



APPLIED HEALTHCARE INNOVATION



The first 100 days

The first 100 days



A UNIQUE PLACE A UNIQUE PARTNERSHIP A UNIQUE APPROACH

Ko Awatea means 'first light' – an appropriate name for a centre that is designed to bring together thinking, innovation and action. Ko Awatea seeks to capture the opportunity of that moment at the beginning of a new day, just as the first light appears and perhaps anything is possible. Ko Awatea is an opportunity to respectfully build on the world-class work of those colleagues around us and those that went before.



INNOVATION & IMPROVEMENT
THROUGH ENGAGEMENT,
EDUCATION, CAPACITY BUILDING
FOR CHANGE, RESEARCH AND
KNOWLEDGE

Executive Summary

"THIS NEW
AND EXCITING
INNOVATION
CENTRE IS ABOUT
PEOPLE AND
SUPPORTING THEM
TO PROVIDE THE
BEST CARE"



Professor Jonathon Gray



A PLACE OF INNOVATION FOR APPLIED HEALTHCARE IMPROVEMENT

I believe Ko Awatea will be the catalyst for us to produce systematic, sustainable change locally, and to be the place the region and country looks to for innovation and solutions to the challenges we face, as we strive to advance and progress healthcare.

We will do this by generating ideas, planning and implementation on the ground as a team, with every staff member having the opportunity to participate. We will be building on the strong foundations already in place and the outstanding research projects that have been developed across the organisation. Now, it's time to create connections between these projects and with the wider community.

This means reaching out to our professional partners locally, nationally and internationally, and to our communities, to bring different perspectives to our thinking. In that way, we can build our own capacity and skills. In turn, we will also contribute our thinking and results to our wider networks.

The Ko Awatea building has been designed so that people can mingle, share ideas and stimulate thinking, carry out research and source the latest information, perhaps using a collaborative work space to turn ideas into plans for action.

Our leaders and experts will also be brought together to discuss and evaluate the results and drive implementation. Ko Awatea also has teaching spaces, seminar rooms and a lecture theatre with state-of-the-art technology to help

us to connect with others, sharing what we are doing with the rest of the region, nationally and internationally. On the ground, Ko Awatea means healthcare professionals will have a place for further education and learning, where quality initiatives to improve patient care will be developed, and where experiences can be shared, problems identified and solutions developed and implemented.

I'm incredibly proud of the work we have achieved since opening our doors in June 2011 with full credit going to the commitment, drive and support of our staff and partners.

Key milestones include:

- A grand opening and three day healthcare colloquium, featuring recognised local, national and international leaders in healthcare. Leaders included Maureen Bisognano, CEO of the Institute for Healthcare Improvement (IHI) - recently named one of the top 25 influential women in healthcare in the USA - and Sir Muir Gray, Director of the Oxford Centre for Healthcare Transformation.
- Students from Auckland University of Technology (AUT), Manukau Institute of Technology (MIT) and The University of Auckland began using the Centre from August 2011. Their arrival created a real buzz and energy within the Centre.
- Ko Awatea's partnership with IHI means that healthcare professionals from around the country now have the opportunity to develop new skills to drive healthcare initiatives, thanks to training in IHI's quality improvement methodology.
- People from across the sector are now collaborating on quality improvement initiatives in various areas of the health sector.
- Ko Awatea has hosted a number of local, national and international visitors.
- We now have a 160 strong and growing workforce under the Ko Awatea umbrella.
- Over 60,000 staff, community partners and visitors were booked into the centre in 2011 with over 194,000 already booked for 2012.

This is just a taste of what Ko Awatea is capable of and in the coming years you will see Ko Awatea live up to its vision of becoming the leading voice and resource for healthcare innovation and improvement in NZ and overseas.

Professor Jonathon Gray
Director, Ko Awatea

“ KO AWATEA WILL BE THE PLACE THE REGION
AND COUNTRY LOOKS TO FOR INNOVATION AND
SOLUTIONS TO THE CHALLENGES WE FACE, AS WE
STRIVE TO ADVANCE AND PROGRESS HEALTHCARE ”

KO AWATEA LAUNCHES CENTRES OF EXCELLENCE

Ko Awatea has set up three centres of excellence - all operating from Ko Awatea. This allows for multi-disciplinary and innovative solutions for health systems improvement to be developed.

RESEARCH, KNOWLEDGE & INFORMATION MANAGEMENT



Professor Andrew Hill, Director Research, Knowledge and Information Management

The purpose of the Research, Knowledge & Information Management Centre is the discovery of new knowledge and the capture and effective use of information. It is focused on specific needs of the organisation and coordinated knowledge to solve system challenges and issues.

"I'm excited to be a part of a Centre, where people can share their research, experiences and ideas and tap into a rich database based on local, national and international best practice," says Andrew Hill, Director Research Knowledge & Information Management.

"The gathering and sharing of information will be a valuable resource for health professionals around the country."

Inspire
Create
Share
Act

WORKFORCE CAPABILITY & LEADERSHIP



Catherine Smith, Manager, Workforce Capability & Leadership

The purpose of the Workforce Capability & Leadership Centre is to foster development of a workforce skilled in both their core skill set and able and willing to improve the quality, safety and value of patient care.

Key projects underway include Keyhole Surgery simulator for junior doctors and surgeons, regular exchanges between clinical staff through research and development courses and professional development in five newly dedicated simulation rooms at Ko Awatea.

"In Ko Awatea we will constantly challenge ourselves to harness new ideas in the relentless pursuit of excellence," says Catherine Smith, Manager Workforce Capability & Leadership.

"In the Centre for Workforce Capability & Leadership we are taking our workforce on a learning journey, heading towards a leadership pipeline. This professional updating focus will help us to deliver the kind of health workers and leaders we need to take our health system into the future. Our vision for our population is based on better care, better population health and lower cost."

