



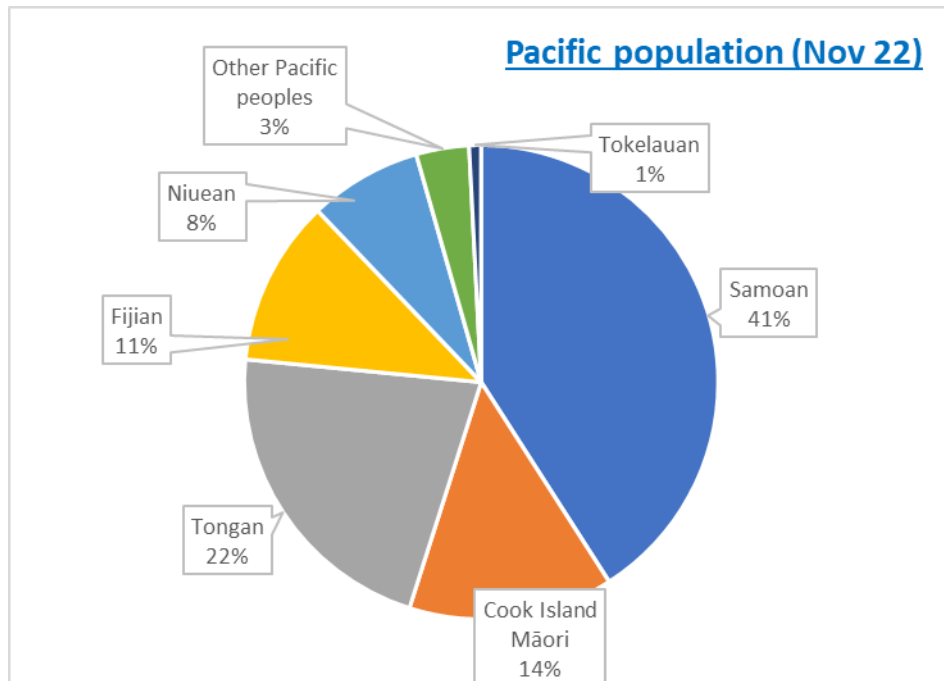
Primary Care Data Analysis & Pacific Health

Pacific Data Sovereignty conference
10 Nov 2022



❖ ProCare - Primary Health Organisation (PHO)

- Primary role & responsibilities
- 1 of 7 PHOs in Auckland
- 170 GP practices (family doctors – privately owned)
- 831,000 enrolled patients (Auckland mainly)
- 101,000 Pacific



48%

of Auckland DHB's population

22%

of population is Māori or Pacific

30%

of population considered high needs

He ika kai ake i raro, he rāpaki ake i raro
– committing to a journey begins with the first steps.

Our Purpose

Supporting and uplifting the health and wellbeing of the people of Aotearoa New Zealand.

Our Mission

Together we are reimagining healthcare to deliver the most progressive, pro-active and equitable health and wellbeing services in Aotearoa New Zealand.

Our Vision

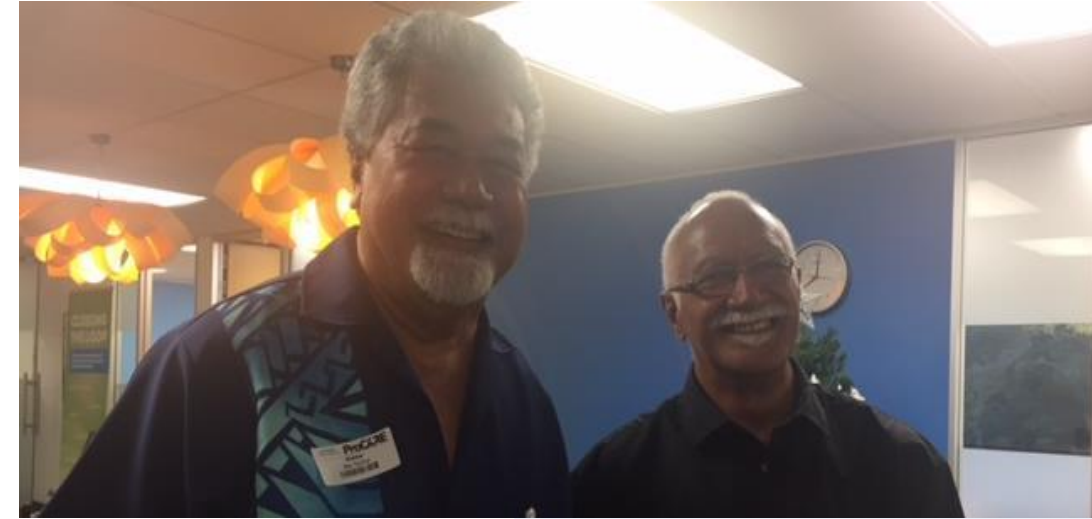
An Aotearoa where all people, across all life stages are enabled to meet their full potential.

Values and behaviour

- ❖ Integrity guides us.
- ❖ We walk alongside people.
- ❖ All people are taonga.
- ❖ We courageously embrace meaningful change.
- ❖ We collaborate for collective impact.

