



# ANNUAL REPORT

YEAR ENDED 30TH JUNE 2018

Equitable access to day surgery for rural New Zealand

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# Welcome

*“As we travel throughout NZ we get constant feedback from patients and their families on how important it is to receive healthcare in their own community.”*

One of the guiding principles of The New Zealand Health Strategy is equitable access for all New Zealanders to a comprehensive range of health and disability services. With over 600,000 people living and working in rural areas, the services we provide on the mobile surgical unit – Te Waka Hauora are clearly focussed on ensuring these patients are treated where they live and work.

## Mobile Surgical Unit

We are delighted to have treated a further 1,358 patients this year on the mobile surgical unit. It's now well established as a safe and effective service. Since 2002 over 23,500 patients have received treatment from Kaikohe in the north to Balclutha/Gore in the deep south.

## Rural Health Education Hub

A strong rural health workforce is the vital foundation for delivering healthcare excellence in all rural areas. Much of what we do involves supporting health professionals working in a rural context. We delivered 2,756 hours of hands-on clinical training and education to rural health professionals over this past year.

While rural life brings many benefits, professional isolation can be a significant challenge. To help overcome these challenges our video education sessions have provided on-going support and professional development to health professionals from as far north as Rawene, Stewart Island in the south and as far east as the Chatham Islands.

## Clinical Networking & Telehealth

Our ongoing support of both video collaboration and telehealth services has also been a strong focus over the past year. Consultation via video provides patients with faster & more convenient access to healthcare and we are pleased to continue our support and promotion of these services.

As we travel throughout New Zealand we get constant feedback from patients and their families expressing how important it is they receive healthcare in their own community. Thank you to all the individuals and organisations for your work, and the ongoing support of our service.

**Keith Smith** – Board Chair

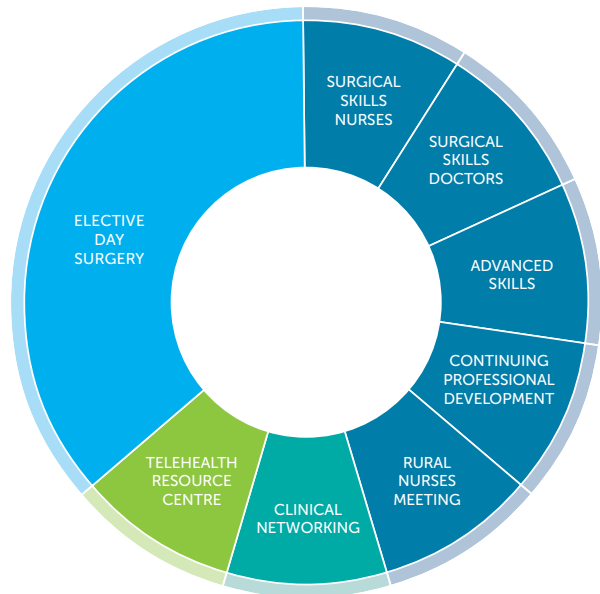
# Services

Mobile Health provides a wide range of services to support rural health in all areas of New Zealand. In total there are four broad service categories and while they are reported separately, each is closely inter-linked. Mobile Health is uniquely positioned to provide the following services on a national basis:

1. Elective Day Surgery
2. Rural Health Education Hub
3. Clinical Networking
4. Telehealth Resource Centre

The Rural Health Education Hub provides continuing professional development to rural health professionals in 5 different areas:

- Surgical Skills Nurses
- Surgical Skills Doctors
- Advanced Skills
- Continuing Professional Development
- Rural Nurses Meeting



*“It’s wonderful the whole team can attend at once, it reduces the need for travel with its associated impact on cost and rostering.”*

## Clutha Health First

Balclutha is a good example of a district which benefits from a range of Mobile Health services. Clutha Health First (CHF) is a community-owned integrated Hospital and Health Centre servicing a population of 17,000 people. Chief Executive Ray Anton says both patients and staff benefit. “Thanks to the mobile surgical unit patients get treated close to home without needing to travel, while our staff gain vital skills and experience”.

Balclutha has also utilised Mobile Health’s education program, which provides nurses and GP’s with an opportunity to update their skills and learning via video-link. Seventeen education sessions were presented over the past year on topics relevant to areas of high patient need, such as skills on falls prevention, wound care, and cardiovascular disease. “It’s wonderful that the whole team can attend at once and the video-link presentations reduce the need for staff travel with its associated impact on cost and rostering” says Ray.

# Partnerships

## Working with the Ministry of Health

All services provided by Mobile Health are funded through a contract with the Ministry of Health. This contract was recently extended to 30 June 2019, and we look forward to working with the Ministry of Health in the coming months to understand future service needs and plans for service delivery.