QUALITY IMPROVEMENT



Alex Twigg, Manager, Quality Improvement

The purpose of the Quality Improvement Centre is to provide a focus on both the quality improvement knowledge and technical skills needed to ensure healthcare is reliable in practice. The centre will also ensure our people have the knowledge and skills needed to appraise and evaluate scientific evidence, and the forum to utilise proven healthcare interventions, leading to improvements in patient care.

"For me Ko Awatea represents an opportunity for innovative work with a great group of people, who are passionate about improving the performance of a whole system of healthcare," says Alex Twigg, Manager Quality Improvement.

"Quality Improvement is predicted on connecting managers who have the authority to effect change with employees who have intimate knowledge of what needs to change. I am inspired by the challenge of contributing to this as well as assisting both managers and employees leverage this connection by learning and applying high performance improvement frameworks and tools."

Our People

THE 'JIGSAW' EVENT

Staff from Ko Awatea's three Centres of Excellence came together just before Christmas to meet one another (some for the first time), to share the work they were doing and start looking at shared solutions for some of our healthcare challenges.



Tanya Maloney

"As these capabilities and skills are brought together, we can maximise the impact they can have on the wider healthcare sector," says Tanya.

The event called 'the jigsaw' provided an opportunity for different parts of the healthcare system to come together, to develop a shared vision.

Cut out pieces of the Ko Awatea name were covered with photos and ideas, then groups took part in workshops. The goal was to identify what the collective achievements and challenges are within the different teams and centres.

As the different 'pockets' of expertise shared their viewpoints, the teams started to form strands and links that will lead towards the goal of working more collaboratively.

"It's through these relationships that we transform the sector," says Tanya Maloney, General Manager Ko Awatea.

"As these capabilities and skills are brought together, we can maximise the impact they can on the wider healthcare sector."

Tanya adds: "The healthcare system is full of great pockets of expertise, the only problem is they are operating in silos. What we don't do well is bringing different parts of the system together to collaborate.

"By bringing different parts of our new centre together in this Jigsaw event, Ko Awatea is starting to fulfil its purpose of starting a journey of transformation and excellence in applied healthcare. We will continue with this leadership, encouraging collaboration with peers both nationally and globally."

Tanya says one of the other aims of the event was to ensure staff can understand their piece of the puzzle and how they fit.

"Quality improvement is everyone's business, whether you're a nurse educator, mental health facilitator or researcher, all have a part to play," says Tanya.

"Now that we have come together, it is critical that new relationships and links will lead to new ideas and fresh research.

"As different parts of the puzzle work together and learn how to do their jobs in this environment of constant quality improvement, the Ko Awatea management team aims to form an atmosphere where ideas are shared and new capacity is discovered.

"In this new approach, we will all better understand the different capabilities we have in our midst, and work together toward improving the healthcare system."

"The Ko Awatea leadership team is committed to developing our workforce capability, through ongoing seminars and online discussions, thereby creating a whole of system approach to the transformation of our whole health system."

"We will improve clinical processes, informed by research and knowledge, then we'll share our findings with others, like our strategic and educational partners, and other DHBs."



KO AWATEA IS STARTING TO FULFIL ITS PURPOSE OF STARTING A JOURNEY OF TRANSFORMATION AND EXCELLENCE IN APPLIED HEALTHCARE



OUTCOMES FROM THE JIGSAW EVENT

Challenges:

- Ambitious – not being afraid to think big
- Maximising resources and potential
- Reducing duplication and repetition
- Eliminating silos
- Overcoming bureaucracy
- Lack of cohesion, inclusion and information
- Maximising facilities to meet the needs of diverse users
- Ensuring accuracy of data
- Keeping up with technology
- Need for clarity in which public health problems we're addressing
- Ensuring cutting edge research reachings the coal face
- Ensure effective internal communications to reduce organisational silos
- Sustainability
- Meeting unique midwifery challenges and cultural needs locally

Opportunities:

- Gain benefits from economies of scale
- Challenge our way of thinking and working
- Knowledge sharing
- Serve one another
- Make 'whole of system' improvements
- Make a positive difference in people's lives
- Be a dynamic resource and e-world centrepiece
- Embed lifelong learning
- Develop leadership
- Inter-disciplinary and inter-professional development of new ways to collaborate
- Research office, integrated research culture
- Research training, seed funding and expanded ScienceFest
- Dissemination of knowledge
- Greater participation from service users and their families/whanau, clinical heads, universities and other CMDHB services
- Linking up data for the complete picture
- Breadth and depth of information available to be used effectively to improve the well-being of all
- Influencing others - staff, communities and government
- Thinking ahead and predicting errors
- Online learning
- Purpose-built facility
- Reaching full potential (right information, right skills - on hand at the right time), linked through coaching, skills, commitment, leadership, planning, attitude, practice, professionalism, inspiration, motivation and teamwork
- Work goes national and recognised as centre of excellence



THE FIRST 100 DAYS					
JUNE	JUNE/JULY	SEPT	OCTOBER	NOV	DEC
Centre opens	Healthcare Colloquium AUT and MIT students move in	University of Auckland students move in Director Of Nursing Awards Allied Health Day	Saving 20,000 Days Campaign begins New courses with IHI partnership Health Quality & Safety Commision * ISIA Course ** BTS Course Maori Students In Health Careers	Ultrasound Conference Anaesthetic Conference 20,000 Days Campaign	CTEC opens refurbished facility Collaborative First, Do No Harm Project After Hours Project
* Improvement Science in Action ** Breakthrough Series Collaborative					

Our Educational Partners

Successful transformation and improvement relies on successful partnerships and networks to bring together different perspectives, thinking and experiences. It makes sense that we work closely with our universities, harnessing their enthusiasm and creativity. Equally, we have much to learn from our national and international partners, all of whom are on the same path in different environments, and who provide us with valuable perspectives on which to draw.

