



Daring to Be Different Nursing

Connecting Services
Home/Practice/Residential Care
Model

Who am I



- Rachel Hale
- Registered Nurse
- Master Nursing – Rural and Gerontology focus
- 30+ years as qualified Nurse
- Work @ Matamata Medical Centre
- Currently Nurse Practitioner Candidate (on Pathway)

Rational

- Matamata is a large Rural Community
- Enrolled Patient Numbers of approx 13,500
- Outreach Marae Based Clinic of 1000
- Ministry of Health Guidelines for Dr/ Pt ratio 1:1500
- 6 FTE Doctors
- Over 15% over 65 years
- Approx 180 in Residential care

People involved

- Clinical Nurses Specialist
- Older people of Community
- Doctors
- Outreach Marae Clinic
- PHO
- 4 Residential Care facilities.

CNS Links

- Link Older Person to GP
- Link Older Person/ Whanau/Family to appropriate Service
- Link service to Older Person (advocacy)
- Link Residential Care Staff to GP
- Liaise and Advocate between whanau/ family and care services when an issue arises

How it works

- Home visits
- Open access for Residential care staff
- Negotiated process with Older Person goals
- Formal feedback to GP
- Formal feedback for Residential care
- Available to Marae Older People and Whanau to problem solve

Outcomes

- Seen approx 350-380 People in 9 months
- Improved access for Older People
- Improved resources for Older People/ families /whanau and friends
- Improved liaison for GP
- Improved Residential care compliance – 3mth checks etc
- Resource for Residential Care that have Qualified Staff Issues

Case Studies

- Drug
- ACC
- CHF
- Other

Conclusion

Service is about to be independently audited with view to extending service to other small communities

