

Māori Health Plan 2022/23

Doctors on Riccarton acknowledges the special status, health needs and rights of Māori in New Zealand. It seeks to identify areas of need with the aim of improving the health and producing parity of care and outcomes for Māori.

This Plan is a living document to be annually reviewed by Doctors on Riccarton

Underlying Principles of Care

- All practice team members will have training in Māori cultural competency to enhance understanding and respect for Māori
- The team will have an understanding of the Treaty of Waitangi, in particular the principles of partnership, participation and protection.
- Where necessary identify and work with whanau, local resources and organisations

Identifying Māori within the practice

Receptionists will collect ethnicity data which aligns with the Ministry of Health's principles of patient self-identification. Our PHO provides enrolment data on GPVu for practices to access. We use this information identify the number of Māori in our practice population.

Patients identifying as Māori within the practice

As at 29 November, Doctors on Riccarton has **586 enrolled Māori** patients out of a total **13,248** enrolled patients. This equates to **4.4%** of the total funded practice population.

Breakdown of our Māori population Date: 29 Nover								
Female								
Age	0-4	5-14	15-24	25-44	45-64	65+	Total	
Māori	28	63	52	99	39	10	291	
Total	425	958	603	2766	1230	572	6554	
Percentage	6.6%	6.6%	8.6%	3.6%	3.2%	1.7%	4.4%	
Male								
Age	0-4	5-14	15-24	25-44	45-64	65+	Total	
Māori	27	67	42	97	53	9	295	
Total	458	976	643	2742	1353	521	6693	
Percentage	5.9%	6.9%	6.5%	3.5%	3.9%	1.7%	4.4%	
Overall Percentage of funded Māori at Doctors on Riccarton							4.4%	



Priority Areas for addressing the health needs of our Māori population include:

- Immunisations
- B4 School Checks
- Smoking cessation/brief advice
- Diabetes
- CVD Risk Assessments
- Asthma
- Oral Health
- Mental Health
- Injury Prevention
- Cervical Screening
- Mammograms

Doctors on Riccarton will use three approaches to tackle these issues. We will

1. Carrying out opportunistic screening

Medical and nursing staff will identify Māori when attending the practice; they will do all they can to ensure that accurate clinical details are recorded (including past medical history, family history, smoking status, immunisation history, blood pressure, weight, height and BMI). Using this information, a Māori person's health needs can be recognised and appropriate advice and action offered.

2. Carrying out specific screening initiatives

It is recognised that Māori are under-represented in many screening programmes such as mammography and cervical smears. The practice shall identify these patients using query builders and place them on recall systems. In addition, the practice will try to opportunistically identify these people as and when they attend. In addition, annual audits shall be carried out to ensure to ensure that those who are at a higher risk of, or are already affected by a disease or its complications, are identified and appropriate questions, investigations or treatment undertaken.

In addition, the practice will address directives from our IPA, Pegasus and our PHO, Partnership Health Canterbury regarding initiatives designed specifically to target the Māori population.

3. Access funding initiatives for Māori patients

Practice staff are to be made aware of all funding initiatives for Māori patients and these are to be utilised as necessary.

Specific areas of Māori Health that can be addressed include:

- Māori women over 25 who are due/overdue for a cervical smear are offered free HPV screening
- Māori children have had their childhood immunisations
- Māori 27 years and under are offered the HPV vaccine
- Low-cost Consultation for Contraception (LCC)
- Insertion and Removal of Long-acting Reversible Contraceptives (LARCs)
- newly diagnosed Type 2 Diabetes Mellitus
- and general funding for Services to Improve Access



Clinical Quality Initiative for Māori in 2022/23

(this is a part of DOR's 2022 Continuous Quality Improvement Project – full details are the in CQI Project)

All eligible Māori patients are offered an HPV screen as part of Doctor's on Riccarton's participation in the HPV Screen Pilot Study. 80% of eligible Māori patients receive the screen in line with the national target by March 2023

Commencement date for the Initiative is 13 September 2022 (start date of Pilot Study). Completion date of Initiative is 31 March 2023 (completion date of Pilot Study)

Priority Area	Target Goals	Actions	Evidence of Achievement
Māori patients eligible for HPV screening	 All Māori patients eligible for HPV screening are contacted 80% of Māori patients eligible for HPV screening receive the test in line with the Ministry of Health's national target rates 	 Check that our recalls are accurate by performing a query builder to create a list of all Māori patients eligible for a cervical smear. Every person on the list is to be recalled and offered an HPV screen. If there is no response to the first recall, the patients are to be contacted by phone to explain the HPV screening and discuss barriers for having it done. If there is no response to the 2nd invite, Māori patients will be contacted a 3rd time either via text or email. Opportunistic screening will also be offered i.e. when they present to the Practice for other reasons. If the 80% national target is not achieved after 3 contacts, a review of the actions taken will be performed to see what further actions are required to achieve the target. 	See Appendix 1