Jess Smaling, Manager, Electives and National Services says "We are pleased to continue supporting Mobile Health and its work with District Health Boards. For many New Zealanders, having the opportunity to receive care on the bus, closer to home makes their elective care journey a better experience. The bus also provides support and capacity to our District Health Boards and health workforce, particularly in rural communities. We look forward to working with Mobile Health in 2018/19."



## Partnering with District Health Boards

We work hard to maintain a close working relationship with all District Health Boards to determine surgical specialties for each town and also allocate patients to the mobile surgical unit's operating lists based on prioritised clinical need. Used effectively and efficiently, this additional capacity can significantly help DHB's meet their elective surgery targets.

Elective Services Patient Flow Indicators (ESPIs) are a suite of performance measures that provide information on how well DHBs are managing key steps in the elective surgery patient journey. One key measure involves patients being given a commitment for surgery which has been deemed clinically necessary within four months. This can be a challenging timeframe for some smaller towns who struggle with sufficient numbers of patients in any one specialty to make up a complete surgical

list. We work closely with rural hospital booking clerks to ensure there are full operating lists every day.

Patients clinically assessed as suitable for surgery on the bus must be classified as having a normal body mass index of BMI <35. With the increasing level of co-morbidity and obesity in the general population this has had some impact on the number of patients able to access the surgical service. However, due to overall growing demands for treatment, this has not had any significant effect on bus operating list numbers.

**USED EFFECTIVELY THE  
ADDITIONAL CAPACITY  
CAN SIGNIFICANTLY HELP  
DHB'S MEET THEIR ELECTIVE  
SURGERY TARGETS**

# Surgery

## Strong and Vibrant Rural Communities

With over 600,000 New Zealanders living and working in rural areas, Mobile Health continues to focus on enhancing rural health and wellbeing. Our services directly support patients by providing equity of access as well as supporting the rural health workforce with access to training, education and continuing professional development.

### Rural Proofing

We were pleased when in June 2018 Minister for Rural Communities, Damien O'Connor, launched a Rural Proofing Policy to ensure policy-makers take into account the unique factors affecting rural communities, such as distance from vital services, isolation and a reliance on the primary sector for employment.

**REFLECTING THE COMMUNITIES WHERE WE OPERATE,  
62% OF PATIENTS SELF-IDENTIFIED AS NEW ZEALAND  
EUROPEAN & 29.3% MAORI. IN SOME HOST SITES 80%  
OF PATIENTS IDENTIFIED AS MAORI**



## Equity of Access for Rural Patients

Judy Nelson, a resident of Balclutha and staff member at Clutha Health First says "We the residents of the Clutha area, are so lucky to have such a wonderful service of 5 weekly visits from the Mobile Bus. It has saved so many patients over the past 17 years travelling out of town for their operations. We are also very fortunate to have such a wide range of specialists happy to come to Balclutha and operate on the bus at least twice a year. This is a fantastic service and very much appreciated"

*"Everyone is so friendly and professional in all they do. Keep up the good work. Thank you so much for taking such great care."*

