Resilient health care - embracing the future



www.hqsc.govt.nz

New Zealand Government

- 1001/





COVID-19 Dashboard by the Center for Systems Science and Engineering (CS

Last Updated at (M/D/YYYY) 22/11/2021, 18:21

257,558,455

Total Cases

5,150,762

Total Deaths

7,39

28-Day Cases

28-Day Deaths 200,633 28-Day

Cases | Deaths by Country/Region/Sovereignty

US

28-Day: 2,243,219

33,297

Totals: 47,730,591 | 771,1

United Kingdom

28-Day: 1,082,471

4,419

Totals: 9,897,206 | 144,36

Russia

28-Day: 1,057,899

32,643

Totals: 9,170,898 | 259,10

Germany

28-Day: 924,609 |

4,009

Totals: 5,400,687 | 99,130

NORTH



Admin0

Esri, FAO, NOAA

28-Day







"Work-As-Imagined"



Volatile

The environment demands you react quickly to ongoing changes that are unpredictable and out of your control

Uncertain

The environment requires you to take action without certainty

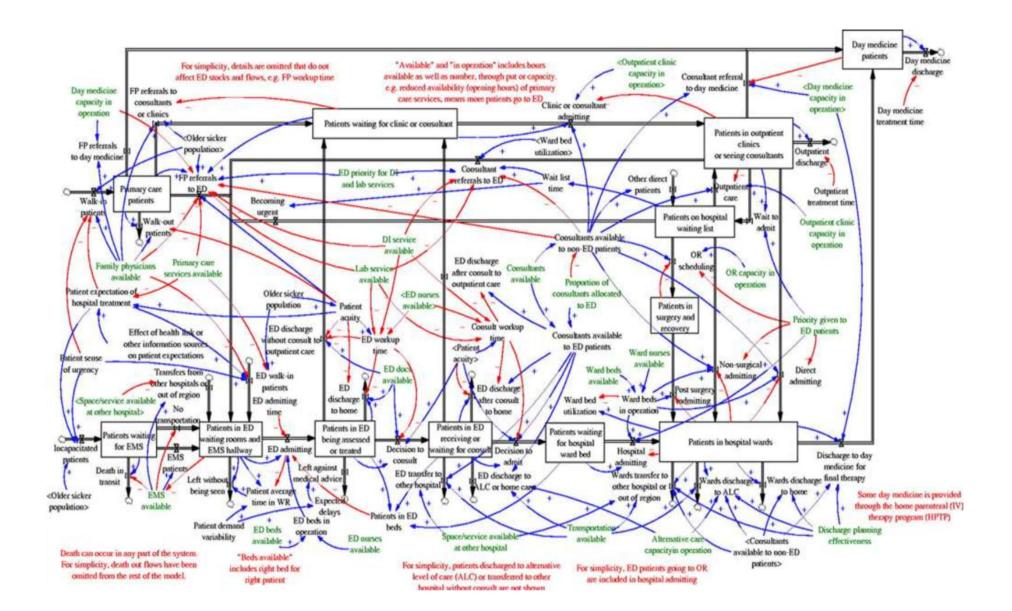
Complex

The environment is dynamic, with many interdependencies

Ambiguous

The environment is unfamiliar, outside of your expertise

"Work-As-Done"



Balancing creativity and constraint

"In complex environments, resilience often spells success, while even the most brilliantly engineered fixed solutions are often insufficient or counterproductive."

The system only succeeds

because people/teams

are able to adjust to meet the

conditions of work

Complexity is the problem...



People are the solution

Resilient Healthcare

"the capacity to adapt to challenges and changes

at different system levels,

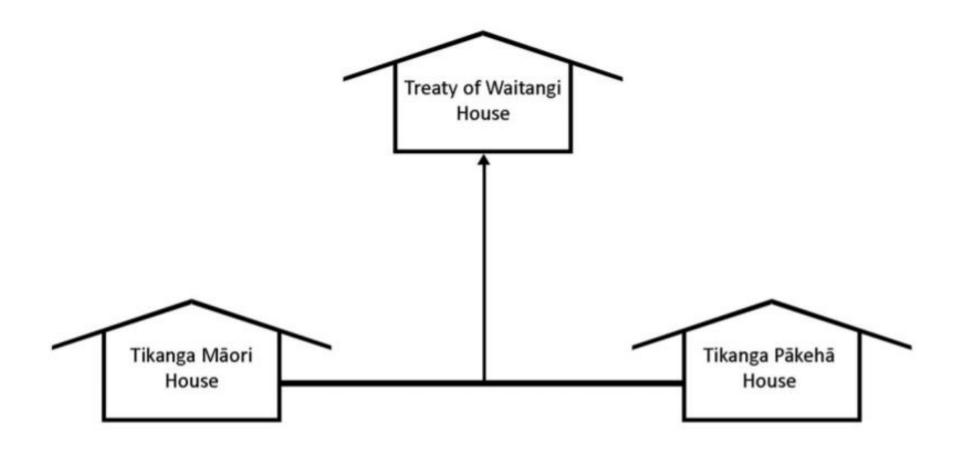
to maintain high quality care."