EDUCATIONAL PARTNERS – THE UNIVERSITY OF AUCKLAND, MANUKAU INSTITUTE OF TECHNOLOGY AND AUCKLAND UNIVERSITY OF TECHNOLOGY

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The University of Auckland is New Zealand's leading university and is the only one ranked among the world's top 200 universities by the Times Higher Education World Rankings of Universities. The University of Auckland is the country's largest with almost 40,000 students and over 6,000 staff. Teaching and research is conducted over eight faculties, with most relationships with Counties Manukau DHB being guided through the Faculty of Medical and Health Sciences. The faculty umbrellas Schools of Medicine, Nursing, Pharmacy, Population Health and the research-orientated School of Medical Sciences. The School of Medicine operates the South Auckland Clinical School training 3rd, 4th, 5th and 6th year medical students onsite at Middlemore.

The University of Auckland is New Zealand's preeminent research-led institution and the University also has the largest graduate school in the country, the largest annual number of postgraduate research student completions and the highest level of research income. The University of Auckland is delighted to be a partner in Ko Awatea.

Website: www.auckland.ac.nz/uoa/

Manukau Institute of Technology (MIT)

The Manukau Institute of Technology has had a long standing working relationship with Counties Manukau DHB and for forty years has been one of New Zealand's premier education and training institutes. In addition to the main Manukau campus there are specialised campuses located throughout the city including locations at Newmarket, the CBD, Highbrook Business Park and Pukekohe as well as community learning centres within the greater Auckland region. Manukau Institute of Technology has several key relationships with other institutes including: University of Auckland, Te Wananga O Aotearoa, Unitec NZ and Southern Cross University in Australia.

Website: www.manukau.ac.nz

Auckland University of Technology (AUT)

AUT works closely with the Counties Manukau DHB and is the largest educator of allied health professionals in New Zealand. Its history is over 110 years old. AUT performs our teaching, research and other duties as defined under the Education Act (1989). In 2000, the Governor General,

by order in council, established the Auckland University of Technology as one of the universities in New Zealand. AUT is the youngest of the eight New Zealand universities and the only one to be established since the 1960s.

Website: www.aut.ac.nz

Education Partners enable Ko Awatea to achieve its vision

Our educational partners have contributed to the development of Ko Awatea and students see it as an extension of their campus facilities. Collaborating is already reaping rewards for students and clinical staff working with them, enabling a more hands-on learning style.



Pic taken from web page - it pictures Beverley McLelland and Willem Fourie at Ko Awatea <http://akoaotearoa.ac.nz/nursing-deu>

A great example of working together is the establishment of a Dedicated Education Unit (DEU), currently being piloted at Ko Awatea. The aim of the DEU is to enhance learner outcomes by actively engaging them in real life placements within this new context. An action research process will be adopted throughout the course of the project.

Dr Willem Fourie, project leader from MIT for the Dedicated Education Unit at Ko Awatea, says collaboration on ideas is already reaping rewards: "If a new trial of I pads in the classroom is successful for MIT students, AUT students are looking at also adopting the technology. This is just one of many benefits of working together more closely on clinical teaching and learning in the Auckland region".

DID YOU KNOW...
THAT 60% OF FUNDING
FOR KO AWATEA COMES
FROM OUR PARTNERS:
AUT, MIT AND THE
UNIVERSITY OF AUCKLAND

Our Educational Partners

STRATEGIC PARTNERS

Strategic partners are key to Ko Awatea being able to deliver its goal of being a Centre for Health System Innovation & Improvement.



Counties Manukau DHB is responsible for the funding of health and disability services and for the provision of hospital and related services for the people of Counties Manukau (Manukau City, Franklin and Papakura Districts) Working with the funding allocated by Government, Counties Manukau DHB is responsible for:

- Collaborating with other DHBs, service providers, the community and other stakeholders to plan the strategic direction for health and disability services in the northern region and promote the integration of health services.
- Funding the provision of most health and disability services provided in Counties Manukau through service contracts with health and disability providers and non-governmental organisations.
- Providing hospital based services for the population of Counties Manukau and some access to specialist or highly complex services for people referred from other DHBs. Promoting, protecting and improving the health of the Counties Manukau population through the provision of health promotion, health education and evidence based public health initiatives.



The Institute for Healthcare Improvement (IHI) believes that everyone deserves safe and effective health care, and have been working with health care providers and leaders throughout the world to fulfill that promise.

An independent not-for profit-organisation based in Cambridge, Massachusetts in the United States, IHI focuses on motivating and building the will for change, identifying and testing new models of care in partnership with both patients and healthcare professionals; and ensuring the broadest possible adoption of best practices and effective innovations. In February 2011, IHI announced a new strategic partnership with the Counties Manukau District Health Board (CMDHB) in New Zealand to develop Ko Awatea. This involves helping the Centre develop the capability and improvement capacity to support health care organisations and individuals in the region deliver safer, more effective and more patient-centered care.

BetterValueHealthcare Ltd

The Centre works with departments, networks, organisations and healthcare economies as they develop and deliver transformed healthcare using a blend of traditional and contemporary delivery methods.

The Oxford Centre for Healthcare Transformation, its programmes and supporting resources are the brainchild of Sir Muir Gray and his organisation, **Better Value Healthcare**.

Formerly Director of the UK National Screening Committee, Sir Muir Gray helped pioneer Britain's breast and cervical cancer screening programmes. He was also Director of The National Library for Health, and was the Chief Knowledge Officer of the NHS.

The e-learning programmes and resources provided by the Oxford Centre help prepare people for the world of tomorrow by providing the knowledge and skills to create systems of care and shape the culture to support those systems.



NHS Wales provides services ranging from smoking cessation, antenatal screening, and routine treatments for coughs and colds to open heart surgery, accident and emergency treatment and end-of-life care.

NHS Wales is the publically funded National Health Service of Wales providing healthcare to some 3 million people who live in the country. The NHS has a key principle which is that good healthcare should be available to all, regardless of wealth.

THANKS TO OUR SPONSORS



The Lion Foundation has been a long term and generous supporter of many of the facilities and projects in Counties Manukau. With their support, we have made a positive impact on the lives of many Counties Manukau families.