Population Health analysis 2018

- **Community led**
- **Consultation / Workshops / focus groups**
- **Themes**
- **Voted on priorities**
- **Alignment with Te Tiriti**
- **Equity gaps was the focus**



ProCare Population Health Strategy: health goals

2021 Iteration

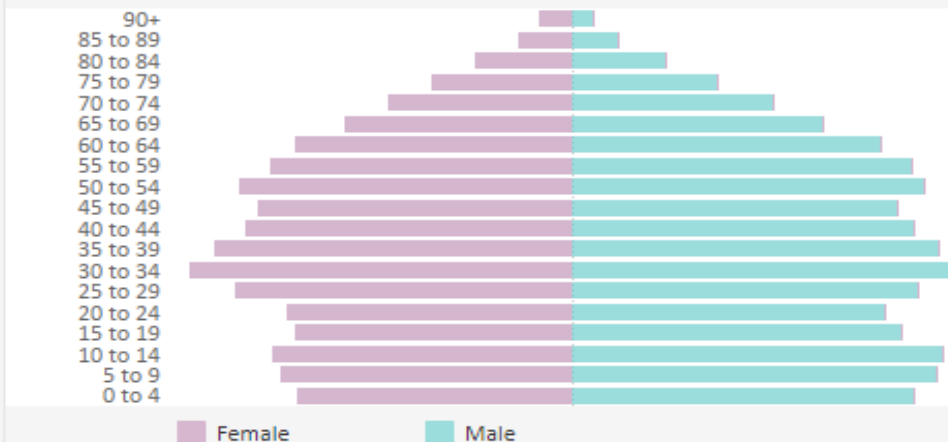
- Select data by month
- Refreshes overnight (CIS)
- Links to Tracking run charts & patient NHI lists

| Demographics/ Visits/Healthy Start | Youth | Wellbeing | LTC | Older People | Whānau |
|---------------------------------------|-------------------|--------------------|------------------------------------|---------------------|---------------------------|
| Demographics | Youth Visits | Smoking & Alcohol | CVD/Diabetes | Multimorbidity | Whanau Unmet Needs Report |
| Practice FTE/Visits | Smoking & Alcohol | HIP/BMI | Multimorbidity | Falls, Flu & Zoster | |
| Healthy Start | Others | Cervical Screening | Smoking Cessation | Polypharmacy | |
| | | | Gout & Asthma | | |
| | | | COPD & CHF Vaccinations | | |
| | | | Read Coding vs Expected Prevalence | | |

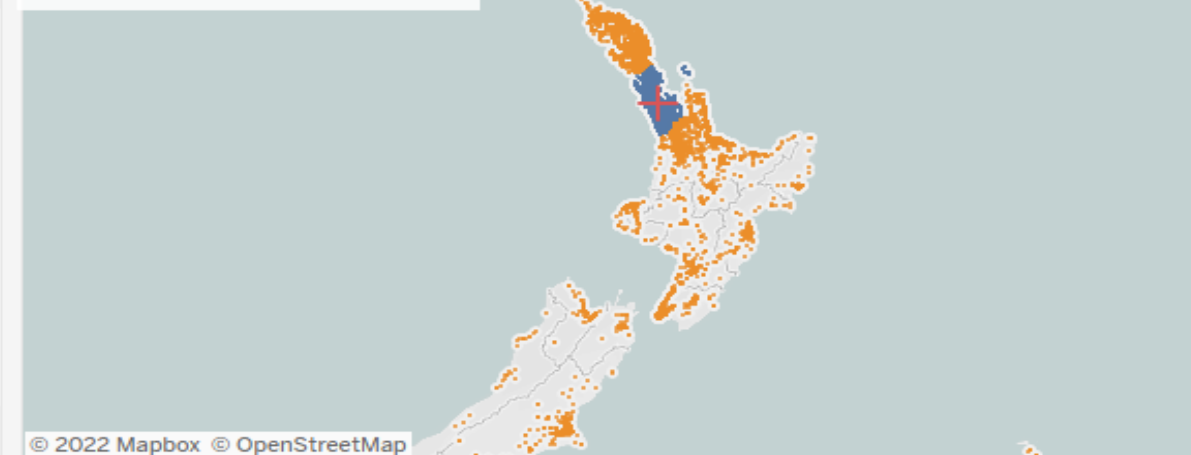


| Total Enrolled Patients | Gender | | | Enrolled Patients | | High Needs Patients | % High Needs Patients |
|-------------------------|---------|---------|---------|-------------------|-----------------|---------------------|-----------------------|
| 831,695 | Female | Male | Unknown | In Auckland | Out of Auckland | 245,614 | 30% |
| | 431,055 | 400,238 | 402 | 793,059 | 38,636 | | |

What is the age and gender breakdown



Where do our patients live?



