

Case Studies on Equity

Volume II

How the testing and supply team demonstrate equity in action

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Equity in Action ... the Sequel

The Wait Is Over

The people have demanded it, so here it is, Equity in Action: Case Studies Volume II, the follow up to Testing and Supply's case studies from January to June 2022.

The world is opening up again and we need be more vigilant when it comes to protecting our communities. This means the work doesn't stop. Volume II demonstrates our continued commitment to this.

Why We Need More Equity In Action

The need is great. Equitable access to healthcare for vulnerable New Zealanders means better health outcomes, which means fewer hospitalizations and deaths. Testing and Supply continue to do their part, recognising they are part of a wider system response to achieve the types of gains we need.

Testing's approach is guided by these main principles (as outlined in Volume I):

- Community-centric focus
- Collaboration and connection
- Communicating with stakeholders regularly
- Common sense

And underpinning this approach is the importance of trust:

- Trust built by being authentic and pragmatic
- Creating conditions that enable providers to respond to communities at pace knowing they are supported.

Case Studies Volume II

These ten new case studies demonstrate Testing and Supply's practical approach to equity in action between July and October 2022. As with Volume I, these cases are intended to generate ideas on how to make 'equity in action' a reality.

We've used the Double Diamond design approach again to find and deliver these equitable solutions.

The case studies in Volume II are:

- Simplifying the way Pharmac's eligibility criteria for antivirals were presented
- Setting up a call centre for reporting RAT results
- Setting up a RAT delivery system for rural, isolated and disabled people
- Establishing an early communications engagement process with providers
- Reaching diverse ethnic communities
- Increasing supervised RAT coverage
- Review of the Māori and Pacific Provider Distribution Channels
- Click & Collect
- Developing solutions with communities
- Alternative testing modalities

“Sometimes our Matua get confused by all the different public health messages. If communication isn’t done right, it can get in the way of advancing equitable access or worst still, exacerbate inequities. I think we should be keeping things very simple.”



Case Study 11: Simplifying Antiviral Eligibility

Challenge	To increase the uptake of COVID-19 antiviral medicines in priority populations	Key stakeholders
Discover	The Situation In August 2022 Pharmac expanded the eligibility criteria for antivirals, and increased accessibility further by giving some pharmacists the authority to write prescriptions. Māori and Pacific people are among those most likely to benefit from antivirals, but uptake remained low.	Pharmac Care in the Community (Te Whatu Ora) Community providers
Define	The Problem/s Focused On <ul style="list-style-type: none"> • Testing and Supply's community providers couldn't explain the criteria to their communities • Pharmac's accessibility criteria were written for clinicians and difficult for the public to understand • The criteria were only available on Pharmac's website, which excluded elderly Māori and Pacific people without digital access – who were essential to reach 	End users Pharmac Care in the Community (Te Whatu Ora) Testing and Supply (Te Whatu Ora) Community providers
Develop	Possible Practical Solutions <ul style="list-style-type: none"> • Create a printable plain English version of Pharmac's criteria • Give that printable table to community providers to share with their communities 	End users Pharmac Care in the Community (Te Whatu Ora) Testing and Supply (Te Whatu Ora) Community providers

Challenge	To increase the uptake of COVID-19 antiviral medicines in priority populations	Key stakeholders
Deliver	What We Did <ul style="list-style-type: none"> Created a simpler 2-page table version of the criteria and gave it to Pharmac for review Worked with Pharmac to reassess their policy against releasing hard copy that may be superseded by noting potential updates on the printable table Distributed the simpler criteria 	End users Pharmac Care in the Community (Te Whatu Ora) Testing and Supply (Te Whatu Ora) Community providers MoH website Unite against COVID-19 website Health Navigator website
Outcome	Simplified eligibility criteria were: <ul style="list-style-type: none"> Emailed to our provider network and Te Aka Whai Ora Attached to the antivirals page on MoH's website Turned into a new eligibility criteria page on MoH's website Shared through the Te Whatu Ora network Linked with UAC and Health Navigator 	300+ community health providers notified Increased uptake of antiviral access

“It was good to talk to someone to help us with our questions. We were starting to get stressed because we didn’t know how to record our results and get some more RATs!”



