



Entry Cover Sheet

Excellence in Service Improvement

Health organisations often appear to work around the needs of the organisation rather than the needs of the patient. This award celebrates fresh thinking, new ways of working and doing things better by doing them differently.

Entrants must complete all sections below:	
Title of entry Maximum of 70 characters Be specific eg "Improving health literacy of obese patients". Title length must not exceed 70 characters.	Partnership Advisory Group (PAG) Mental Health Services
Synopsis of entry Maximum of 150 words A brief paragraph providing an overview of your entry. Synopsis must not exceed 150 words.	The patient and family/whanau voice and experience is more rounded, giving a different perspective to that of health staff, enabling a voice that is not only heard but listened to making a contribution to service delivery and their care and treatment. The PAG works in partnership with over 200 DHB stakeholders and represents the wider community in developing services alongside our health staff to better meet the needs of our population.
Name of organisation/s Is entry submitted on behalf of one or a number of organisations? It is very important that you describe who is involved in this entry. This information is used in promotional materials, acknowledgements and inscribed onto awards, plaques and certificates.	PAG consists of like-minded people/tāngata whaiora who use or have used mental health services and their family/whānau members with support from HBDHB Mental Health Services.
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Name of person/s who can be contacted in regards to this entry.	
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Your organisation	<p>Briefly tell us about your organisation:</p> <ul style="list-style-type: none"> • How it is structured and the services you provide; • Your workforce – how many people, the different roles/functions they provide; • What is your vision and values? <p><i>Aim to describe your organisation in 200 words or less.</i></p>
Excellence in Service Improvement	<p>Describe the service improvement that you are entering into the 2015 Hawke’s Bay Health Awards:</p> <ul style="list-style-type: none"> • Be specific and concise; • Describe the service improvement in terms of how it has made a difference to patient experience; • Describe the service improvement in terms of how it has improved outcomes; • Consider including diagrams, photos or patient stories to help illustrate/explain your service improvement; <p><i>Aim for 700 words or less in this section of your entry.</i></p>
Benefits and results	<p>Demonstrate improvement:</p> <ul style="list-style-type: none"> • The judges are looking for tangible results directly attributable to your innovation; • Provide benchmark and current data to clearly demonstrate improvement; • Include any measures or KPIs which you are using to track progress and review impact and effectiveness; <p><i>Aim for 350 words or less in this section.</i></p>
Future plans	<p>Demonstrate continuous quality improvement by:</p> <ul style="list-style-type: none"> • Are there any plans to extend this innovation? • What other improvement activity has this change generated? • Have there been lessons learnt or learnings that can be shared with others? <p><i>Please provide a brief summary of your future plans in 200 words or less.</i></p>

Partnership Advisory Group (PAG)

Your Organisation

The Partnership Advisory Group is an exciting development for Mental Health Services in Hawke's Bay and is in a field of its own when it comes to co-designing health services in our region. PAG consists of like-minded people/tāngata whaiora who use or have used mental health services and their family/whānau members, who want to see services designed not just by health staff but with the people and their families/whānau that use them

Our Health Sectors first 'real' PAG is now a year old and is skilfully chaired by a member of the group and is supported by a co-chair, also appointed from within the PAG. The group itself is wide and varied and represents:

- People/tāngata whaiora who have used or who are using mental health services with a perspective of/from:
 - Mental health
 - Coexisting (mental health and addictions)
 - Disability
 - Older Persons
 - Youth
 - Maori
 - Pacific
 - Rural communities
 - Family/whānua membership
 - Consumer Advisors and Advocates

The PAG works in partnership with over 200 DHB stakeholders and represents the wider community in developing services alongside our health staff to better meet the needs of our population.

Vision and values of the Partnership Advisory Group is:

To work in partnership and provide timely advice to the Mental Health Governance Endorsement Committee (GEC) and the Mental Health Project Steering Group at key decision points in the Model of Acute Care Service Development Project to ensure that the needs, wants and aspirations of people/tāngata whaiora are considered in the development, implementation and evaluation of the new/reconfigured services underpinning the Mental Health acute model of care and the associated facilities.