What is the breakdown of patients by High Needs

| | | | | |
|--|----------------|----------------------------------|-----------------------|---------------|
| (Click header below to show only this group) | | Māori | Māori | |
| Māori | 82,284 10% | Pacific | Samoan | 41,568 (5%) |
| | | | Cook Island Māori | 14,198 (2%) |
| | | | Tongan | 21,977 (3%) |
| | | | Fijian | 11,511 (1%) |
| | | | Niuean | 7,822 (1%) |
| | | | Other Pacific peoples | 3,661 (0%) |
| | | | Tokelauan | 835 (0%) |
| | | Q5 Other (excl. Māori & Pacific) | Indian | 13,377 (2%) |
| Pacific | 101,572 12% | | Southeast/other Asian | 10,028 (1%) |
| | | | Latin American | 631 (0%) |
| | | | Chinese | 4,123 (0%) |
| | | | African | 1,269 (0%) |
| | | | Middle Eastern | 1,673 (0%) |
| | | | Other South Asian | 636 (0%) |
| | | | European / not stated | 30,021 (4%) |
| | | Non-high needs | Indian | 48,902 (6%) |
| Q5 Other (excl. Māori & Pacific) | 61,758 7% | | Southeast/other Asian | 49,130 (6%) |
| | | | Latin American | 5,944 (1%) |
| | | | Chinese | 69,806 (8%) |
| | | | African | 3,902 (0%) |
| | | | Middle Eastern | 6,946 (1%) |
| | | | Other South Asian | 2,596 (0%) |
| | | | European / not stated | 398,855 (48%) |
| | | Non-high needs | | |
| Non-high needs | 586,081 70% | | | |
| | | | | |

Deprivation (Q5) by Ethnicity

| | |
|---------------------------|-----------------------|
| Māori | 34% (28,087/82,284) |
| Pacific | 49% (49,267/101,572) |
| Indian / South Asian | 21% (14,013/65,511) |
| Chinese / Southeast Asian | 11% (14,151/133,087) |
| European / other | 7% (33,594/449,241) |
| Grand Total | 17% (139,112/831,695) |

Population Health Strategy: 5 health goals (2022-2023)

| Healthy start to life (0-4 years) | Increased engagement with primary care (15-24 years) | Engaged and enabled to improve wellbeing | Improved quality of life for people living with LTCs | Improved quality of life for older people |
|--|--|---|---|---|
| <ul style="list-style-type: none">• Reduce ASH rates and ASH inequities• 80% pregnant women (M/P/Q5) health and social needs assessment and care plans for unmet current & postpartum needs | <ul style="list-style-type: none">• Increased/equitable utilisation• 50% practices implemented youth friendly changes• Reduced teen pregnancies & STIs• Improvement in youth experience of care | <ul style="list-style-type: none">• Equitable access to preventive care & wellbeing support (smoking/alcohol/mental health)• Improvement in patient experience of care• Reduced suicide rates & inequities | <ul style="list-style-type: none">• Reduce ASH rates CVD, heart failure and diabetes and ASH inequities• Improvement of care processes for CVD, diabetes, heart failure, COPD and gout and a reduction in inequities | <ul style="list-style-type: none">• Reduce ASH rates and ASH inequities• 80% M/P aged 65+ & Others 75+ holistic assessment• Equitable optimisation of medical mgmt• Improved coordination of care via shared care plans and care co-ordinators |

Top priority health areas for Pacific



Healthy start to life
0 - 4 years



Increased engagement
15 - 24 years



Engaged and enabled
Wellbeing



Improved Quality of life
Long Term Conditions



Improved Quality of life
for older people

- Respiratory hospitalisations
- SUDI
- Registration with LMC in the first trimester
- Gestational Diabetes
- 5-14 years – oral health/dental conditions

- Youth suicide / Mental health
- Cellulitis/other skin infections
- MMR / Vaccinations

- Covid-19 related issues
- Obesity
- Smoking
- Mental health –depression
- Cancer prevention – HPV vaccination
- Cancer screening

- Asthma/chronic respiratory disease
- Lung conditions /cancer & Breast Cancer
- Arthritis / Gout
- Cardiovascular disease including Heart Failure
- Diabetes and Kidney disease
- Multimorbidity (have 2 or more long term conditions)