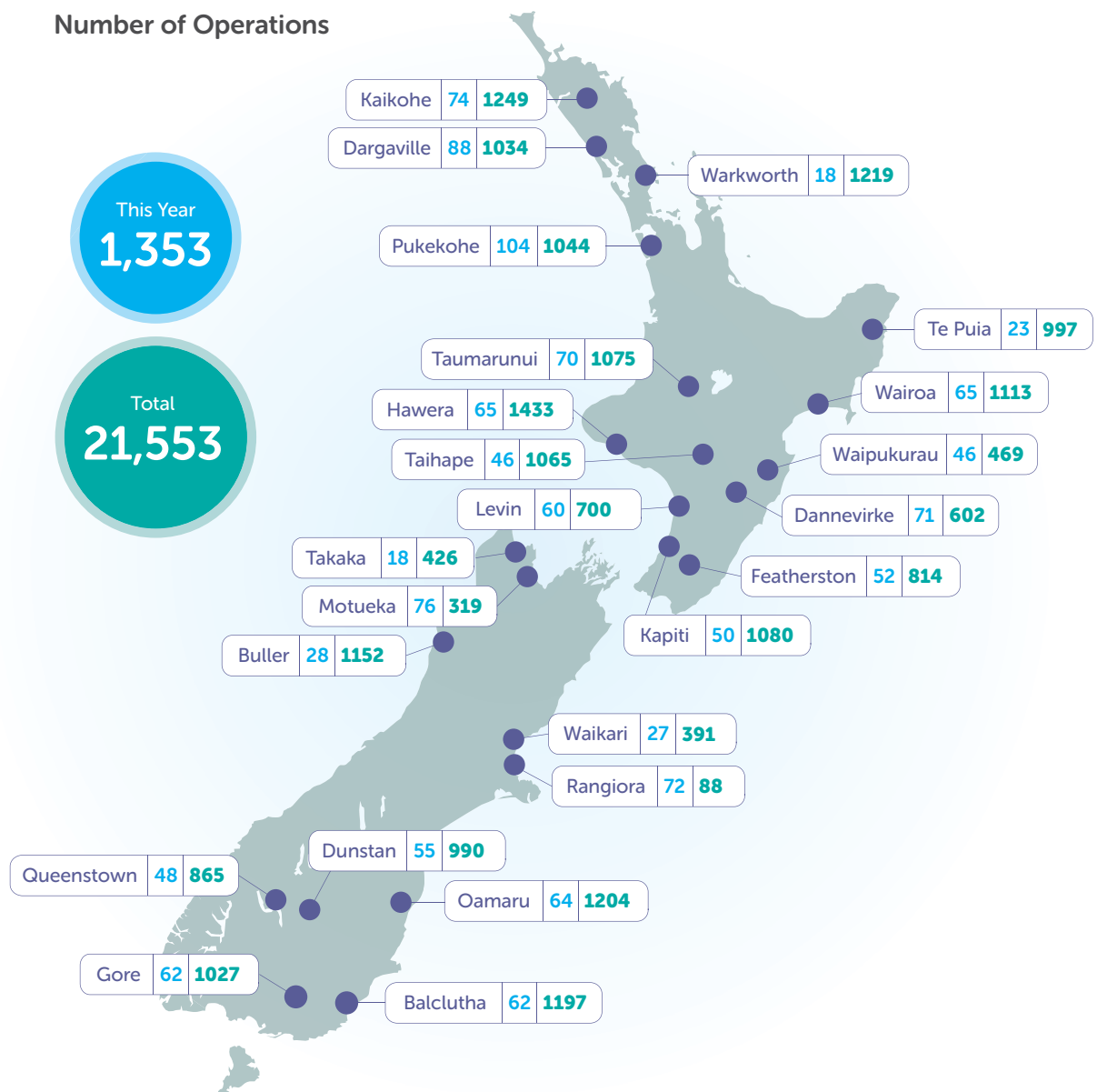
Balclutha Patient

## Working Alongside Host Sites

The mobile surgical unit operates on a regular 5-week circuit throughout rural NZ, operating out of 24 different rural locations. Strong local partnerships are key to the service. Over half of the sites have now completed more than 1,000 operations, and many more are close to this figure. We truly appreciate the support we receive from these rural health providers.

The township of Wanaka is the latest addition to the bus route. The township will host the bus for the next 18 months while Lakes District Hospital in Queenstown is undergoing re-development. However there is concern that, after 997 operations, Te Puia on the East Coast of the North Island may no longer be in a position to host the bus due to funding constraints.

### Number of Operations

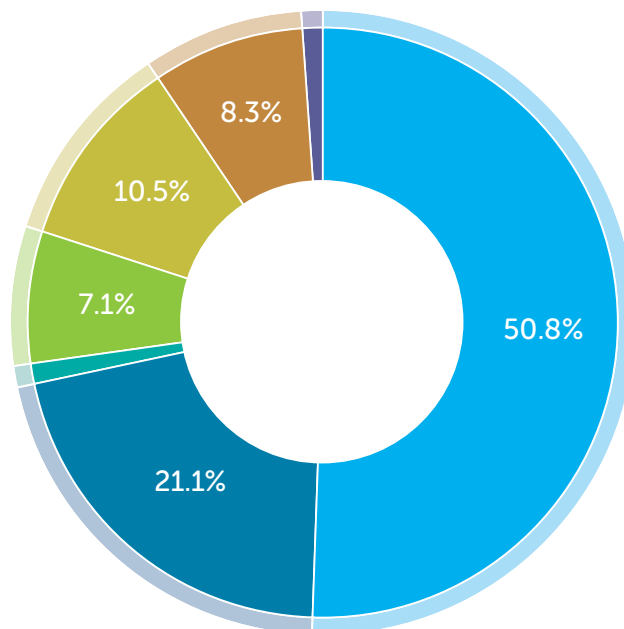


## Meeting local surgical needs

The mobile surgical unit is a facility provided for each District Health Board to help meet the needs of their rural populace. Surgical specialties are selected by each DHB and over the last year there has been a wide mix.

The largest category of patients treated are those requiring dental work under general anaesthetic. There are tight patient assessment criteria before acceptance for dental surgery. Generally those treated are under 18 years of age requiring complicated or extensive dental treatment.

Endoscopy represents more than 20% of total procedures provided by the mobile unit. Procedures include colonoscopy and gastroscopy for both diagnostic assessment and surveillance.



**670**  
case weights  
**+3%**  
ahead of  
target

	Total		Total
Dental	690	Gynae.	142
Endo	287	Orthop.	113
ENT	16	Plastic	13
General	97	Total	<b>1358</b>



## Experienced Mobile Health Team

Mobile Health employs a core clinical team to help staff the bus on a permanent, part-time basis, including four clinical nurse leaders and four anaesthetic technicians. These staff work on a regular roster to ensure the smooth and safe operation of the surgical unit.

