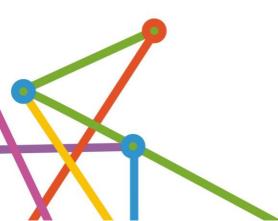


# Better Health Together Innovation Forum Report

28 August 2020







#### With thanks to Joel Levin from Aha! Consulting who facilitated the forum and collated this report from the insights shared in the session

Joel Levin is the founder and Managing Director at Aha! Consulting and has over 20 years experience working across Australia in a broad range of sectors.

His organisational, engagement and facilitation skills stem from a background in counselling, training, community work and senior management. Joel was the Senior Training Consultant for the Department of Community Development, focusing on the development of their services and funded not-for-profit services.

Joel is a licensed trainer and board members for the International Association of Public Participation (IAP2). In 2018, Joel was awards the Distinguished Fellow Award from Leadership WA for outstanding commitment to the organisation and service of the WA community.

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## Introduction

On Thursday 27 August 2020, WA Primary Health Alliance (WAPHA) hosted an online stakeholder forum to explore lessons learnt from the past few months and what might be applied from these lessons for service delivery into the future.

Approximately 55 people joined online for a two-hour workshop.

We are pleased to share the collated notes taken from the session and encourage you to share them with colleagues. Use the themes to inform your own practice and be inspired by the wisdom and insight given by your peers.

#### Pre-session survey

Prior to the workshop stakeholder interested in the forum were invited to respond to an online survey through <u>Primary Health Exchange</u>;

- 1. What should be appreciated about our response to COVID-19 to date?
- 2. What impacts should be understood that have flown from that response?
- 3. What have we learnt about ourselves, our services and our clients from the response to date?

Responses were themed and shared at the beginning of the session to set the scene.

Things that we can appreciate from the response to COVID-19 so far:

- The agility of many organisations to adapt and respond
- Increased collaboration
- Rapid decision making and reduced red tape
- The infrastructure and technology that already existed to enable service delivery to continue

Reflections on the longer-term impacts that need to be understood:

- a need for more investment in infrastructure and skills to deliver high quality telehealth
- the need for heightened attention to our vulnerable communities

Learnings about ourselves, our services and our clients:

- Our shared sense of community
- Services can provide, and clients can receive, care remotely and that this works well for many (but not all)
- We are capable of rapid change
- Some of the current fee models are not fit for the current environment

#### Principles to take forward

The group was asked to explore the following question:

"What are the leadership principles that should be carried forward, regardless of COVID-19?"

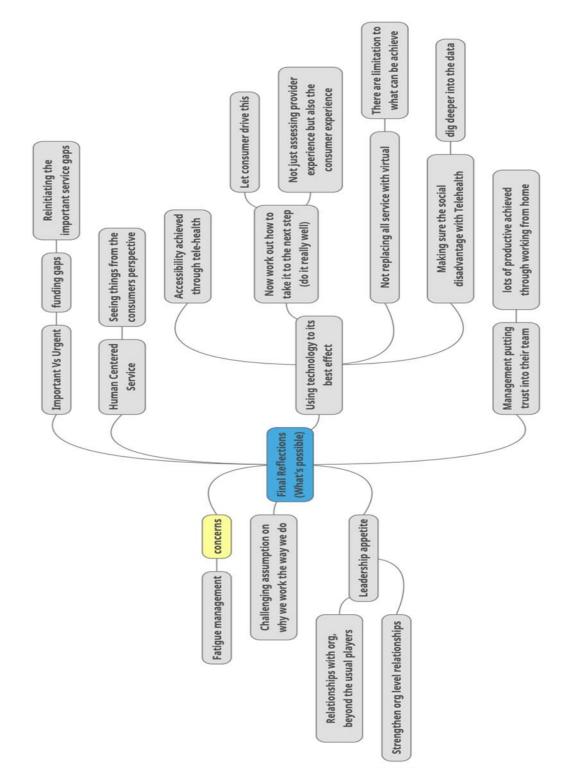
The raw responses from each group can be found in Appendix 2. The predominant themes from these discussions were:

- Clear communication and direction internally and externally
  - Collaboration and information sharing
  - o Increased listening
  - Think about whose voice is not being heard (digital divide)
- Celebrating the wins

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- Maintaining connection to strategic vision and direction
- Balancing need for agility and maintaining opportunities for engagement
  - This helps to work through the resistance that comes from people not feeling engaged
  - Trust in our teams and each other
- Invest in the relationships, to draw down on this during crisis
  - Having mechanisms and relationships (knowing who to call)
- Sometimes the 'just do it' approach is needed
  - Focus on outcome not process. Delegation gets lost when it becomes too detail oriented.
  - Embracing change and adapting
  - Quick decision making