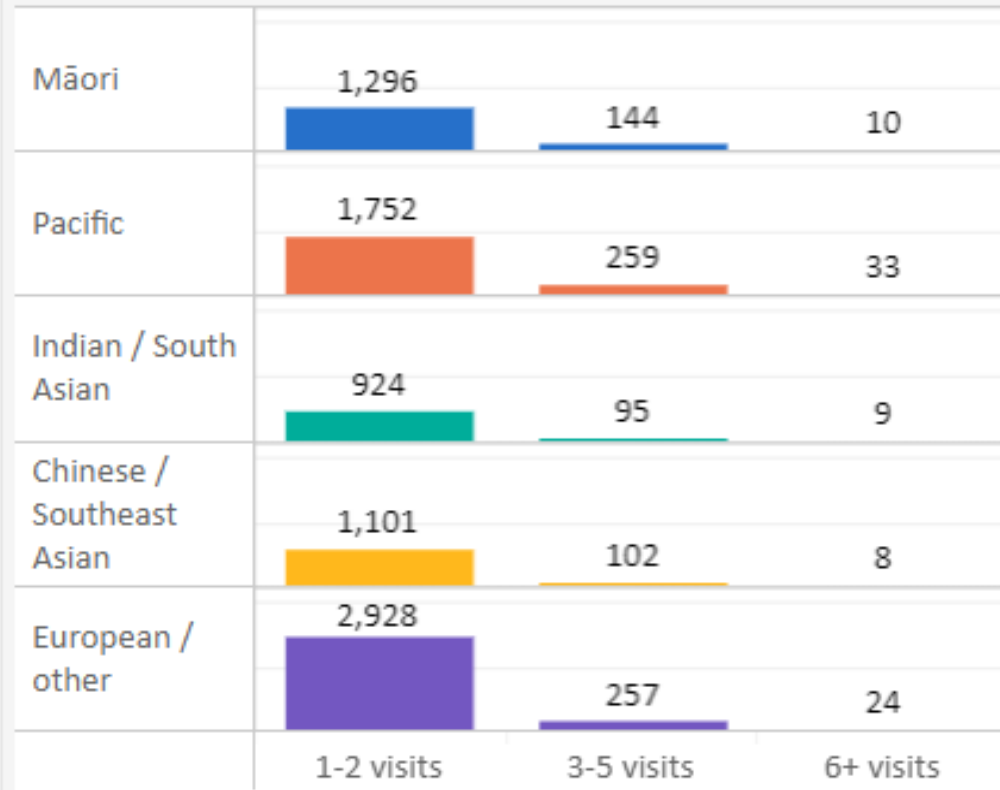


Healthy start to life 0 - 4 years – Pacific data insight

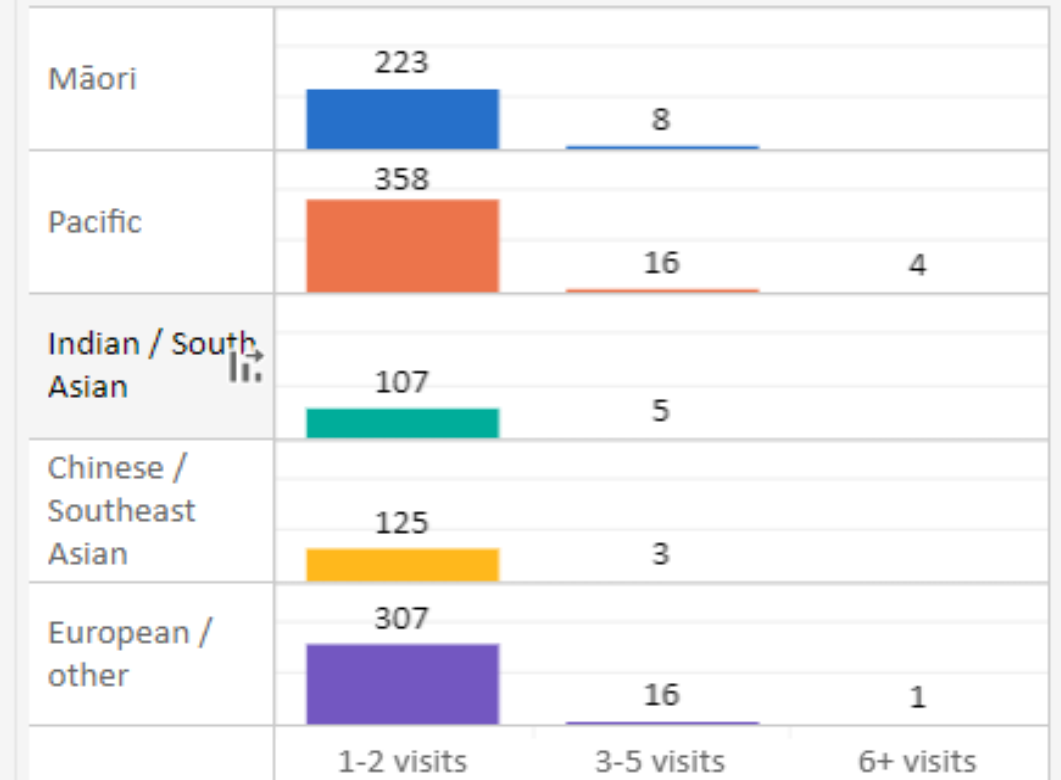
Tamaiki, mokopuna, and fanau have the right to thrive!



Emergency Department visits in last year



Acute respiratory hospitalisation in last year





Engaged and enabled Wellbeing - data

Our kainga are engaged and empowered to be leaders in their mo'ui lelei

Diabetes Clinical Indicators (aged 15-74)

| | BP Control | Micro & Macroalbumuria | HbA1c Glycaemic Control |
|---------------------------|------------|------------------------|-------------------------|
| Māori | 54% | 75% | 53% |
| Pacific | 57% | 76% | 51% |
| Chinese / Southeast Asian | 60% | 78% | 72% |
| Indian / South Asian | 62% | 78% | 67% |
| European / other | 56% | 80% | 65% |
| Grand Total | 58% | 77% | 61% |

Diabetes - Macroalbuminuria treated with ACE or ARB (aged 15-74)