The experience of the mobile surgical unit's team is extensive. Anaesthetic technician Chris Health has worked on the bus for 16 years, helping to treat over 7000 patients. "I feel very privileged on a personal level to work in this unique role" says Chris. "It really is all about benefits for rural people, both patients and hospital staff".

Liz Grant has been working on the bus in Ashburton since 2012. She has now joined the team permanently as a result of Clinical Nurse Manager Denise Saussey leaving after her seven years in the role. We extend our sincerest thanks to Denise for her tireless work and energy in a very busy role.

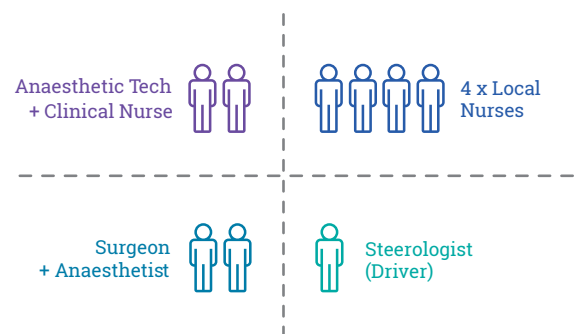


## Supporting Rural Nurses

A core principle of the services we offer is to help develop the skills of rural nurses, giving them the opportunity, education & training to work in surgical and recovery environments.

Working on the mobile surgical unit is a challenging but rewarding role, giving rural nurses transferrable skills to complement and enhance their daily practice. A total of 182 rural nurses directly supported the service in the last 12 months. Nicki Greenwood, a rural nurse from Greta Valley in North Canterbury, worked as a circulating, scrub and recovery nurse in both Waikari and Rangiora for 11 days last year, helping treat 75 North Canterbury patients. She says she's thoroughly enjoyed working on the bus since 2008. "I work as a generalist registered nurse so I gain extra skills but also utilize the ones I have. The perioperative role requires lateral thinking and teamwork but also expands knowledge on surgeries and effects of drugs. Much of the valuable knowledge we gain directly relates to post-op care in the community" she says.

### The Surgical Team Each Day



**A CHALLENGING BUT  
REWARDING ROLE GIVING RURAL  
NURSES TRANSFERABLE SKILLS  
FOR THEIR DAILY PRACTICE**

# Rural Health Education Hub

Rural nursing is extremely rewarding but does throw up unique challenges. The fact that clinical teams are so small requires nurses to have a wide range of generalist skills. At the same time their rural and remote location means they can be isolated from training and education.

To address these diverse needs the Rural Health Education Hub provides continuing

support and professional development in five different areas:

- Surgical Skills Nurses
- Surgical Skills Doctors
- Advanced Skills
- Continuing Professional Development
- Rural Nurses Meeting

## Competent Perioperative Nurses

The primary purpose of surgical-skills nurse training is to ensure all surgery completed on the bus is safe. Hands-on clinical training for the roles of scrub, circulating and recovery nurses is overseen by clinical nurse leaders.

Each nurse is assessed against a list of key skills and competencies required for the peri-operative environment.

**2,509**  
hours of training

**+4.5%**  
ahead of  
target



## Rural Doctors

The surgical unit is an ideal opportunity for rural doctors to conveniently access and work alongside experienced consultants and anaesthetists.

Information covered may include airway anatomy, airway management, LMA insertion, nasal intubation and care of an unconscious patient. These topics have direct relevance as a number of rural GP's are sole charge in rural and remote areas.

Also covered are principles of surgery and treatment modalities, with some doctors performing the role of surgical-assist depending on the specialty.

Last year, 92 hours of training was completed by rural health professionals, which was +15% ahead of target.

**92**  
hours of training

**+15%**  
ahead of  
target

## Advanced Skills

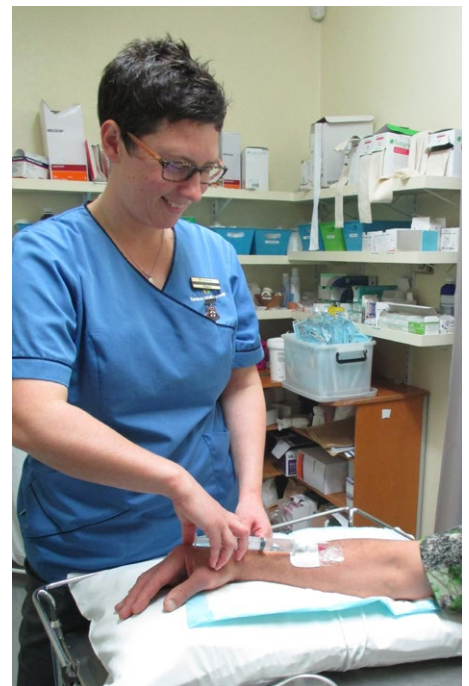
A key workforce strategy to address the shortage of rural nurses is to ensure nurses are competent and comfortable working at the top of their scope of practice. To support this, we offer a range of training opportunities for rural nurses and doctors.

