

Discussion outputs from DIGITAL HEALTH LEADERSHIP SUMMIT, March 2021

Topic 17: Health self-management: How can we encourage this behaviour and what are the priorities?

This topic was discussed by a group in Auckland.

Auckland delegates' responses

Barriers/challenges	<ul style="list-style-type: none"> • Generational Change – the opportunity to upskill/educate younger people on health and self-management is now; there is a mindset change to what being a partner in your own health looks like • Cultural and language barriers • Disease understanding and health literacy • Societal shift
Solutions/ideas	<ul style="list-style-type: none"> • Focus on wellness • Empowering patients through community support – ability for people to have simple access methods to support channels • Getting people 'appointment ready' → how do we 'activate' and 'engage' people prior to and post their appointments <ul style="list-style-type: none"> ○ Full disclosure: ○ Increase knowledge e.g., notes/recording from consultation shared to patient (who can share with their whānau) ○ Create trust and transfer of trust • Care circle: Create these pre and post different needs and at different times on a health journey. <ul style="list-style-type: none"> ○ Support person(s) ○ Partner with community health group ○ Connected – digital channel and non-digital ○ Use of channels like Facebook & Tik Tok • Equity e.g., Waikato Partnerships with iwi: <ul style="list-style-type: none"> ○ Targeted, trusted engagements ○ Full visibility of data • Dictated notes from consultation: <ul style="list-style-type: none"> ○ Share with whānau – Care Circle – all the detail is known to those trusted and there to support – not just the bits you remember ○ Health literacy – Increase this or ensure people have the support / care circle to manage

	<ul style="list-style-type: none"> • Education reform – introduction of school programmes MoH/MoE: (The generational change) <ul style="list-style-type: none"> ○ Focus on wellbeing – prevent! get a generational decline in known issues e.g., heart health, diabetes ○ Literacy (health literacy) – increase the base knowledge level. • Understanding what good looks like – define healthy and self-managed “good practice(s)” for people • Need patient to become a partner in their healthcare: <ul style="list-style-type: none"> ○ Patient to choose what they share and with who – Trusted, care circle and support person (empowered) ○ Allocation of support partner(s) • Self-co-ordination <ul style="list-style-type: none"> ○ Tools/methods to book appointments/easy ways to contact HCP ○ Increase engagement • Resources to manage / support your own health outside clinic/primary provider – self-management from ‘burden’ to ‘positive’ • Enhance those with high engagement – free up resources and systems to focus on those that aren’t engaged • Establish independence: <ul style="list-style-type: none"> ○ Patient ownership ○ Self-management – create independence – system and process ○ Empower people • Education: <ul style="list-style-type: none"> ○ Promote trusted resource/site – reduce misinformation ○ Credible information – not google as the default – educate NZ on where to go • Self-supported recovery: <ul style="list-style-type: none"> ○ Build confidence, provide information, set recovery milestones, manage emotion “recovery is a journey of peaks and troughs” check in - mental health checks. ○ Proactive support – proactive support addressing the above points will increase speed and quality of recovery. • Tech leverage: <ul style="list-style-type: none"> ○ Use of AI/ML ○ Activity - measure, monitor, motivate. ○ Mood – emotion sensing - how are you really feeling “tell me great but.... Deep down not great” ○ Platforms – make it easy and accessible “gamification”. • Barriers:
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	<ul style="list-style-type: none"> ○ Identify blocks ○ Set goals – cohorts an individual. ○ Understand the journey ● Establish ownership of health: <ul style="list-style-type: none"> ○ Care circle “health partner” ○ Equip people with resources – enable self-leadership ○ Shared decisions ● Access to own information – delivering a platform to see data ● Tracking goals: <ul style="list-style-type: none"> ○ Immediate effect ○ Gamification ● *Recorded* consultation video – can replay and share with whanau ● Education for prevention ● Wellness emphasis open. Maslow’s hierarchy. Make sports/fitness more important. Epidemiological perspectives on self-care ● Integrate self-care models in NHIP ● Patients like me – connecting with others - build community. ● Leverage tech and social models ● Health navigator – reliable information ● Mental health self-care ● Prescription labels in other languages? AI consultation/method developed for those that can’t read to understand script ● Successful community programmes, e.g., Quitline: <ul style="list-style-type: none"> ○ Psychologically driven with personalisation ○ Motivated journey connected/supported to ppl ● Understanding circle of care: <ul style="list-style-type: none"> ○ Whanau/neighbour/”health partner” ○ Often spouse that drives support ● Removing stigma for setbacks ● Need to understand barriers at individual level: <ul style="list-style-type: none"> ○ Community as a support function
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	<ul style="list-style-type: none">○ Leverage pharmacy – in the community, trusted.○ Wearables – proactive and data● Build connection to others – “people like me”● Environment focus (reform educators)● Provide realistic ‘champions’ → not just sport stars but “real” people that communities can relate to● Co Design - treatment and admission forms add to the information gathered<ul style="list-style-type: none">○ We ask for next of kin○ We need to ask and know<ul style="list-style-type: none">▪ What is your health literacy level 1 -3?▪ Can you easily get to and from appointments?▪ Do you have appointment / care journey support plan?<ul style="list-style-type: none">● Pre appointment – be appointment ready● At appointments – support● Post appointment / treatment● Recovery support
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