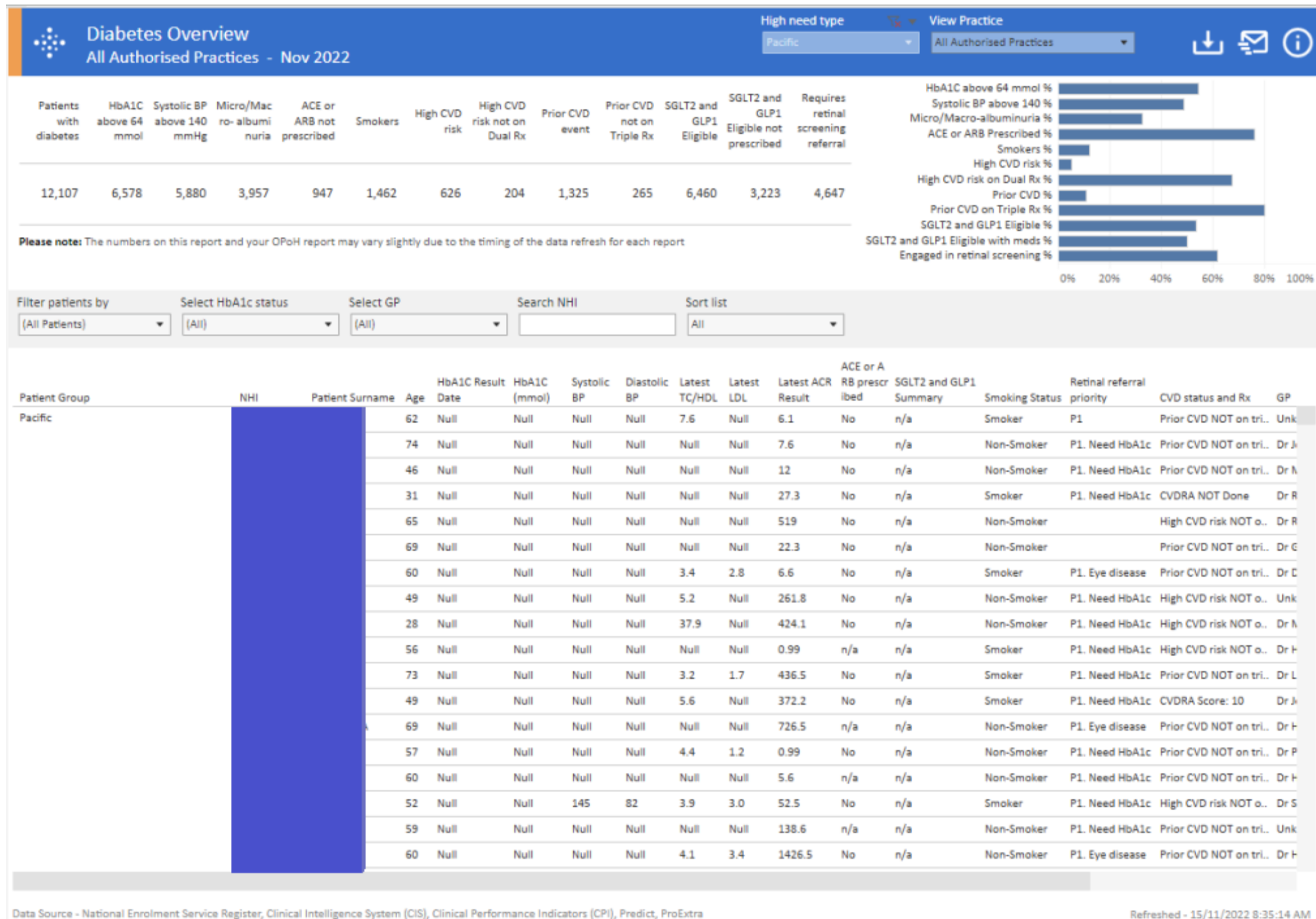
| | |
|---------------------------|-------------------|
| Māori | 79% (706/891) |
| Pacific | 79% (1,995/2,524) |
| Chinese / Southeast Asian | 80% (456/567) |
| Indian / South Asian | 82% (441/537) |
| European / other | 81% (767/950) |
| Grand Total | 80% (4,365/5,469) |

Data Source - Clinical Intelligence System. If no data showing, this is because we're unable to extract data from PMS.

GP practices can access their own report

Sort data in ethnicity
Diabetes measures e.g. HbA1c, BP, appropriate treatment etc

Develop a plan to close the gaps and improve health outcomes



| | | |
|--|---|---|
| Polypharmacy (5+ meds) 16,224 (28%) | Flu Vaccination Completed 35,114 | Flu Vacc % Completed 31% |
|--|---|---|

Polypharmacy by Ethnicity
(includes Maori, Pacific 65+ & other 75+)

| Ethnicity | 0 | 1-4 | 5-6 | 7-9 | 10+ |
|-----------------|--------------|--------------|-------------|-------------|------------|
| Euro/Other | 8,457 (22%) | 19,215 (51%) | 6,093 (16%) | 3,342 (9%) | 750 (2%) |
| Pacific | 2,344 (27%) | 3,443 (40%) | 1,500 (17%) | 1,066 (12%) | 272 (3%) |
| Māori | 1,229 (25%) | 2,034 (42%) | 818 (17%) | 568 (12%) | 185 (4%) |
| Indian/South .. | 345 (21%) | 584 (35%) | 349 (21%) | 295 (18%) | 100 (6%) |
| Chinese / SE .. | 1,517 (34%) | 2,023 (46%) | 546 (12%) | 286 (6%) | 52 (1%) |
| Grand Total | 13,892 (24%) | 27,299 (48%) | 9,306 (16%) | 5,557 (10%) | 1,359 (2%) |