### Graduate Certificate in Nursing Practice: Rural Nursing Speciality

We continue our strong partnership with Ara Institute of Canterbury, which has now developed a Graduate Certificate in Nursing Practice: Rural Nursing Speciality. We have helped ensure the course material and delivery are tailored specifically for rural nurses, and have facilitated the practical component of the course. This year the Rural Nursing Clinical Skills Interventions course was held in Wellington.

Ian Ta-Octa, a nurse from Levin, was one of the attendees.

"Being a rural nurse often means that we are working away from our base hospitals, with less support compared to our urban counterparts. The course made me confident in facing certain clinical emergencies as it taught practical theory and excellent hands-on skills with the workshop that was conducted at Wellington Hospital," says Ian.



**150**  
hours

**+20%**  
ahead of  
target

### Rural emergency nursing care workshops

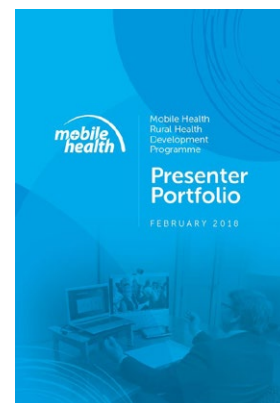
We also conducted a Rural Emergency Skills course in Taumarunui in partnership with Waikato DHB.

This covered managing a shocked or septic patient, the sick child, the disturbed patient and the elderly, confused patient. Core practical skills included airway manoeuvres, advanced airway skills and cervical spine protection, breathing support and ventilation, circulatory support, intravenous access, and chest decompression. Ultrasound-guided cannulation, procedural sedation and stabilisation for transfer and hand-over were also included.

## Continuing Professional Development

The core of the education programme links presenters with specialist knowledge to rural areas by video-conferencing. The service is available to any rural health team who are able to select from a wide portfolio of topics relevant to their local area. The presenter will often cover core theory and information first before facilitating discussion specifically related to clinical practice in the rural town environment.

Aside from the obvious benefits of saved time and cost from staff having to travel to receive such training, the meetings ensure more staff can be trained, including hospital, district & practice nurses, GP's and local St John Officers. Having a range of service providers in the same room also creates opportunities for cross-training and a sharing of experiences.



**4,085**  
hours of training

**+2.1%**  
ahead of  
target

### LAST YEAR **200** DIFFERENT SESSIONS WERE DELIVERED INTO **35** DIFFERENT TOWNS

A mix of lunchtime, evening and all-day sessions were delivered depending on the preference of the rural town.

4,085 hours of training was completed which was +2.1% ahead of target.



## Webinars

Webinars were introduced throughout the year in partnership with Rural Nurses NZ. While we don't envisage a change to the regular studio sessions, webinars are an ideal way to reach a geographically-spread audience, especially when a specialist topic is only relevant to a subset of health professionals. Regular monthly webinars are now planned.

*Left: Ben Harris presenting on Influenza, Pandemics & Infectious Diseases.*

## Rural Nurses Meeting

The annual rural nurses meeting is an opportunity for rural nurses to meet for a blended program of informative, inspirational and enjoyable presentations, specifically focussed on rural nurses.

85 people attended the latest conference, the majority from rural towns, including 18 of the surgical bus host sites.

This year's presenters included:

- Deborah Adesanya (Registered Nurse, Starship Hospital)  
- Life at Sea; Nursing on the Mercy Ship
- Rowena Panchaud (Registered Nurse) & Lorna Davies (Ara)  
- Graduate Certificate in Rural Nursing
- Dr Franz Strydom (Skinspots Cancer Clinic)  
- Melanoma Recognition
- Dr Anna Fenton (Endocrinologist)  
- Menopause
- Margaret Pittaway  
- Rural Women New Zealand and Health
- Rhonda Johnson & Virginia Maskill  
- Rural Nursing Skills workshop
- Laura Hancock (Rural Works)  
- Movement and Self Treatment for Rural Industries
- Lindsay McTavish (Capital and Coast DHB)  
- Diabetes



## Video Clinical Networking

For sixteen years Mobile Health has delivered a range of video services to help bridge the gap for groups separated by distance. Initially there was a focus on broadcasting live surgery for education and peer support, but in recent years video services have evolved to take advantage of the evolution of online video.