Case Study 12: Assisted Channel

Challenge	Set up a non-digital channel for reporting RAT results	Key stakeholders
Discover	The Situation Many people in priority populations were not reporting RAT results and lacked information about RAT collection.	Digitally excluded people
Define	The Problem/s Focused On <ul style="list-style-type: none"> Priority populations had difficulty with online reporting of RATs and in getting information in general about RATs due to digital exclusion 	Customs Testing and Supply (MoH)
Develop	Possible Practical Solutions <ul style="list-style-type: none"> A non-digital alternative for RAT result reporting to support people who can't use the website 	Testing and Supply (MoH)
Deliver	What We Did Established Reach, an assisted channel 0800 number to: <ul style="list-style-type: none"> Report RAT results Order RATs Share up to date information on COVID-19 guidelines Accommodate international arrivals 	Testing and Supply (MoH) REACH Aotearoa Customs Healthcare Logistics MPI DHBs NXP
Outcome	<ul style="list-style-type: none"> An important source of information for New Zealanders Following the opening of the borders in February 2022, international arrivals were required to report RAT results via an email survey and were excluded from using My COVID Record. The 	471,000 calls were received through this assisted channel (including traveller queries)

Challenge	Set up a non-digital channel for reporting RAT results	Key stakeholders
	assisted channel was a non-digital alternative for RAT result reporting.	

“Because we live out of town and our situation is complicated, we tend to be forgotten so it was a relief to be able to access RATs this way. Thank you!”



Case Study 13: Advancing Equitable Access

Challenge	Deliver RATs to priority populations	Key stakeholders
Discover	The Situation As soon as the assisted channel was set up in April 2022, people with a range of complex challenges began asking for RATs to be delivered.	Assisted channel Testing and Supply (MoH) REACH Aotearoa
Define	The Problem/s Focused On Limited access to RATs for people: <ul style="list-style-type: none"> • In rural areas far from testing and collection centres • Who are unable to travel for various reasons (health and disability, lack of transport) and have exhausted all social support 	Testing and Supply (MoH) International arrivals Digitally excluded people
Develop	Possible Practical Solutions <ul style="list-style-type: none"> • Develop eligibility criteria for delivery • Build on the ad hoc regional delivery network of some DHBs, CCS Disability in Action, and other providers for delivery via Healthcare logistics 	DHBs Testing and Supply (MoH) CCS Disability in Action Healthcare Logistics
Deliver	What We Did <ul style="list-style-type: none"> • The regional approach quickly revealed a lack of capacity in some areas to handle deliveries in a timely way • Requests were centralised through the assisted channel and Whakarongarau and triaged to Healthcare Logistics on a spread sheet which plugged into their delivery system 	DHBs Whakarongarau REACH Aotearoa Testing and Supply (MoH) CCS Disability in Action Healthcare Logistics

Challenge	Deliver RATs to priority populations	Key stakeholders
Outcome	<ul style="list-style-type: none"> • Time from request to delivery for people unable to collect RATs (rural and urban) was reduced to 24 hours • Over 5200 households connected with the assisted channel 	26,000+ RATs were delivered across the country using the assisted channel

“Easy access to the supplies allowed us to operate in different ways to finally meet unmet need in our communities and support the delivery of public health messages”