#### Closing comments



# Better Health Together – Innovation Forum Session Plan – Online Session

Hr/min	What
0:00 10min	<ul> <li>Welcome and Intro</li> <li>Acknowledgement of Country</li> <li>Welcome to the forum</li> <li>Session Purpose</li> <li>Identify the lessons from the last three months</li> <li>Explore the potential for service delivery into the future</li> </ul>
0:10	Principles to take forward
50min	<ul> <li>Pre-session survey</li> <li>1. What should be appreciated about our response to COVID-19 to date?</li> <li>2. What impacts should be understood that have flown from that response?</li> <li>3. What have we learnt about ourselves, our services and our clients from the response to date?</li> </ul>
1:00	Principles into Action
50min	<ol> <li>What principle stands out for you?</li> <li>How might this be applied in practise?</li> </ol>
1:50	<ul> <li>Next Steps</li> <li>What happens from here</li> <li>Thank you</li> </ul>
2:00hr	END

### Appendix 2 – Raw Notes from Group Work

The following notes are presented raw and unedited (apart from spelling corrections where applicable).

Group One	Group Two	Group Three	Group Four
What are the leadership principles that should be carried forward, regardless of COVID?	What are the leadership principles that should be carried forward, regardless of COVID?	What are the leadership principles that should be carried forward, regardless of COVID?	What are the leadership principles that should be carried forward, regardless of COVID?
More personal communication	Staff member anxiety - due to unknowns. Situation changing day by day. Keeping staff updated. Information different from States and Commonwealth.	Be good in our communications - bombarded by changes. Need to decipher the information and relay to all staff. Clearly communicate our plan as we moved to telehealth.	Confidence in the team that they will do the right thing, regardless of geographical position
Making sure everyone feels connected to strategic vision and direction of org while remote	Service provision perspective - access to services was not compromised in any shape or form. Able to adapt to different modalities. Able to adapt to video and telephone. Learnt to collaborate with clients.	We had to follow a global mandate to work in a different way so we had to get quick and clear comms to our staff, clients etc. Needed to make quick calls.	Keep ears open to accept how people will manage their workload to be nimble, innovative and outcome focused
Making sure everyone communicates clearly	How to provide guidance. Provide safety for young people. How to present information. Staff become overwhelmed and confused as information changes. As leadership team knowing how to collate information and present simply and clearly. Not overwhelming.	Need one leader, consistent communications.	Embrace the successes of doing things differently but maintaining service levels, to enable access to service for patients
Prioritising MH of staff, wellness days e.g. Wednesday with tips etc, all teams included in activities and communications, pick up the phone	Flexibility from funding bodies. Not needing to complete as much paperwork.	Mental toll on front line staff is now being noted.	Telephone counselling was a great success which may impact on future services
Consider staff in their family context, how to support staff, COVID leave of 14 days introduced	Really collegiate atmosphere - everyone pulling together and helping.	Shared resource between two organisations. Good comms to our staff and patients was key and to the wider community.	The importance of system readiness and commitment of the team
Allied health staff - MBS items for billing introduced was a good initiative to assist	Develop and maintain trust with funding bodies. This will allow increased flexibility in the future. The funders also trusting the service deliverers.	Benefit of less red tape. Set up a FB COVID response page for quick updates.	Essential to retain client focused approach
instant messaging rather than email is very effective	Trust and autonomy. Lottery west funding applications became a lot easier. New things became possible with increased flexibility. More time to focus on what matters	Sharing of information between services was much appreciated and resulted in better outcomes for our community	Business continuity plans that are flexible to meet the needs of patients in a time of crisis
Quiz days using zoom, great fun! honesty and trust - no googling! banter, fun, brought people back together, brought joy to the workplace	Some confusion for some services about how to continue to operate. Charity food and support has now had a raised profile and need to maintain this.	Leaders being really clear about the principles from which they are making decisions and giving directions and the ability to defend them.	Regular communication
Measures to encourage staff to get away from their screens	New world of zoom meetings. does not work as well as face to face, but have become remarkable adaptive. Hope real meetings aren't finished. Open to traditional solutions as well as new ones.	In the heat of the moment, it gets really complex and pressure to make decisions quickly, so the set of core principles is really important.	Trusting the workforce
Monitor and check on clients e.g. re phone calls and how they felt afterward	Strong telehealth services - can be seen as cheaper but not always as good. Hard to do relationship building. Don't want to see it disappear but need to find a balance of both.	Working in partnership for the benefits of the WA community so there has been great willingness to partner and get the job done. That willingness, facilitation of partnerships, sharing what we know with each other.	Evaluate what works, what hasn't. Use learnings for future business continuity
training that is directly relevant at the time of crisis; opportunities	Losing funding to travel to regions but it can be difficult to	The increased need to form partnerships with for profit and	Provide support to the team