The core of the program captures interviews from keynote speakers at conferences, making information accessible to people unable to travel

to the conference, especially those in rural and remote areas. In the last year we filmed interviews at the following conferences:

- National Rural Health Conference – NZRGPN
- Rural Connectivity Symposium – TUANZ
- Goodfellow Symposium
- Emerging Tech in Health - HiNZ
- Health Informatics NZ Conference – HiNZ
- Conference for General Practice - RNZCGP

### THE VIDEOS ARE USED AS EDUCATION TOOLS WITH A VERY CLEAR MESSAGE ABOUT WHO TO CONTACT AND WHAT ACTION TO TAKE



We are now also producing an increasing number of videos on specific topic areas. One example is a series of videos produced for the Rural Health Alliance and the Rural Support Trust. The scenarios are developed with the unique needs of the rural community in mind and were used in a series of 'Safe Hands' Workshops. These scenarios help medical professionals recognise when a person is struggling with mental health issues and what resources are available to them to assist that patient. The videos are used as educational tools with a very clear message about who to contact and what action to take if a person encountered is mentally distressed, in crisis, or may be at risk of suicide.

77  
productions

+15%  
ahead of  
target

# Telehealth

Telehealth is the use of information and communication technologies to deliver health care when patients and care providers are not in the same physical location.

For patients, benefits include faster and more convenient healthcare, eliminating unnecessary travel. There is increasing use of video for remote consultations. For providers such as rural hospitals and health professionals getting such remote support and advice can be beneficial. A number of rural

hospital emergency departments are now equipped with cameras and video equipment for remote support from larger primary hospitals.

Mobile Health runs the NZ Telehealth Resource Centre and the [www.telehealth.org.nz](http://www.telehealth.org.nz) website. Working in close partnership with the NZ Telehealth Forum, our team offers free and independent advice and support for any healthcare provider or organisation wanting to start or expand their telehealth program.



Website: [telehealth.org.nz](http://telehealth.org.nz)  
 Newsletter: [telehealth.org.nz/newsletter](http://telehealth.org.nz/newsletter)  
 Social Media: [facebook.com/nztelehealth](https://facebook.com/nztelehealth)



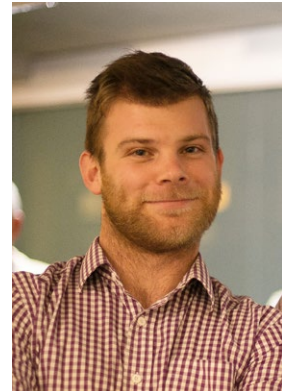
# Introducing Medical Students to Rural NZ

Mobile Health places significant emphasis on helping expose young clinicians to experience working in rural areas, frequently hosting students from Otago and Auckland universities.

Mark Owen-Cooper completed his studies with the University of Otago's Rural Medical Immersion Programme. Mark, the winner of the Pat Farry Trust Travelling Scholarship, told NZ Doctor magazine that rural medicine is his ultimate career destination. "I'm now 100 per cent working rurally" he says. Two weeks after sitting his final 5th-year medical school exams Mark began a 4-week elective run on-board the mobile surgical unit. He says it was a unique opportunity to gain insight into rural health, and to work with and assist some of New Zealand's best surgeons and anaesthetists.

"I was the only student for most of my time on the bus so I got to assist in pretty much everything" says Mark. "There's a large variety of lists and operations performed on the bus. The specialty changed most

*"I got to practice many different skills that will be useful to me in my future career in Emergency medicine..."*



Mark Owen-Cooper

days and lists included general surgery hernia repairs, laparoscopic gall bladder removals, gastroscopy and colonoscopy. I observed orthopaedic procedures including carpal tunnel releases, Dupuytren's contracture corrections and digit amputations. Gynaecological surgery included laparoscopic investigations and hysteroscopy. The biggest and most frequent lists, especially in the north island were paediatric dental" he says.

"I spent a lot of time with the anaesthetists so I got a lot of experience with the "take off" (putting the patient under general anaesthesia) and "landing" (waking them up again). I got to practice many different skills that will be useful to me in my future career in Emergency medicine, such as putting in IV cannulas, setting up fluids, administering drugs, maintaining an airway, bag masking, putting in endotracheal, nasotracheal tubes and LMA's and learning the basics on how to use an anaesthetic machine with all its bells and whistles. It was great to help improve my technique and it also gave me confidence that I can put in paediatric IV's which is a critical skill for me to have in the coming years" says Mark.



Above: Medical students Vinay Angadi and Stephanie Loeff under the supervision of Anaesthetist Dr Malcolm Stuart

# Farmers in the spotlight at Fieldays

Mobile Health worked in close partnership with the National Fieldays Society to organise it's Health and Wellness Hub. The annual Fieldays event is the largest agribusiness event in the Southern Hemisphere.

Farmers and rural workers often put the needs of the farm over and above their own health, so the goal was to create a one-stop health shop for farmers and their families coming through Fieldays and start a conversation around health and wellness, particularly mental health.