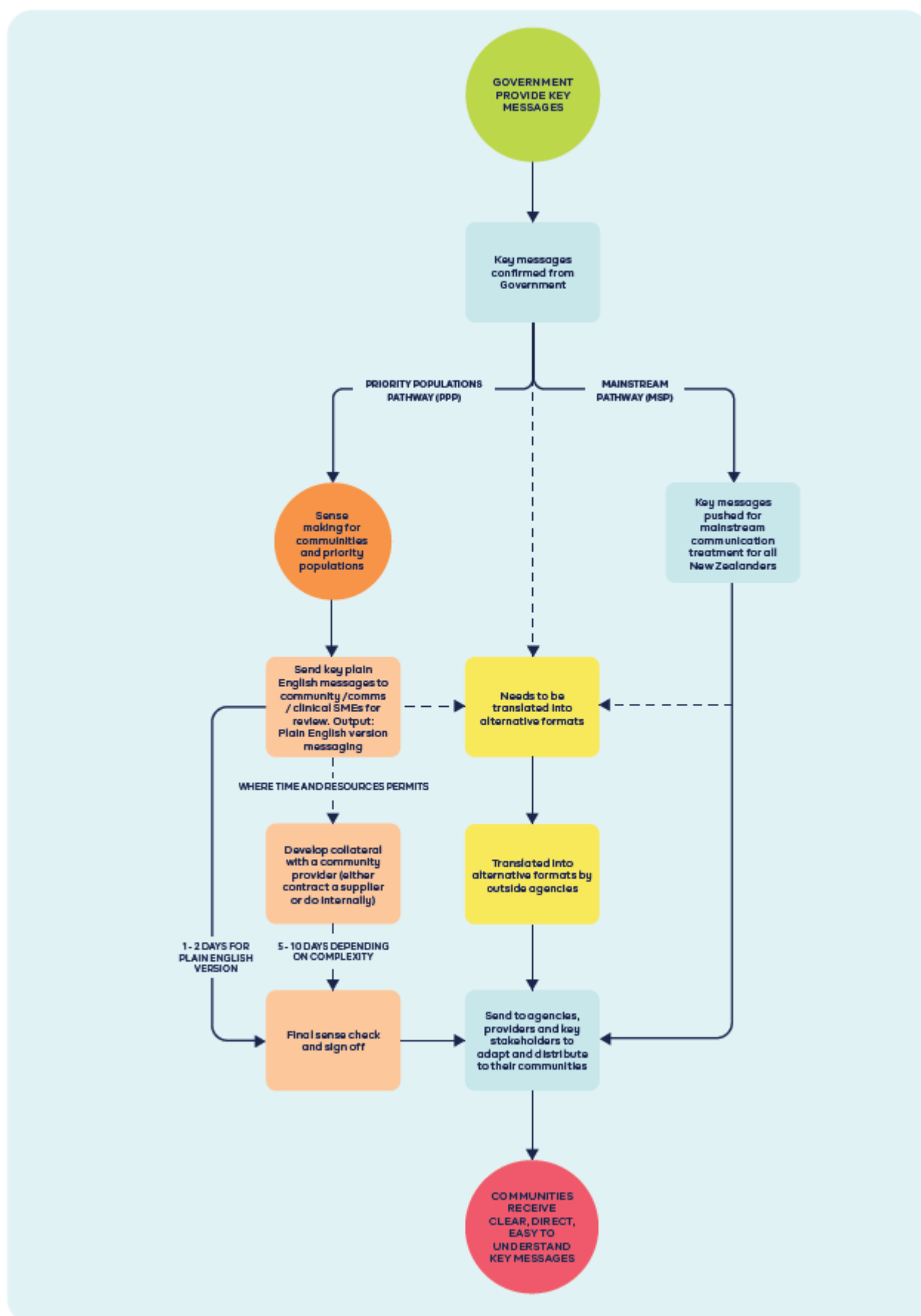
Case Study 14: Early Engagement Process

Challenge	Make communications to priority populations timely and relevant	Key stakeholders
Discover	The Situation Key public health messages were not reaching and engaging priority populations in a timely way. The view from key stakeholders was that the release of tailored communications to Māori, Pacific and disability communities was too slow, resulting in low uptake of public health measures and misinformation.	Testing and Supply (MoH) DPMC
Define	The Problem/s Focused On <ul style="list-style-type: none"> • Lack of reach to priority populations through mainstream communication channels • Key messages for some priority populations were difficult to understand • The delay in delivering tailored communications to priority populations 	Testing and Supply (MoH) DPMC
Develop	Possible Practical Solutions <ul style="list-style-type: none"> • Work with providers to tailor key messages from DPMC for their communities • Let providers share key messages in plain English in the way that suits their communities best 	Testing and Supply (MoH) DPMC Community providers
Deliver	What We Did <ul style="list-style-type: none"> • Captured a guidance process stressing the importance of early engagement and collaboration with community providers 	Testing and Supply (MoH) DPMC Community providers