"When The Lion Foundation agreed to become a principal sponsor of Ko Awatea we were delighted," says Pam Tregonning, Executive Director, South Auckland Health Foundation. "Not only did The Lion Foundation agree to fund the Chair of Emergency Medicine, but they have also equipped the Centre of Innovation and the Clinical Training and Education Centre. Both areas are critical to achieving the overall aims of Ko Awatea."

"The vision of the DHB is to provide world class health services to our community and beyond, and this is made so much more possible with the support we have received from The Lion Foundation."



The Stevenson family and Stevenson Foundation have both had a long standing relationship with Middlemore Hospital. Their ongoing support has allowed the hospital to develop several important clinical and academic roles over the years including the first full time professorial chair to be based at Middlemore, the Sir William Stevenson Chair of Orthopaedics. This was awarded to Harley Gray in 1976.

"We are thrilled that the Stevenson Foundation was also our first confirmed Chair sponsor of Ko Awatea," says Pam Tregonning. "Their generosity has enabled us to fund the Stevenson Chair of Applied Healthcare Research and Effective Practice, Professor Jonathan Gray."

An Innovation Centre

A DAY IN THE LIFE OF KO AWATEA

From 7am when the Wishbone Café opens, Ko Awatea comes alive to the hum of coffee machines as students, lecturers and staff grab their morning coffee.

Some students fly past, on their way to lectures, while conference delegates check their emails.

The atmosphere resembles a busy international airport, which is quite apt, as the work being done at Ko Awatea is world class here in New Zealand. Ko Awatea's true purpose is to bring people together to develop healthcare improvements and to dream together on how quality changes can be made to make things better.



Alex Smart, Centre & Event Manager, Ko Awatea



Getting together over a coffee are AUT Midwifery Students



Wishbone Café



Pictured walking along the first floor of Ko Awatea, where many classrooms and meeting spaces are, (from left) Hon. Dr Paul Hutchison, MP for Hunua, Geraint Martin, CEO CMDHB, Paul Cressey, Deputy Chair, CMDHB and Professor Jonathon Gray, Director, Ko Awatea.

1,000 conversations a day

By 9am the morning rush for coffees has slowed, as students and staff get on with their day. Visitors arrive for lectures and various meetings, where they scan the board for their room details. If they need to check in with their office remotely via their laptops or thin clients, they can grab the wireless access password from the electronic board near Wishbone. Ko Awatea at Counties Manukau District Health Board's Middlemore site is already having an impact. As we watch the day unfold on the events board, talk with the centre support team and look through the centre's profile we find the following interesting facts and observations:

- **The spaces** - Lecture sessions are held regularly in the centre's open plan teaching spaces, part of the new partnerships with Ko Awatea's educational partners Manukau Institute of Technology, Auckland University of Technology and the University of Auckland
- **The visitors** - Ko Awatea has hosted numerous local, national and international visitors
- **Our Students** - Up to 300 students a day come and go from the Centre
- **Our Strategic Partners** - IHI, Oxford, Public Health Wales
- **The facilities** - In the first five months alone, 65,000 people attended teaching, meetings, workshops
- **Great coffee** - Wishbone makes 1200 coffees a week
- **The Innovation Centre** - Counties Manukau DHB's Innovation Centre is already being used for research, visiting lectures and tutorials for DHB staff, and board meetings.

“KO AWATEA IS A FABULOUS NAME FOR A BRILLANT INSTITUTION - AN INSTITUTION THAT IS GOING TO PROVIDE OUR COMMUNITY WITH THE BEST HEALTH, KNOWLEDGE AND UNDERSTANDING AND TO ENSURE CUTTING EDGE, HIGH TECHNOLOGY HEALTH PROVISION TO OUR COMMUNITY

Auckland Mayor Len Brown



Innovation in Education & Teaching

CLINICAL TRAINING AND EDUCATION CENTRE (CTEC) OPENING DELIVERS LAPAROSCOPIC SIMULATION CAPABILITY

As a result of a generous donation from The Lion Foundation, medical consultant Dr Doug Barclay now has world class laparoscopic surgery simulators to train our surgeons on.

Obstetric and gynaecology consultant Doug Barclay demonstrated the simulator at the opening, showing how keen his students were to take part in training that was exciting, interesting and encourages best practice.

“A snip in the wrong place can lead to dangerous bleeding that takes longer to heal,” says Dr Barclay. “The skills learned on this machine are applicable to a whole range of surgeries, and I’m sure we’ll be training junior doctors from around the country eventually.”

Two laparoscopic simulators, the first of their kind in New Zealand, arrived mid November 2011 from the European manufacturer. The LapSim simulators are already enabling junior doctors to develop confidence in vital skills required to perform operations and procedures - all away from a theatre situation.

Doug says: “Learning in this simulated environment is fantastic, exciting and in 3D. Research shows that the simulated training translates into improved theatre skills. Spending seven hours on a simulator is equivalent to someone who has done 20 to 50 real-time laparoscopies. It halves the operating time.

“There is evidence that we can improve patient safety, decrease operating times and optimise theatre utilisation.” The Lion Foundation has generously sponsored the purchase of two simulators, along with a range of other

mannequins and equipment for the newly opened Clinical Education and Training Centre (CTEC). This will allow much more engaging, interactive learning, where immediate feedback is given. By learning on the simulator, the trainees can find organs and carry out simulated operations, like a tubal ligation or dealing with an ectopic pregnancy.

Use of the simulator was demonstrated by two junior doctors at the December opening and all agreed it was light years ahead of the current box trainer method (with its substantial risk of failure).

Doctor David Galler, Director of Clinical Leadership at Ko Awatea, says the purchase of this equipment fits with Ko Awatea's dedication to improving training. “There will be a change in our clinical education as we aim for clinical excellence in ICU and cardiac care,” says Dr Galler.