A total of 25 organisations came together under one roof to create a platform for health professionals to engage with rural people about their health. Over 23,000 people visited the hub, which exceeded all expectations.

It was a particularly smart move for 10 Health Hub visitors to the Mobile Health 'Firstcheck' stand to detect worrying skin lesions – the team diagnosed 10 skin cancers.

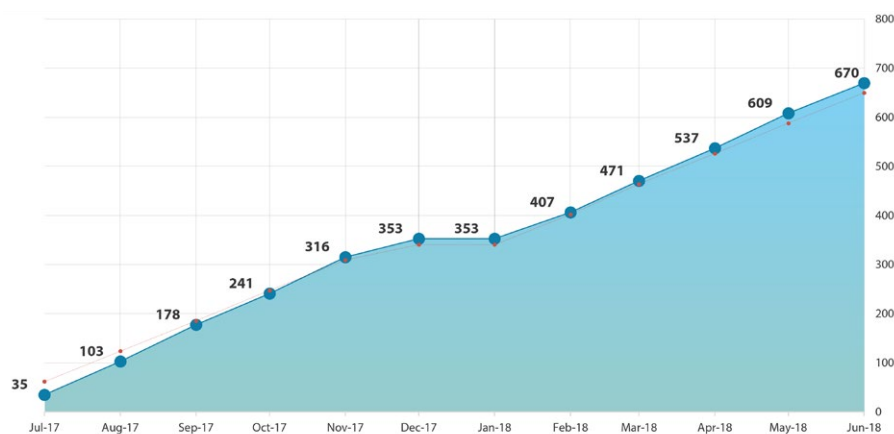
## Participants:

- Age Concern New Zealand
- Aspire Chiropractic
- Bay Audiology
- Bayer
- Breast Cancer Foundation NZ
- Dalton International
- FirstCheck
- Homecare Medical - 1737
- Look Good Feel Better
- Massey University
- Melanoma New Zealand
- Mobile Health
- Mole Map NZ Ltd
- New Zealand Rural General Practice Network
- Plunket
- Prostate Cancer Foundation of New Zealand
- Rural Aotearoa Research Network
- Rural Health Aotearoa New Zealand
- Rural Support Trust
- Rural Women
- The Barter Barber
- Waikato DHB - Cardiology and cardiothoracics
- Waikato DHB - Critical Care Department
- Waikato DHB - Mental Health
- Waikato DHB - Youth Intact



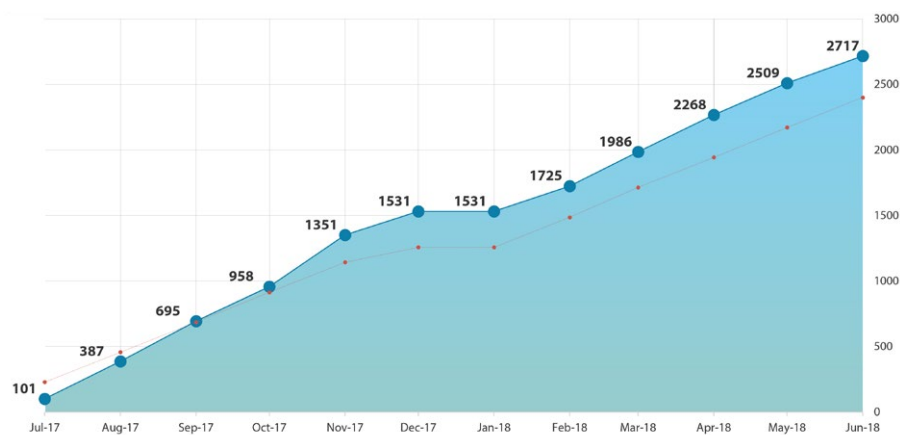
# Reporting

## Elective Day Surgery (Case Weighted Discharges)



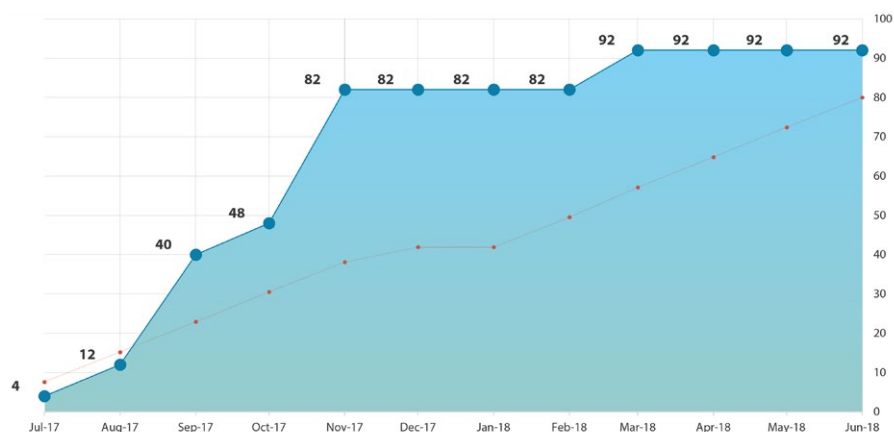
**670**  
Case weights  
**+3%**  
ahead of  
target