Medication reviews by Ethnicity
(includes Maori, Pacific 65+ & other 75+ who are on 5+ long term meds)

| | |
|--------------------|---------------|
| Māori | 0% (0/1,571) |
| Pacific | 0% (0/2,838) |
| Indian/South Asian | 0% (0/744) |
| Chinese / SE Asian | 0% (0/884) |
| Euro/Other | 0% (1/10,185) |
| Grand Total | 0% (1/16,222) |

Falls assessment by Ethnicity
(includes Maori, Pacific 65+ & other 75+)

| | |
|--------------------|-------------------|
| Māori | 8% (398/4,834) |
| Pacific | 7% (566/8,625) |
| Indian/South Asian | 6% (99/1,673) |
| Chinese / SE Asian | 6% (263/4,424) |
| Euro/Other | 5% (2,005/37,856) |
| Grand Total | 6% (3,331/57,412) |

Flu vaccination by Ethnicity 2022 Season

| | |
|--------------------|----------------------|
| Māori | 29% (1,396/4,843) |
| Pacific | 28% (2,440/8,643) |
| Indian/South Asian | 29% (1,397/4,862) |
| Chinese / SE Asian | 25% (3,350/13,633) |
| Euro/Other | 32% (26,531/82,554) |
| Grand Total | 31% (35,114/114,535) |

Herpes zoster vaccination by ethnicity

| | |
|--------------------|---------------------|
| Māori | 47% (2,349/4,243) |
| Pacific | 45% (3,721/7,410) |
| Indian/South Asian | 53% (2,572/4,160) |
| Chinese / SE Asian | 50% (6,796/11,497) |
| Euro/Other | 53% (42,590/63,451) |
| Grand Total | 52% (58,028/90,761) |

Data source: National Enrolment Service Register, Clinical Intelligence System.

Note: The denominator for target older population may vary from the Older People 1/2 dashboard due to differences in ethnicity coding with NES

Polypharmacy includes: agents acting on the renin-angiotensin system, therapeutic products, analgesics, anesthetics, antianemic preparations, antiepileptics, antihypertensives, antiinflammatory & antirheumatic products, antimycobacterials, antineoplastic agents, anti-parkinson drugs, antithrombotic agents, antivirals for systemic use, beta blocking agents, bile and liver therapy, blood substitutes and perfusion solutions, calcium channel blockers, calcium homeostasis, cardiac therapy, corticosteroids for systemic use, digestives incl. enzymes, diuretics, drugs for acid related disorders, drugs for obstructive airway diseases, drugs for treatment of bone diseases, drugs used in diabetes, immunostimulants, immunosuppressive agents, lipid modifying agents, mineral supplements, other alimentary tract and metabolism products, pancreatic hormones, peripheral vasodilators, pituitary, hypothalamic hormones and analogues, psychoanalitics, psycholeptics, sex hormones and modulators of the genital system, thyroid therapy

As of Apr 22



Data informs health improvement



Better Together Collaboratives 2021

80

Family doctors (7 topics) participated in 2021

133

practice staff attended one or more sessions



Microalbuminuria Management Collaborative

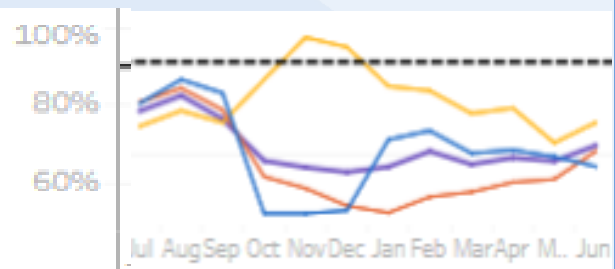
Problem definition: Microalbuminuria is most often an early sign of kidney damage from diabetes and if left untreated can progress to end stage kidney failure.

1 Present situation

Quantitative Feb 2021

Total (purple) = 77%
Maori (blue)= 76%
Pacific (orange)= 79%
Q5 (other) = 75%

Management of Microalbuminuria
(Diabetic patients aged 15-74 who have microalbuminuria in the last 18 months and are on an ACEi or ARB)



The changes

What are the changes that we tried?