Appendix 1 - Evidence of Achievement of Priority Area for 2022

Priority Area

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Report by the Clinical Governance Team (Marina Chin, Vivian Huang and Lynne Doubleday)

Preface

Almost all cervical cancer is caused by the human papillomavirus (HPV). Regular cervical screening can detect any changes on the cervix so treatment can be provided before they become cancers. There has been a steady decline in cervical cancer mortality in New Zealand since the National Cervical Screening Programme (NCSP) was introduced in 1990 and subsequent the introduction of HPV vaccination in 2008. However, the coverage of cervical screening has seen a decline since the start of the current COVID pandemic in early 2020. Nationwide, the 3 year coverage has decreased from 71.1% in 2019 to 67.1% in 2022. Although the decline is seen across all ethnicities, the highest decline of screening is seen in the Māori population with a decrease of 8.3% and 9.7% respectively (from NCSP coverage report data). The NCSP target coverage is 80%

Using our PMS Indici Quality Indicators to analyse our performance, DOR's cervical screening coverage has been much lower than the national figures. At 31-03-20, at the start of the Covid Pandemic, the coverage at DOR was 54.2% for the total enrolled population and 55.8% coverage for Māori patients. DOR has seen a significant decline in cervical screening since then. As at 30-09-22, the coverage for our total population had dropped to 45.8% (i.e an 8.4% decrease) whereas the Māori coverage had dropped to 43.8% (i.e. a 12% decrease).

NCSP has indicated that a more sensitive and less invasive HPV self-test will be introduced in July 2023 as part of the cervical screening programme to allow earlier identification of high-risk people. A select group of General Practices across NZ were approached by a research team partnered with the University of Otago to participate in a HPV pilot study to look at the best way to introduce the HPV test, the aim being to increase screening coverage and promote earlier identification of high needs people. We were one of the practice's selected due to our low cervical screening coverage.

The Clinical Governance team at DOR (Clinical Director, Dr Colin Chin; Practice Manager, Marina Chin; Head Nurse, Lynne Doubleday; and Nurse Prescriber, Vivian Huang) decided that participation in the HPV pilot study would be an ideal opportunity to improve the Practice's cervical screening statistics, focus being given particularly to the Māori population in line with our Health Equity Policy.

Therefore, our Māori Health Plan for 2022/23 has been developed as a sub initiative of the DOR CQI project.



Aim and Timeframe

- 1) To increase uptake of cervical cancer screening for DOR's total eligible population by a minimum of 5% over the next 3 months (from 13 Sep 2022)
- 2) To provide equity in screening uptake by developing strategies to achieve increased screening outcomes for our Māori patients by a minimum of 15%, bringing percentages in line with the total population in our practice.
- 3) To provide catch up screening for our Māori patients who have missed out over the last 3 years during COVID and review our procedures to increase sustained uptake and maintain levels of screening more in line with the National averages, ideally even reaching the national target of 80%.

The proposed time frame for this project is 6 months, from 13 September 2022, to 31 March 2023 (the Study's end date for data collection).

Data Analysis
Patients who have had screening in the last 3 years

	31 Mar 20 coverage (Start of Covid Pandemic)	30 Sep 2022 coverage (Start of HPV Study)	31 Oct 2022 Monthly screening coverage	30 Nov 2022 Monthly screening coverage	31 Dec 2022 (up to 12/12/22)
Eligible Māori Screened	67	63	72	74	<mark>74</mark>
Eligible Māori	120	144	139	139	139
Eligible Māori Screened Percentage	55.8 %	43.8%	51.8%	53.2%	53.2%
All Eligible DOR Population Screened	2101	1939	1889	2021	2037
All Eligible DOR Population	3873	4226	4133	4133	4133
All Eligible DOR Population Screened Percentage	54.2%	45.9%	45.7%	48.9%	49.3%



Findings

- The initial email or txt message sent to all eligible patients resulted in no response from Māori patients.
- Opportunistically asking patients at consultations was the most effective way of achieving screening
- Phoning patient directly to explain the HPV screening test had a much better booking response rate than email and/or text.

What have we learnt from this Clinical Quality Initiative for Māori

- It is not enough to send recalls for HPV/cervical screening for Māori patients. The response was much improved with direct contact with an explanation and discussion about the screening.
- There needs to be a more active recalling system for those who do not respond to text recalls.
- We need to maintain our monthly rate of HPV/cervical screening to achieve the National target of 80% screening rate.

Action Plan

- After the initial response, those who did not respond were much harder to get in, requiring
 more than the usual 3 attempts at contact. We will utilise other means to get Māori patients in
 for screening, namely:
 - Contacting He Waka Tapu

Phone: 0800 439 252

Email: www.hewakatapu.org.nz (cervical screen only)

 Utilising Doctors on Riccarton's Te Tumu Waiora team of Health Improvement Practitioner and Health Coach, with their motivational skills, to contact the Māori patients overdue for their cervical smears/HPV screening.