Challenge	Make communications to priority populations timely and relevant	Key stakeholders
	<ul style="list-style-type: none"> Engaged providers and key stakeholders in the priority population pathway 	
Outcome	<ul style="list-style-type: none"> The delivery of key messages in plain English at pace to community providers for them to share and adapt in culturally relevant ways The process was captured in, The communications experience for Testing and Supply: The importance of early engagement with Māori and Pacific community providers 	<p>Created the communications priority population pathway.</p> <p>Now available for communications teams across agencies, with positive uptake.</p>

"If we receive key messages in clear and simple text, they will help us adapt these messages so they make more sense for our communities."

- Provider



“This is about embracing our tikanga which acknowledges a holistic approach.” - **Mihi**



“Our community has been experiencing many challenges intensified by the pandemic. Having free RAT kits and face masks helps them to continue keeping themselves and their family safe, without adding financial stress. The language barrier is an ongoing challenge for our community; hence, it is also very helpful to them that our organisation can supply these essential items to them rather than them navigating through English-speaking platforms.”



Case Study 15: Access to Masks, RATs, and Information for Ethnic Communities

Challenge	Improve supply of RATs, masks and information to ethnic communities	Key stakeholders
Discover	The Situation Ethnic communities make up 16% of the population, yet they are often overlooked. Information and supply channels were not meeting the needs of many of these diverse groups. A key issue was access to RATs and masks.	Ethnic Community advocates and interest groups
Define	The Problem/s Focused On <ul style="list-style-type: none"> Preparing ethnic communities with RATs and masks for another surge Creating a distribution list of ethnic community groups 	Testing and Supply (MoH) Community groups Regional districts
Develop	Possible Practical Solutions <ul style="list-style-type: none"> Set up an ethnic community distribution channel and connect ethnic communities to it Target places of worship and faith leaders Leverage off existing community provider networks for distribution Create clear and simple messaging for collection and use of RATs and PPE 	Testing and Supply (MoH) Community groups Te Whatu Ora
Deliver	What We Did <ul style="list-style-type: none"> Set up over 120 ethnic community partners to form a nationwide ethnic community distribution network 	Testing and Supply (MoH) Ministry for Ethnic Communities

Challenge	Improve supply of RATs, masks and information to ethnic communities	Key stakeholders
	<ul style="list-style-type: none"> Supplied groups with RATs and masks via multicultural events and places of worship Triaged supply orders when language was a barrier to filling out forms in English 	<p>Health agencies (working for culturally and linguistically diverse communities)</p> <p>Community groups</p> <p>Regional Te Whatu Ora</p>
Outcome	<ul style="list-style-type: none"> Over 600,000 RATs and 7 million masks were delivered to ethnic communities through the ethnic community channel in 3 months An ethnic community distribution network was established Enduring relationships were developed 	<p>120+ ethnic community partners formed the nationwide ethnic community distribution network</p>

“We don’t know how to apply for RATs through the government website as we can’t recognise the English words properly. These boxes were brought to us in person. This was so handy and thoughtful.”



Case Study 16: Supervised RAT Coverage

Challenge	To extend supervised RAT coverage for Māori and Pacific communities	Key stakeholders
Discover	The Situation The testing service coverage through health providers was not sufficient to reach some of our priority populations, particularly our most at-risk groups.	Community providers
Define	The Problem/s Focused On Coverage of supervised RATs to priority populations and at-risk groups where health service reach was limited	Community providers Testing and Supply (MoH)
Develop	Possible Practical Solutions <ul style="list-style-type: none"> • Conduct an expression of interest (EOI) to identify which providers are available • Vary current contracts to extend reach of health providers • Identify coverage gaps and approach providers to inform them of the EOI 	Procurement team Testing and Supply (MoH) Community providers Subject matter experts
Deliver	What We Did <ul style="list-style-type: none"> • Identified where coverage areas were an issue and approached district leads and agency leads to help us identify interested parties who would like to do supervised RATs • Issued an EOI and opened up the option of supervised RATs to a wider range of providers than health providers 	Procurement Team Testing and Supply (MoH) Community providers Government agencies Sector Operations District leads