Excellence in Service Improvement

The Partnership Advisory Group is group of people who are working alongside the MH project team to ensure the needs, wants and desires of people/tāngata whaiora and their family/whānau are heard and taken into consideration in the development, implementation and evaluation of the new/reconfigured services underpinning the approved mental health

model of acute services and associated business case. This is a first for Hawke's Bay and the success of PAG has already attracted interest from other organisations within the HB healthcare community who are initiating capital projects and service developments.

The patient and family/whanau voice and experience is more rounded, giving a different perspective to that of health staff, enabling a voice that is not only heard but listened to making a contribution to service delivery and their care and treatment.

The involvement of PAG in mental health service development in Hawke's Bay is a long term commitment. Service quality and safety is improved by patients and whanau being involved in the co-design of both services and the way in which services are monitored to ensure quality, safety and timeliness. PAG is viewed as a long term partner with mental health services and not as a relationship that will cease at the conclusion of the project.

The positive influence of PAG has resulted to changes within the project and design of the facilities and service delivery. A very good example of this is when concerns were raised regarding the closure of the "Recovery centres" which were planned to occur before Christmas. It was felt that this was a very vulnerable time for those using the Recovery Centres and PAG set up and voiced concern which was heard and after consultation the HBDHB decided to keep the "recovery" centres open over the Christmas and New Year period. PAG also heavily influenced changes around colour and design in the new inpatient unit. PAG, without difficulty, were able to communicate concerns regarding the colour choice and business of the geographic pattern on walls and fabrics and as a result changes to these colours and designs occurred.

PAG have also managed a significant part of the process around the commissioning of external artwork such as the sculpture that will be positioned in the front of the new unit. This has required significant time and energy including fundraising.

Another significant achievement has been the input of PAG into the successful transition of unplanned respite care transferring to our NGO partner. PAG are actively involved in the ongoing development of this service to ensure this is meeting the needs of those who require this service.

Benefits and Results

To date the Partnership Advisory Group has and continues to:

- Provide feedback on the design of the new services and help identify any gaps or issues from a person/tāngata whaiora and family/whānau perspective.
- Provide advice on communication requirements to improve the messages we are giving to our community to assist and ensure the messages are clear, easy to understand, relevant and written in appropriate language
- Provide advice on transition requirements, including support and advocacy for those already engaged with Mental Health Services, and the best approach to transition people/tāngata whaiora who will be impacted by transitioning from an existing service to a new service
- Identify issues impacting on people/tāngata whaiora and assist the project team and GEC to resolve them

- Review the benefit realisation plan and evaluation framework to ensure that people/tāngata whaiora and family/whānau outcomes are reflected in the design of the benefits realisation plan and evaluation framework
- Partner with project communications, especially at forums or events focussed at people/tāngata whaiora and family/whānau.

In the short time that PAG has been going the partnership with the DHB has evolved from one where the DHB sought advice and opinion from PAG to PAG then coming to the DHB with their work for advice and opinion to one where both PAG and the DHB are working in true partnership in the co-design of services where both are involved in the outset of any service development.

Future Plans

Initially this group was going to function for the period of the new build mental health inpatient building, but the value of the collaboration and contribution from this group is that it will continue and we will work together in partnership to continue to improve patient care, treatment and service delivery.

There are a number of ways that this group will help deliver improved care to the people of Hawke's Bay and will be involved in continued service development with the Single Point of Entry, the Community Bed Ownership Concept, and Communications such as brochures and pathways of care.

The lessons learnt have been huge and the gains made even bigger. Don't underestimate the patient or family/whanau voice, they want to be involved and have a right to be involved. It is their care you are providing. Don't be scared and don't think of the process as a barrier but more as an insight to the barriers that you may face if they are not involved. The people and families/whanau involved in the care we provide will solve a lot of your problems if you allow them some insight to the issue. When you think you have done enough consultation with patients and their family/whanau....you probably haven't done enough.