“The introduction of this equipment reflects our change in focus and new ways of thinking about how we train our junior doctors.”



Lion Foundation and South Auckland Health Foundation (SAHF) staff, among other special guests, discovered how medical registrars and staff will be able to utilise the new training equipment at the new CTEC training facility opening. Pictured (from left) Pam Tregonning (SAHF), Jonny Gritt and Mike Smith (Lion Foundation), John Maasland (SAHF).



THE INTRODUCTION OF THIS EQUIPMENT REFLECTS OUR CHANGE IN FOCUS AND NEW WAYS OF THINKING ABOUT HOW WE TRAIN OUR JUNIOR DOCTORS

Test Drive: Mike Smith, Chairman of the Lion Foundation, tries out a LapSim surgery simulator with registrar Yvonne Li (left) and senior medical officer for obstetrics and gynaecology Douglas Barclay, at Middlemore Hospital's newly opened CTEC training facility. To the left is another registrar with Jonny Gritt, Lion Foundation grants and marketing manager.

WHAT OUR PEOPLE THINK

WHAT DOES KO AWATEA MEAN FOR YOU?

As we go around talking to people, we have learned that Ko Awatea can offer different things.

For some it's a place where they can learn and train, for others it's a place to come together to share ideas and knowledge. For many it's a place to support ideas and innovation – a place that will provide the resources and leadership to help turn good ideas into a reality. It's a place that will help support the good work you are already doing and will provide you with the data/evidence that shows what you are doing is working and based on best practice. It's clear the glue that links all this together is that we are doing this for the good of the patient and for our local population. It's the reason we come to work each day and it's the reason why we want the best for the people of South Auckland.

It's not only the hospital we are talking about, Ko Awatea's aims are those of the DHB, to improve the population's health, to improve care and to maximise value (the "Triple Aim"). When we talk about 'value' we mean making the best use of our resources by ensuring the best quality care at a reasonable cost.

Here's what some of Our People are saying about Ko Awatea:



"KO AWATEA WILL BE AN EXCITING STEP FORWARD FOR JUNIOR DOCTORS WHO HAVE THEIR WHOLE FUTURE TO PLAN"

Brooke Vosper, House Officer, Emergency Care



"KO AWATEA WILL WORK WITH THE COMMUNITY TO HELP CREATE A BRIGHTER AND HEALTHIER FUTURE"

De La Salle College Students



"AS A JUNIOR DOCTOR INVOLVED IN RESEARCH, MY HOPE IS THAT KO AWATEA WILL BE A PLACE WHERE INTELLECTUAL AND RESEARCH IDEAS CAN BE DISCUSSED AND INNOVATIONS DEVELOPED AND SUPPORTED"

Joanna Fitch, Medical Education Fellow



"KO AWATEA WILL PROVIDE GUIDANCE AND SUPPORT FOR OUR NEW GRADUATE NURSES AND STUDENTS"

Swasthie Amichand, Associate Charge Nurse, Ward 33



"IT'S WONDERFUL TO HAVE A FACILITY THAT ENCOURAGES LEARNING AND DEVELOPMENT"

Santi Prasad, Cleaner



"WE HAVE OUR CLINICAL PLACEMENTS AT MIDDLEMORE, SO IT'S CONVENIENT TO POP DOWN TO KO AWATEA FOR OUR TEACHING SESSIONS AND LESSONS"

MIT Students



"KO AWATEA IS A GREAT PLACE FOR STUDENTS TO THINK CREATIVELY, MINGLE AND TAKE SOME TIME OUT"

University of Auckland Students



"HAVING KO AWATEA ON THE MIDDLEMORE SITE WILL MAKE IT EASIER FOR OUR STAFF AND STUDENTS TO LEARN AND TRAIN"

Kaumatua Whitiara and Hilda Thompson



"IT'S GREAT WORKING IN SUCH A VIBRANT AND INNOVATIVE CENTRE"

Wishbone staff



"KO AWATEA PRESENTS A PLATFORM FOR THE INTEGRATION OF BOTH PRIMARY AND SECONDARY HEALTHCARE PROVIDERS TO COME TOGETHER IN NEUTRAL TERRITORY AND INSTIL A HIGH LEVEL OF TRUST"

Mark Vela, Total Health Care



"BY LINKING INTO KO AWATEA'S SERVICES AND SUPPORT IT WILL ENABLE US TO PROVIDE HEALTHCARE SERVICES BASED ON LOCAL, NATIONAL AND INTERNATIONAL BEST PRACTICE"

Donna Neal, Clinical Nurse Manager, Paediatric Outpatients



"THE VIDEO CONFERENCING FACILITIES MEANS WE HAVE ACCESS TO LECTURES TAKING PLACE FROM THE AKORANGA CAMPUS"

AUT Students



"THIS NEW AND EXCITING INNOVATION CENTRE IS ABOUT PEOPLE AND SUPPORTING THEM TO STAY WELL IN THE COMMUNITY"

"THE CENTRE IS WONDERFUL, IT'S CHANGING OUR WORKFORCE CULTURE AND GETTING US ALL TO WORK COLLABORATIVELY TOGETHER TOWARD BEST PRACTICE AND FLEXIBILITY IN TRAINING AROUND MEETING THE NEEDS OF OUR PATIENTS"

Jagpal Benipal, Senior Quality Improvement Manager



Joe Glassie-Rasmussen outside Middlemore Hospital.
Photo and story courtesy of Manukau Courier

Watching his grandmother go through renal treatment for 15 years helped inspire one of the newest Manukau Institute of Technology nursing graduates.

Joe Glassie-Rasmussen of Mangere isn't ashamed to say he's a nursing graduate. For him it's the beginning of a career in medicine and part of a journey that started a long time ago. "My passion for my grandmother's health and making a difference for my family is why I did nursing. Because I wanted to know about my grandmother's health condition I took on the challenge of working in the health force and I chose to do nursing."