Challenge	To extend supervised RAT coverage for Māori and Pacific communities	Key stakeholders
Outcome	<ul style="list-style-type: none"> • Increased reach into priority populations • Onboarded Iwi, Māori traditional healing centres, social, cultural, and community services 	40,000 supervised RATs completed by community providers

“When we connected with the Testing team it was a gamechanger for our community. We felt heard!”



Case Study 17: Review of MPDC

Challenge	To assess the Māori Provider Distribution Channel (MPDC) and Pacific Provider Channel (PPDC)	Key stakeholders
Discover	The Situation Anecdotally, the value of the MPDC and PPDC highlighted significant benefits for Māori, Pacific and priority populations. Over 10 million RAT s were distributed by these channels at pace to over 1000 community partners. However, there was concern from providers that successes were largely under reported and that a detailed analysis of the effectiveness of the system was needed to provide visibility.	MPDC PPDC Community providers Testing and Supply (MoH)
Define	The Problem/s Focused On A need for an independent review / evaluation to capture experience, identify learnings and recommendations for potential scale.	MPDC PPDC Community providers Testing and Supply (MoH)
Develop	Possible Practical Solutions <ul style="list-style-type: none"> To engage an independent review of the Māori and Pacific distribution channels Carry out the review internally Ask providers to fund their own internal reviews and share the findings with Te Whatu Ora 	Allen and Clarke MPDC PPDC Community providers Testing and Supply (MoH)
Deliver	What We Did <ul style="list-style-type: none"> Commissioned Allen and Clarke to do an independent review on the MPDC Worked with our supply and procurement teams at Te Whatu Ora to 	Allen and Clarke Testing and Supply (MoH) MPDC

Challenge	To assess the Māori Provider Distribution Channel (MPDC) and Pacific Provider Channel (PPDC)	Key stakeholders
	<p>quantify the value and effectiveness of this approach</p> <ul style="list-style-type: none"> • Worked with MPDC and PPDC to understand what has worked • Worked with Te Whatu Ora to determine the future of this approach 	<p>PPDC</p> <p>Te Whatu Ora</p>
Outcome	<ul style="list-style-type: none"> • Independent review report (for the MPDC and PPDC) completed mid-November 2022 • Insights into the applications and efficacy of the distribution channel approach • Recommendation on the future of the MPDC and PPDC 	<p>Allen & Clarke</p> <p>Independent review report on MPDC and PPDC</p>

“Tēnā te whakamiha atu ki a koutou i whai whakaaro ki o tātou tamariki mokopuna. Nā koutou anō ēnei taputapu i tākoha mai hei tiaki, hei manaki i te oranga o a tātou tamariki.

Tēnā koutou.”

“This is an acknowledgement for all you have done for our children. Because of the supplies you have provided to us, the wellbeing of our children is assured.

Many thanks.”

- Whānau Pounamu



Case Study 18: Click & Collect

Challenge	Protecting the Pacific community	Key stakeholders
Discover	The Situation The community provider and Pacific Provider Distribution Channel partner The Fono were looking for ways to increase the uptake of RATs and masks in their community.	The Fono MOH
Define	The Problem/s Focused On Family leaders who: <ul style="list-style-type: none"> • Spoke English as a second language • Were not digitally savvy 	The Fono
Develop	Possible Practical Solutions <ul style="list-style-type: none"> • Engage young people to help create solutions for distribution • Incorporate RATs and PPE into care packages for into packages of care for whanau • Enable community to respond to community 	The Fono Testing and Supply (MoH) Care in the Community (MoH) Churches and community groups
Deliver	What We Did <ul style="list-style-type: none"> • Created a click and collect operational model that enabled groups to collect RATs and masks from a central and accessible location at their convenience • Engaged with young digitally connected people and got them to pick up and deliver supplies on behalf of their families • Worked with community providers to promote the click and collect initiative 	The Fono Testing and Supply (MoH) Care in the Community (MoH) Churches and community groups

