sup>rd</sup> Year Optometry Students who ran a Rural Health Careers Expo at Tuakau College on Wednesday 15th October.

**Innovations** 

New Zealand Blood Service to GPs: We want your recently recovered chickenpox, shingles patients

New Zealand Blood Service (NZBS) is calling on GPs to encourage patients who have recently recovered from chickenpox or shingles to make a blood or plasma donation, as their plasma has special antibodies that could be used to make a lifesaving treatment.

Chickenpox may be a mild infection for one person but has the potential to be a life-threatening infection for another. This includes children with cancer and pregnant women.

NZBS makes a special treatment called **Zoster Immunoglobulin** to help prevent these vulnerable groups catching chickenpox. The immune system medication is made from the antibodies found in the plasma of healthy people who've recently had shingles or chickenpox.

Zoster Immunoglobulin provides protection against the virus which causes chickenpox – varicella-zoster virus – for three main groups: Non-immune individuals who are immunosuppressed, non-immune pregnant woman, and babies.

NZBS is asking doctors, healthcare providers, and medical practitioners to help identify eligible donors among recovering patients who could be suitable candidates to donate plasma.

The service needs a minimum of 220 litres of plasma to manufacture Zoster, and so far, this year, it has collected 34% of the plasma needed. With the average plasma collect from a donor yielding 0.48L, NZBS has six months to collect a further 145L to replace the expiry of its current Zoster stock.

Patients who have recently had chickenpox or shingles are eligible to donate if:

- They are aged between 16 and 71 for new plasma donors (or up to 81 for current plasma donors)
- They weigh at least 50kg and are at least 150cm tall
- It's been four weeks since the start of their illness.
- They are feeling well
- Their rash is dry and clean
- And they meet all other donor eligibility criteria.

Those who have had the shingles/chickenpox vaccine or been in contact with someone who has had shingles or chickenpox within the last six months may also be able to help.

Patients can find out more information, including if they are eligible to donate plasma by visiting https://www.nzblood.co.nz/shingles/.

Plasma can be donated at NZBS' donor centres across New Zealand and select plasma mobile drives in Auckland and Wellington. Appointments can be booked online at nzblood.co.nz, via the NZ Blood Service Donor App or by phoning 0800 448 325.

### For more information, please contact:

Asuka Burge, New Zealand Blood Service, (09) 523 6486, 027 272 6437

Asuka.burge@nzblood.co.nz

Sandy Trigg, Network Communication, 021 231 9406 Sandy.trigg@networkcommunication.co.nz

### Leaning on Fence Posts

## **New Content Available on Leaning on Fence Posts**



Leaning on the Fence Posts showcases contributions to keep this blog interesting, up-to-date and informative.

## <u>Treatment of heart attacks at rural and urban</u> <u>hospitals</u>

Investigations and treatment after non-ST segment elevation acute coronary syndrome for patients presenting to rural or urban hospitals in Aotearoa New Zealand: ANZACS-QI 75.

Rory Miller, Garry Nixon, Robin M Turner, Tim Stokes, Rawiri Keenan, Corina Grey, Yannan Jiang, Susan Wells, Wil Harrison, Andrew J Kerr. New Zealand Medical Journal (Friday 10 November 2023 edition)

Check out the latest content on the University of Otago's Leaning on Fence Posts Blog via the button below.

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