As a Ko Awatea Health Scholarship recipient Joe is also the face of a partnership between Counties Manukau District Health Board and the South Auckland Health Foundation. Each year they award several scholarships to Pacific and Maori students looking for careers in health.

The former Mangere College head boy brushes off any comment that nursing isn't a popular career choice but admits his friends and careers adviser took some convincing.

"I got a lot feedback from my friends saying 'What are you doing? Are you sure you want to do nursing?' 'I wanted to start off small first and look at nursing to get an overview to see what it would be like for me. Now I've done it all and I'm happy I've graduated.'"

And so is his grandmother Kurahenua, who raised him. Joe's been translating all the medical terms into Rarotongan for her. "I can understand what the doctors are saying and I can give her that feedback in our tongue."

Joe's public speaking skills are also in hot demand as Mangere College and MIT's nursing faculty all vie for his time to present to students.

"You've got to be really passionate about health because, yes, there's the money and the professionalism but if you're not passionate about your career choice then there's really no point. "Passion for your job and what you do in health is what drives me and gets me up in the morning when I'm thinking about studying."

Joe's mindful of the people who have helped him secure a bright future and credits the support of his grandmother, his former deputy principal Mohan Patel, MIT lecturers and his fellow graduates.

This year Joe starts work at Middlemore Hospital as a nursing entrant. In the future he wants to specialise in renal care so he can help others like his grandmother. "I'd like to see a change in the health statistics for Pacific Islanders and Maori and hopefully I can offer a bit of that in my career."

eCAMPUS HITS NEW RECORDS

Ko Awatea, known as a national leader in the DHB e-Learning field, is developing a different way of learning, one where quality improvement is part of the methodology.



Jagpal Benipal, Acting Manager CTEC & Quality Improvement Manager, works closely with Jason Ranston, E Learning Project Manager, and David Grayson, Clinical Lead for Health System Improvement. He says training in now being built around critical and essential knowledge needed by the workforce, such as where practitioners can make a big difference to patient outcomes i.e. reducing adverse harm incidents. Instead of sitting in lecture halls, students are getting hands on simulation and patient safety training. They are working with their lecturers and experienced clinical staff as peers, discussing new ideas on quality improvements.

"Ko Awatea's eCampus started with 600 students in February, but now it's grown to 3400," says Jagpal Benipal. "More than 22,000 have completed safety training online. We expect to see growth as e-learning becomes multidisciplinary and is embraced by our doctors, nurses, non clinical staff and Allied Health counterparts. There's a new focus on everyone collaborating to ensure continuous quality improvement monitoring in the way we work, ensuring clinicians pick up the message that there's always room for improvement."

Ko Awatea's growing reputation for top quality e-learning options was recognised when Ko Awatea's eCampus hit a new high – It registered its 3000th user, pushing CMDHB into new territory for District Health Boards nationally.

"It shows just how much CMDHB staff value their ongoing education and a great example of this is the Patient Safety Training course, which has had over 1800 people complete its eModule series; another national record," says Jagpal.

Jason Ranston, CMDHB's e-Learning Specialist said that, "The efforts of our staff have been truly amazing, and even though we've had some hiccups along the way, the uptake and staff response have been incredibly encouraging. We are getting an average of 120 people in the site each day".

With the release of its latest course, Tackling Obesity, and the soon to launch Relapse Prevention Planning course, eCampus is sure to maintain this momentum.

THE VALUE OF WORKING IN PARTNERSHIP

Beverley McClelland, Nurse Leader with the Nursing Professional Development Unit, says the provision of new Institute of Healthcare Improvement (IHI) courses at Ko Awatea ushers in a new era of innovation in Nurse Education in Practice.

In keeping with the theme of Ko Awatea, IHI is partnering with the Centre to be a light that will illuminate knowledge, enabling health system change, locally, regionally, nationally and internationally.

The first of the IHI Breakthrough Series (BTS) College courses was held at the Centre from October 17-19, with 54 attendees. Of those 29 were external to CMDHB and Ko Awatea. The course encouraged use of a collaborative improvement model to accelerate improvement worldwide.

Participants aim to develop collaborative processes in their organisation across various improvement projects, acting as project manager and improvement advisor, identify topics that require work, then form teams that want to roll out the model for improvement.

"Participants are taught how to design and run learning sessions, how to support teams during action research periods, and the science of improvement. As these skills develop, those trained in the methodology will be able to engage and teach others about ongoing quality improvement."

Some of the initial participants from the first Breakthrough Series are now taking part in a follow up programme,

where they share with others through conference calls, take part in an email listserv and access information to the College website.

Some of those trained include the leadership team of Ko Awatea, and with some extra USbased training finished this month, they will go on to lead others through the process in the coming year.

Two other IHI professional development programmes now available were also held at Ko Awatea for the first time in the past few months. From October 12-14, a six month Improvement Science (ISIA) programme was held, with 52 attendees. This was designed for those actively involved in health care improvement projects.

The third IHI programme held at Ko Awatea in July 2011 was the Executive Quality Academy (EQA), aimed at developing leadership for whole system improvement.

Beverley adds: "The two-day course attracted 50 attendees. It is an intensive learning and action planning session for up to five senior executive team members, board chair, the chair of the board's quality committee and their CEO.

"All in all, with these being offered again next year, CMDHB and Ko Awatea are at a very good stage of our clinical education and quality improvement planning. We have been highly successful in applying a new application based coaching process, in November we ran a simulation based training day that went well and boosted the learning of nursing graduates, and all our NEPT trainees completed their university papers.