## Surgical Skills Nurses (Attendee hours)



**2,509**  
hours  
**+4.5%**  
ahead of  
target

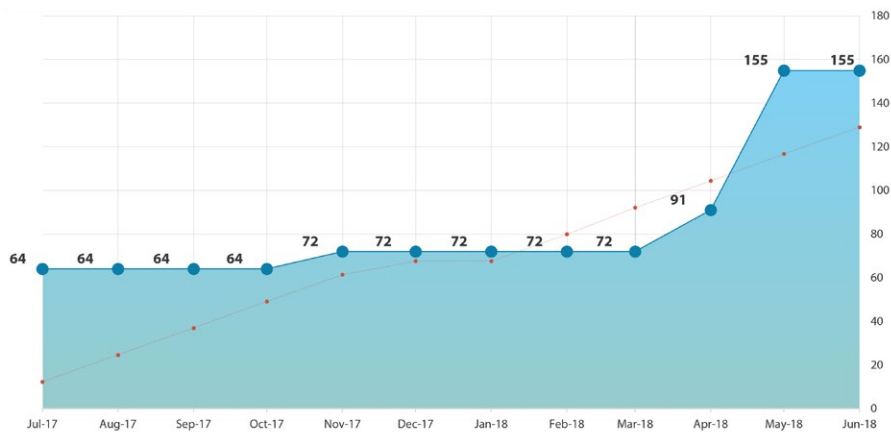
## Surgical Skills Doctors (Attendee hours)



**92**  
hours  
**+15%**  
ahead of  
target

# Reporting

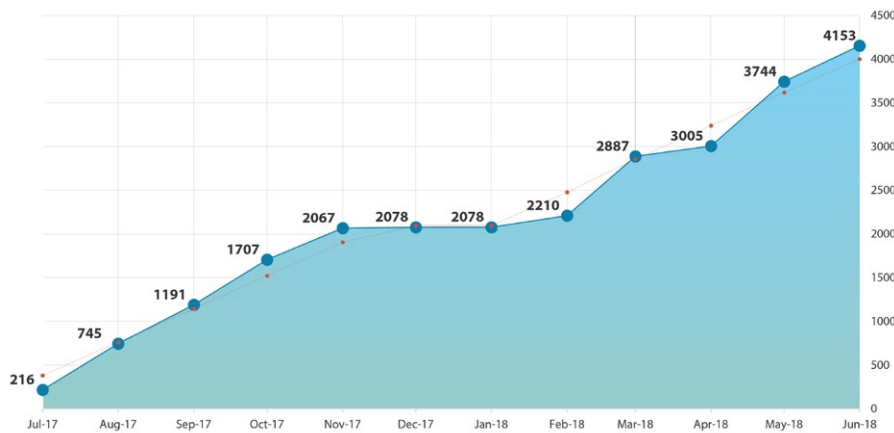
## Advanced Skills (Attendee hours)



**155**  
hours

**+20%**  
ahead of  
target

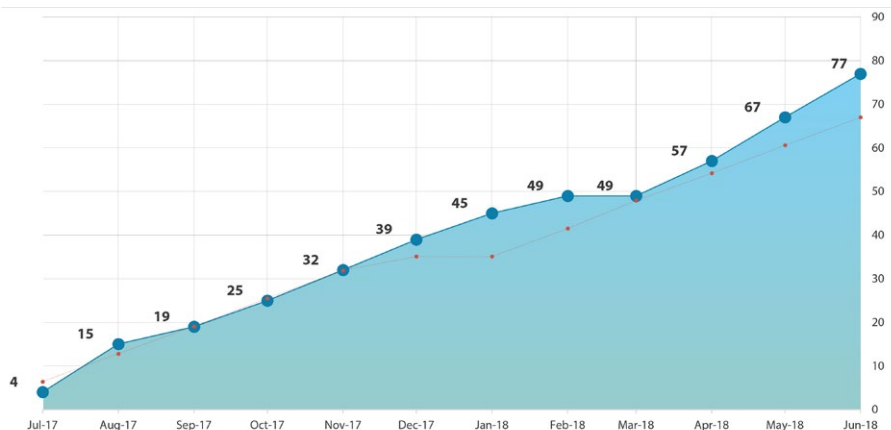
## Continued Professional Development (Attendee hours)



**4,085**  
hours

**+2.1%**  
ahead of  
target

## Video Clinical Networking (Productions)



**77**  
productions

**+15%**  
ahead of  
target



**Mobile Health**

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