Challenge	Protecting the Pacific community	Key stakeholders
Outcome	<ul style="list-style-type: none"> Over 100 Churches, community providers, charities and cultural groups accessed the click and collect initiative Identify youth as a resource (untapped workforce) was discovered. Scaled this initiative to include care packages and food packs 	<p>40,000+ RATs collected</p> <p>40,000+ Masks collected</p>

“Our elders usually lead our communities, so it was good to think outside the box and empower our youth through this Click & Collect initiative. It was so successful that we extended the model to the social hub.”

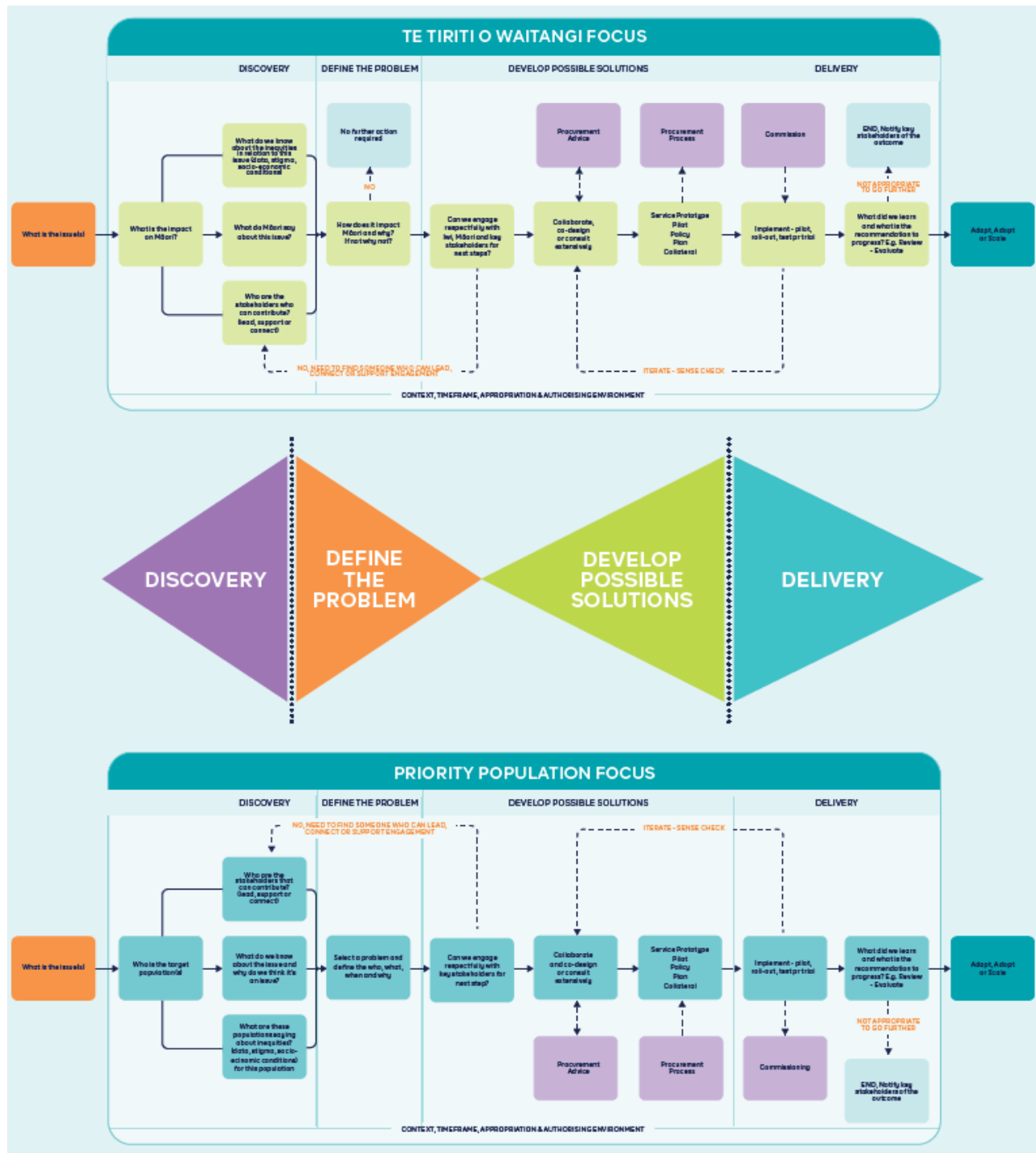


Case Study 19: Nothing About Us Without Us

Challenge	Developing solutions with communities	Key stakeholders
Discover	The Situation Criticism arose that various government agencies had developed quick fire solutions for communities without engaging key stakeholders from those communities, which led to problems being misunderstood. The result was that interventions missed the mark.	Government agencies Community providers Communities Testing and Supply (MoH)
Define	The Problem/s Focused On Work was needed to support agencies to engage key stakeholders and potential partners to inform the analysis of the problem and co-design of the solutions	Government agencies Community providers Communities Testing and Supply (MoH)
Develop	Possible Practical Solutions <ul style="list-style-type: none"> • Map an engagement process to help guide colleagues • Hold regular meetings with community providers to get their feedback • Work with community subject matter experts to sense check direction • Outsource engagement to a supplier to manage on our behalf 	Government agencies Community providers Communities Testing and Supply (MoH)
Deliver	What We Did <ul style="list-style-type: none"> • Developed Te Tiriti and Priority Population-focused guidance tools of the engagement process from issue to implementation 	Government agencies Community providers Communities Testing and Supply (MoH)

Challenge	Developing solutions with communities	Key stakeholders
	<ul style="list-style-type: none"> Shared these tools with outbreak response colleagues to apply in their work 	