Our Visitors

DURING 2011 KO AWATEA HOSTED MANY INTERNATIONAL VISITORS

Professor Lord Darzi

Advisor to British Government

Sir Muir Gray

Oxford Centre for Healthcare Transformation

Maureen Bisognano

Chief Executive of the Institute for Healthcare Improvement, Boston

Beverley Johnson (PFCC)

President of the US Institute for Patient and Family-Centred Care

Professor Paul Harper

Professor of Operational Research (OR) in the School of Mathematics, Cardiff University

Morven Gemmell

Executive Director Allied Health Queensland

Michael Bishop

Director Allied Health Northern Area Health Service Tasmania



Professor Lord Darzi



Sir Muir Gray



Maureen Bisognano



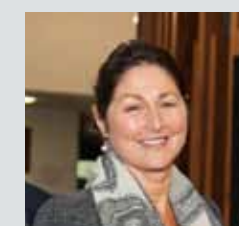
Beverley Johnson



Professor Paul Harper



Robert Lloyd



Morven Gemmell



Michael Bishop

NATIONAL COLLABORATIVE SIGNALS NEW ERA IN ICU CARE



Counties Manukau DHB and Ko Awatea are delighted to be working with the Health Quality & Safety Commission (HQSC) and District Health Boards around NZ to reduce the incidence of Central Line Associated Bacteraemia (CLAB). Phase One of the collaborative will focus on reducing CLAB rates to zero in Intensive Care Units around the country.

Each year 19,000 patients get admitted to ICU's in New Zealand. Approximately 50% of these patients have a Central Line in situ.

The mortality rate from CLAB has been estimated to be between 10% and 50% and hospital acquired bloodstream infections prolong hospitalisation by an average of seven days. CLAB infections are also a significant cost to the healthcare system with the cost of each CLAB estimated to be between \$NZ 20,000 and \$54,000.

CLAB impacts ICUs all over NZ and indeed around the world. With this in mind the aim of the CLAB collaborative, sponsored by the HQSC will provide ICUs in NZ with the quality improvement methodology and tools they need to reduce the rate of CLAB in their units towards zero (<1 per 1000 line days) by 2013. The end result will be safer patient care, shorter stays in ICU, and reduced cost – which can be spent on healthcare improvements.

The collaborative will also provide an opportunity for health professionals around New Zealand to access and contribute to a national database for the collection, analysis and sharing of information.

"We have been really lucky to have much of the ground work done for us," says Shawn Sturland, ICU Clinical Leader at Capital Coast DHB and spokesperson for the

CLAB Collaborative. "For example there is a lot of evidence (local and international) that tells us what the problems are and where the gaps in practice may be. We also have a tried and proven methodology of reducing CLAB locally, thanks to the successful implementation of the Central Line Bundle at Middlemore. The great thing about this programme is that it can be adapted to any ICU in New Zealand."

The Institute for Healthcare Improvement (IHI) in Boston have also shared their expertise and support, and have been coaching and training healthcare professionals from all over New Zealand in the world renowned IHI improvement methodology.

The CLAB collaborative was launched at a two day learning session from 28 - 29 November. This brought representatives from the participating ICUs together to work on the collaborative methodology, improvement science and measurement.

ICU staff are very committed to their job and passionate about making a difference," says Campaign Manager, Suzanne Proudfoot. "This was demonstrated by the high level of attendance at the launch."

For more information on the CLAB Zero project, refer to www.koawatea.co.nz



Pictured are DHB staff from around the country attending the inaugural CLAB Zero collaborative session.

**THE END RESULT WILL
BE SAFER PATIENT CARE,
SHORTER STAYS IN ICU,
AND REDUCED COST**



SAVING 20,000 DAYS CAMPAIGN

An innovative Community Collaborative campaign is underway at Counties Manukau DHB, driven by a goal of saving 20,000 days by 9am on July 1, 2013.

It's about giving back to the community 20,000 days that would otherwise be spent in hospital.

Diana Dowdle, CMDHB 20,000 Days Campaign Manager, says the goal is to keep people well in the community, by strengthening awareness of primary care services and resources and their ability to cope with urgent and non-urgent cases, keeping our hospitals for people who need to be there.

"Counties Manukau DHB has identified the need to anticipate and prevent acute health problems. Once a problem is identified – like recognising that someone has presented to the emergency department more than five times in one year - we empower our staff and partners to respond promptly in the community setting when these acute problems occur. This might mean working out a care plan with the patient's GP, so a care plan is activated. This is all part of our ongoing work to reduce admissions to hospital, providing care which is timely and safe to any people admitted."

She says identifying the risk factors and dealing with them is part of five streams of work being run by the campaign. Little things can be done to reduce the demand on hospital beds. This can be as simple as confirming patients know when they're scheduled for appointments to avoid rebooking, referring to after hours care, and booking in patients for GP appointments in the mornings. Other factors include ensuring patients know where and how to access affordable after hours care centres or giving patients information on Healthline. All these measures will help reduce unnecessary days patients spend in hospital, maximising their ability to lead productive, healthy lives in our community.

A recent CMDHB board paper on the campaign, penned by Dr Gary Jackson and the CMDHB Public Health Team, identified that we cannot continue to rely on hospital-based healthcare to the extent we do.

"This is all part of CMDHB's commitment to a Ministry of Health care initiative Better, Sooner, More Convenient, which advocates a partnership approach between primary and secondary care.

"We have a term at CMDHB called 'Dot Days', which is when we get an email from Dot McKeen, Manager Middlemore Central, saying that Middlemore Hospital is more than 85 per cent full, implying that our acute, medical and surgical services are at a critical level.

During 2009/10 there were five "Dot" days in which the Middlemore Hospital was full, Diana says. This compares with 2010/11, when there were 18 days in which Middlemore Hospital was full. To date in the 2011/12 fiscal year, since 1 July 2010, we have had nine days in which Middlemore Hospital was full.

"Given a projected 5.5% increase in bed days annually, we need to build on our aim to mitigate the immediate need to address capacity, as well as the longer term requirement.

To accommodate demand for beds at Middlemore, the immediate targets to be adopted by June 2013 are:

- To give back to our community 20,000 healthy and well days, by reducing hospital bed days by 20,000
- To reduce 5,000 unnecessary hospital admissions
- Reduce requirements for beds by 66 beds

"The conversations have already begun," says Diana as healthcare professionals and community stakeholders from across the sector came together in November 2011 to share their views on five key drivers of system change: Keeping well in the community, rapid primary response to acute events, a coordinated, rapid emergency care response, and safe, timely care for those who need hospital care and living well in the community."