for mentorship. Allow people to build their resilience	develop initial relationships - much easier to continue with telehealth once established.	not for profit organisations so we can provide programs that are accessible and affordable.	
Voice of calm in the crisis key	Need to have flexibility to deliver across the options. Client preference taken into consideration. Choice. Not deliver all services to all clients in the same way.	EAP for staff has been vital. Fatigue due to extra hours and increased workloads	Establish processes to retain connection of workforce
	Clients have started to advice if they prefer telehealth or face to face. Led by clients and consumer choice.	Easier referral pathways or sharing the load for other services when they are busy by taking their clients. Relieve wait lists. Get funding to the right sources.	Maintain the processes that proved worthwhile
	Consumer at the centre of all decisions.	The approach to planning and sharing of information, sharing it more freely has been important.	Tele-health and Digital health options did work for some but not all. Though, modality has been retained to continue as part ongoing practice
	Sharing of referral systems and pathways. Different organisations at different stages and sharing of protocols and resources.	Table top exercises of major agencies led by Health helped to gain a better understanding of everyone's role, plans etc	Ensuring that the team have a supportive environment
	Capacity building across organisations. Leadership has role to share systems. Need to amplify this and carry forward.		Retain focus on organisational culture
	Number of meetings has increased significantly. Is it necessary to have the extra meetings and don't have any outcomes.		Transparency in communication
	Appreciate WAPHAs streamlined reporting Has become a lot easier and would like this to continue.		Benchmark workforce capability and morale
	WAPHA interested in qualitative data rather than quantitative. Impact measurement.		Important to review innovation and creativity
	Staff development and training - increasing trust. Trust work is being done.		Communication from WAPHA was well received and assisted in leadership decision making
	Flexibility of working from remotely. Can suit cons		

Group Five	Group 6	Group 7
What are the leadership principles that should be carried forward, regardless of COVID?	What are the leadership principles that should be carried forward, regardless of COVID?	What are the leadership principles that should be carried forward, regardless of COVID?
	social justice and equality. Recognising and responding to the impact on vulnerable groups.	Increased visibility and communication with staff, clients and the leadership team - moving from confusion and lack of clarity regarding risk mitigation to clear articulation.
Collaborative Approach-multidisciplinary education events and sharing of knowledge and experience.	Great communication channels to reach out to consumers to find out what the needs are and respond accordingly. For example regular updates and connections.	Increased listening and exchange - e.g. moving from quick calls and catch ups to regular all organisation calls, yammer, open forum for asking questions
	Commitment to positive and accurate messaging - be conscious of tone so that people don't feel worse.	Mechanisms to get information on a rapidly changing situation out to GPs and allow them to refer e.g. daily newsletter and Health Pathways
Flexibility of services to adapt to new ways of working. The development of key principles to guide and support the change. Inflicted an enormous amount of change in a short period of time- need to be aware of individual styles, coping strategies in this context. Need to consider the impact of fatigue and what support is required.	Digest and simplify information to meet the needs of stakeholders	Engagement and involvement of a diverse range of people/ remember clients - creating opportunity for feedback as well as transferring information e.g. consumer rep drop in sessions
What does this mean for the impact of ongoing need for adaptability.	Work well and collaborate with other stakeholders - focus on problem solving in a timely manner. Used open communication channels and communicating what each stakeholder needs.	Preparedness and forward planning - e.g. use of remote and virtual communication
	communicate often to get the message through	Addressing the digital divide and other barriers - asking whose voices are not being heard, who can't be at the table and who can't access telehealth support services and for what reason e.g. people who are not safe to access services at home, lack of equipment, access to platforms
Generally teams have adjusted very well. Having a central principle of health and wellbeing was key. Other principles-Least disruption to services and taking action to support slowing spread of the virus.	pull together the right stakeholders together and respond quickly if there was any issues - need to know who the "right" people may be in advance	Managing the volume of information and prioritising - overwhelming communications from the number of agencies
	need for coordination of effort to minimise duplication	Collaboration in communications to manage information flow
Standardised guidelines on patient information and key messaging has improved.	Development of a plan to learn from our recent experience e.g. the unintended consequences of unsustainable "windfalls" ego food parcels. Interventions need to be accompanied by support for consumers to know what to do	Connecting and building relationships - not just relying on emails, building value of relationships in preparation for the time that you need to draw on those relationships
	Utilise and engage local community leaders to provide a voice for vulnerable people - consider creation of a list that is ready in the event we need to call the "right" people around the table to design solutions	Being helpful to other agencies - trying to work together, collaborative response
Policy and procedure framework served the organisation well.	Trust, longevity of location knowledge	Establishing absolute clarity on priorities and what work was going to go ahead. Clear deprioritisation.
		Absolute clarity of the importance of staff safety in an organisation's approach
Some HR issues emerged- relied existing policies and later the Ombudsman guidelines were helpful.		Transparency - very important to be transparent with all stakeholders e.g. sharing information on website rather than with one agency.
Staff and community goodwill were significant		