Outcome	<ul style="list-style-type: none"> Te Whatu Ora established better working relationships with community providers and relevant community groups Increased co-design arrangements with external partners (providers, suppliers) to design and deliver solutions Improved procurement processes and fit for purpose requirements Assisted channel 	Solutions Include (but not limited to) <ul style="list-style-type: none"> MPDC and PPDC Ethnic Community Network channel Supervised RAT Service Early Adopter panel Collateral for communities

Te Tiriti o Waitangi Focus



“We feel valued when you include us from the beginning of the process, not at the back end – it's way too late then.”

- Provider

Case Study 20: Alternative Testing Modalities

Challenge	Finding alternative testing modalities for those – who find it difficult to use a nasal test.	Key stakeholders
Discover	The Situation Testing and Supply received anecdotal insight that nasal samples were not always easy to collect in the disability community. An alternative, less intrusive testing modality for a cohort within the disability community was strongly advocated.	Whaikaha Community providers Disability provider organisations
Define	The Problem/s Focused On <ul style="list-style-type: none"> Identify and define the cohort within the disability community who are experiencing barriers to testing access Identify the best modality for this cohort 	Testing and Supply (MoH) Whaikaha Disability advocates
Develop	Possible Practical Solutions <ul style="list-style-type: none"> Work with a contracted supplier to investigate a saliva option Lead a project internally to investigate alternative modalities 	Testing and Supply (MoH) Whaikaha Procurement Community providers CMDHB Lab NRHCC
Deliver	What We Did <ul style="list-style-type: none"> Engaged disability and Māori providers Established a project to test the Copan and Rhinoswab tests with a disability cohort Worked with the supplier Rako to test a saliva PCR option with disability and rural Māori communities 	Testing and Supply (MoH) Procurement NRHCC CMDHB Lab Whaikaha Community providers

Challenge	Finding alternative testing modalities for those – who find it difficult to use a nasal test.	Key stakeholders
	<ul style="list-style-type: none"> Collaborated with regional Te Whatu Ora leads 	Suppliers
Outcome	Trials will begin in the first quarter of 2023	20 Providers (disability and Māori) have signalled their interest in being involved with the trials

“The fact that Te Whatu Ora are still proactively finding alternative options for testing, despite people thinking COVID is over, is a testament to their continuing commitment to improving equitable access for disabled people.”