There were some great conversations, debates and ideas shared and we will continue this dialogue and actively stimulate discussion and solutions.

Various initiatives include working with every GP practice on the campaign, through the Greater Auckland Integrated Health Networks, implementing ideas from clinical leads across the work streams and continuing evidence prioritisation sessions to determine what interventions to trial or expand.

"We can make a difference to the hospital's bottom line by keeping our hospital beds for those who need them most," says Diana Dowdle. "We are looking forward to forming closer bonds between primary and secondary care, as our clinical leads work more closely with GP practices and community throughout the Campaign."



**"WE CAN MAKE
A DIFFERENCE TO
THE HOSPITAL'S
BOTTOM LINE"**

Innovation in Technology

Ko Awatea's focus on workforce education innovation - and the involvement of a number of partner stakeholders across education, clinical and IT domains - provided an opportunity for healthAlliance to come up with innovative solutions to meet the diverse needs of these stakeholders.

healthAlliance provides support services to several District Health Boards in the Northland and Auckland region, across a range of services including payroll, supply, procurement, finance, IT, processes and quality improvements. In the IT environment, Jason Perry, from healthAlliance, says the three key platforms of Collaboration, Innovation and Sharing set the scene for new information platforms.



Through the joint venture business we were able to provide innovative technology solutions which supported the business goals, many of which are possibly the first implementations in New Zealand of this type. These include:

- Public/private Wi-Fi access to support students and visitors as well as provide protected network access for hospital staff;
- Internet-style workstations, providing access to Windows 7 and MS Office 2010 to support business and student requirements. Incorporated in this is a relatively new technology called Virtual Desktop Infrastructure that provides virtual desktops on thin-client devices. This provides a very easy to support environment.
- Focus on using the internet as the main way to access services for students and visitors. A dedicated internet link was provided to allow students, partners and visitors to access their own systems over the internet.

Over the first 100 days the Ko Awatea centre has proved to be very successful. The ability for users to access their information from anywhere has meant the flow of ideas and sharing of knowledge has been the focus, rather than issues around accessing systems across different organisations. As the environment and business is unique, there has had to be a focus on how healthAlliance best supports this environment and leverages the potential of the new technology platform and design.

The ability to achieve the IT vision for Ko Awatea has been based on maintaining a focus on the facility's goals and engaging with a range of technology partners to deliver the best possible solution.

Jason says that in recent years he has focussed on the role of innovation on business transformation and has actively looked for opportunities to be involved in projects that involve innovation as a key capability. This project ticked all the boxes, as it gave him an opportunity to innovate, to pilot new technologies and not be constrained by the usual security risks associated with protecting information in a hospital environment.

"We were able to ensure technology was simple to access - we even share the daily password on the noticeboard and with café staff, so all can access wireless internet with ease. Students, hospital staff and visitors alike can access their own applications, online email, YouTube, Facebook, remote intranet log-in. People can choose to engage via their smartphone, their laptop or one of the many thin client computers waiting to be used around the central café area. This access availability creates a virtual learning environment.

"Working with this technology has changed the environment. Visitors have access to an IT concierge Rory, whose office is just a short walk from the café and computers. The latest platforms were used, Windows 7, Microsoft Office - allowing reports to be written and assignments to be completed."

Other aspects of the Centre's IT design and fit-out include:

- Wireless access
- 60 computer terminals
- Access to CMDHB network from teaching spaces
- healthAlliance innovation team
- Redevelopment of Building 30 | Administration
- New Modular Building (54) - Teaching and learning spaces
 - Includes new lecture theatre (max 230)
 - Seminar rooms | Large (2), Medium (9), Small (6)
 - Open study area with Wi-Fi hotspot | 29 workstations
 - New library | 28 workstations
 - Computer Lab | 20 workstations per Lab (2)
- WebX
- Conferencing - telephone and video
- MIT Pilot - Using PDAs - iPads for teaching

Jason Perry from healthAlliance, who has over 15 years' experience as an IT professional, has a strong background within local government, health sector and banking industries. Ko Awatea is a career highlight for him in terms of innovation.

“OUR FOCUS IS ON
WORKFORCE EDUCATION
INNOVATION”

EXECUTIVE OVERVIEW GERAINT A MARTIN, CEO, CMDHB



KO AWATEA WAS ORIGINALLY AN IDEA
FLOATED BY GERAINT MARTIN, CEO OF
COUNTIES MANUKAU DISTRICT HEALTH
BOARD

“WE ARE ALREADY SEEING
A CENTRE WHERE WORLD
CLASS HEALTHCARE STUDY,
RESEARCH AND LEARNING
IS BEING PRESENTED”

In partnership with the US-based Institute for Healthcare Improvement (IHI), one of the foremost research institutions in the world for performance-based healthcare innovation, we will soon be able achieve our workforce capability objectives. We will be able to tap into the best of thinking and new evidence in developing answers to challenges.

"Through the use of webinar technology, we are able to think through approaches and possible solutions. We can ask ourselves which bit of new research should we take and apply, and which should we discard. We can ask our colleagues locally, nationally and globally what their views are, compare notes, cement our thinking, then improve on our original concept.

"Collaboration through Web X technology is not just about projects, it's about building our workforce capabilities. It's about laying a solid foundation, so that those asking the questions feel supported as they experience the challenge, sense it, own it and decide how they can play it."



“KO AWATEA
WILL BE A LEAD,
NOT JUST FOR
NEW ZEALAND,
BUT THE WORLD”

Lord Darzi, Advisor to British Government

OUR PLACE OF
INNOVATION

www.koawatea.co.nz

MIDDLEMORE HOSPITAL

AUCKLAND

NEW ZEALAND

Ko Awatea. The first 100 days



THANKS TO OUR
PARTNERS AND SPONSORS



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