- Printed off NHI list monthly
- Nurse phone patient weekly
- Standardise process
- Health navigator information
- Change enrolment forms
- Develop infographic
- Consumer-assisted translation

3



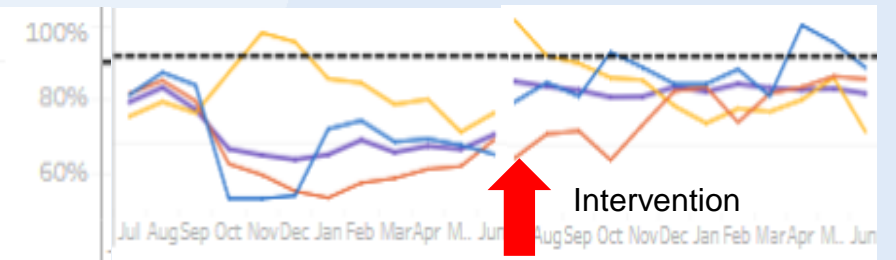
2 The aim

By July 2021

Total (purple) = 87%
Maori (blue)= 89%
Pacific (orange)= 88%
Q5 (other) = 87%

4

Outcome

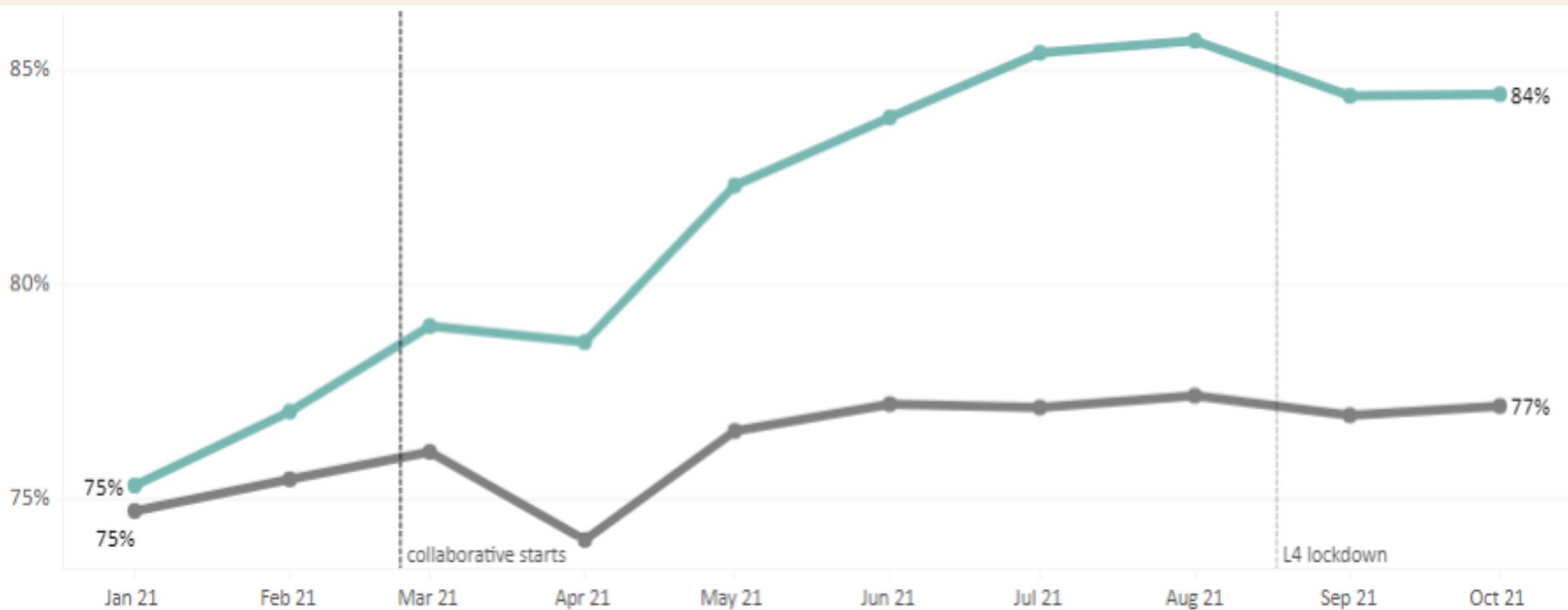


Collaborative 2021- Treatment for people with diabetes and microalbuminuria

Pacific



% people completed microalbuminuria - Select ethnicity - Pacific





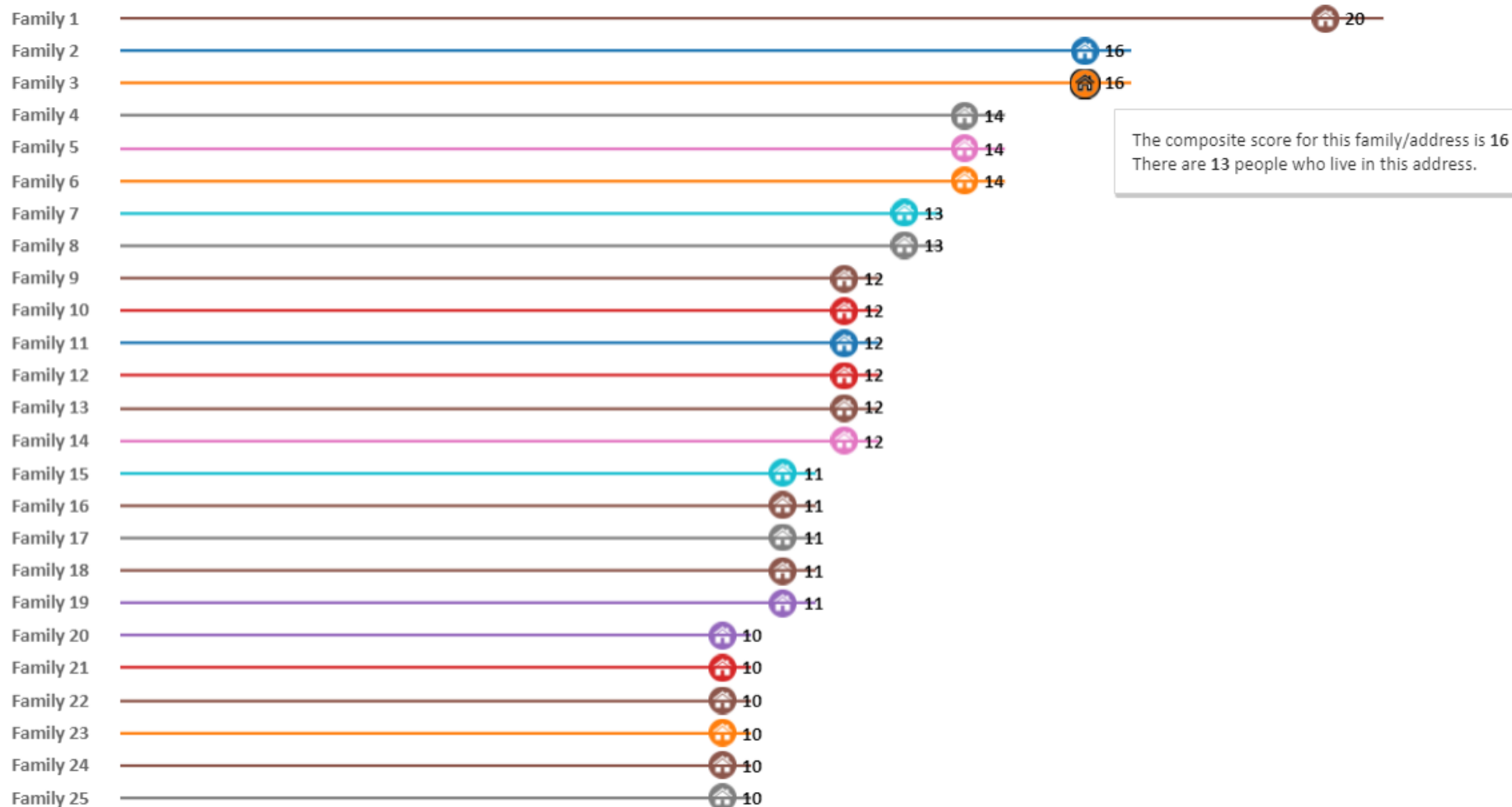
How data insight influenced service delivery



This analysis clusters groups of people as 'whānau' if they live at the same address. Each individual is recorded with an unmet need according to 19 indicators that span across the population health goals. The top families with the greatest unmet needs are then identified for each practice.

Composite score is the total of unmet needs per address.

Click on the the house icon to drill down to the patient level



Unmet needs report that GP practices can access for their enrolled population

* Data can be sorted into ethnicity and unmet needs metrics



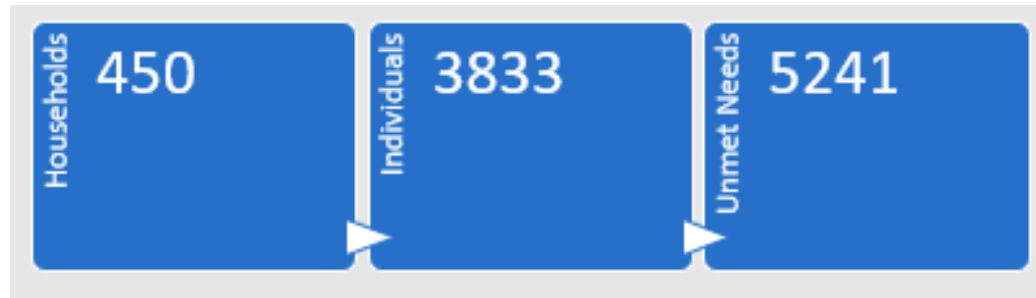


UNMET NEEDS – HEALTH INEQUITY

1. Fanau at the centre of what we do – outreach mobile service

What our data showed:

The biggest health inequity exists for Māori & Pacific families who have the highest unmet needs. They are the people who are not engaged in services.



- 71% - of households, people in households and number of unmet needs are Pacific
- The high unmet needs demonstrate the bigger gaps and inequities that our Pacific families face (10-26 unmet needs per household)
 - Efficient model of care – address a range of unmet needs
 - Fanau-centred: Taking the service to our people

ARA HAUORA – PROCARE MOBILE HEALTH WAS INTRODUCED!!

- Referrals are mainly Pacific families

USING DATA TO EMPOWER OUR COMMUNITY

- “Know your numbers”
- Take ownership of their health
- Support system/ environment / relationship
- Collaboration for Collective impact



MALO 'AUPITO

Note: Check out our Pacific Cultural App
TALA-MOANA