Recipe for resilience: Te Ao Māori and the Covid-19 response



The Three Whare Model



Professor Whatarangi Winiata (Te Wananga O Raukawa)

Whakapapa the theory of everything

One thing is birthed by another, is birthed by another

All elements have whakapapa

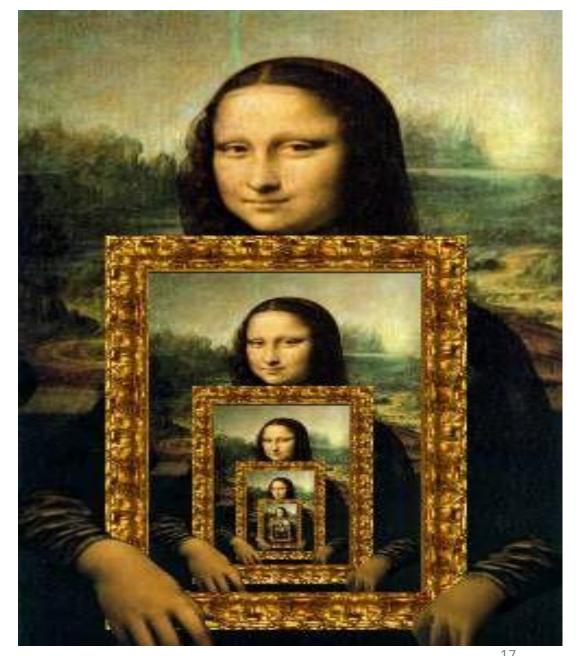
All elements are relational

All systems are relational

We can retell, recreate and creatively connect...te kore....te pō....te ao marama

It can be ok to subtract!

Ki waenganui - is relational!



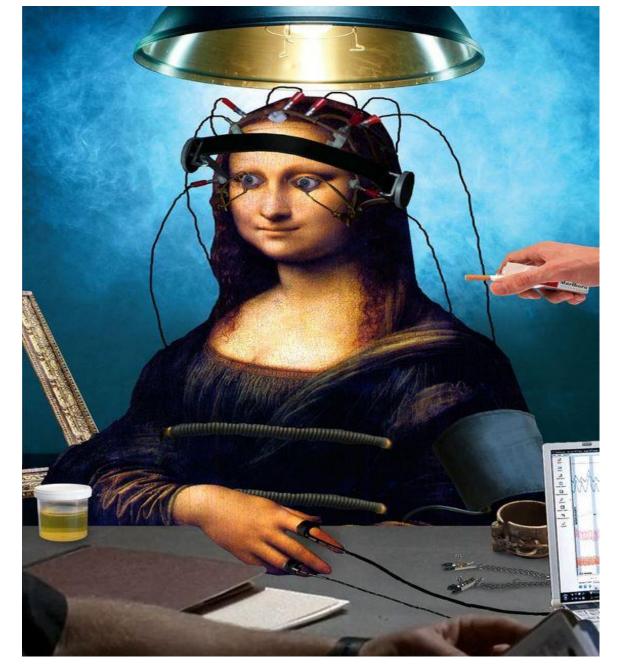
The whakapapa is the first thing to understand; one thing gives birth to another – everything is relational

Complex system machinery is designed, navigated, understood and put into action by people

Under the face of itwhat does it support? ...people created the mechanisms, the individual components to work together to achieve an aim



It is well known that alongside other colonising devices, research was used to define, destroy and deter the valuing of Indigenous knowledge, philosophies and practices (Mikaere, 1995; Smith, 1999; Battiste, 2000).



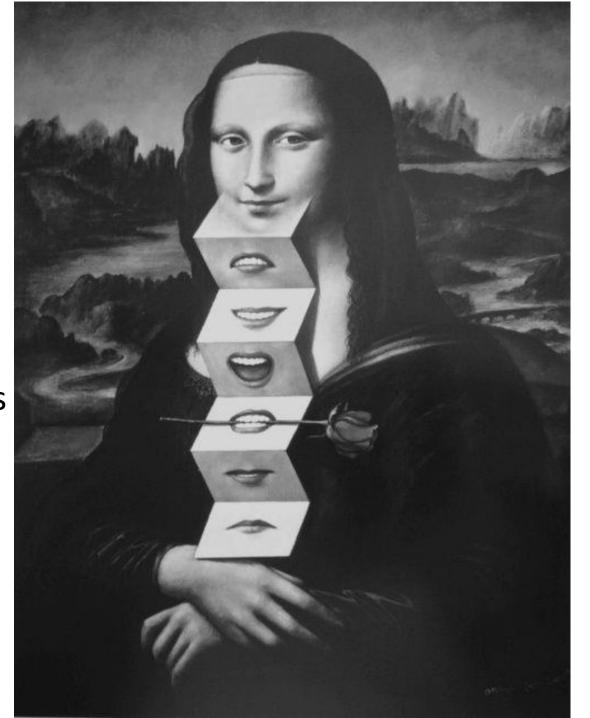
Multiple voices
Multiple views
Multiple perspectives
Multiple sets of skills
Multiple ways of knowing

Different knowledge systems

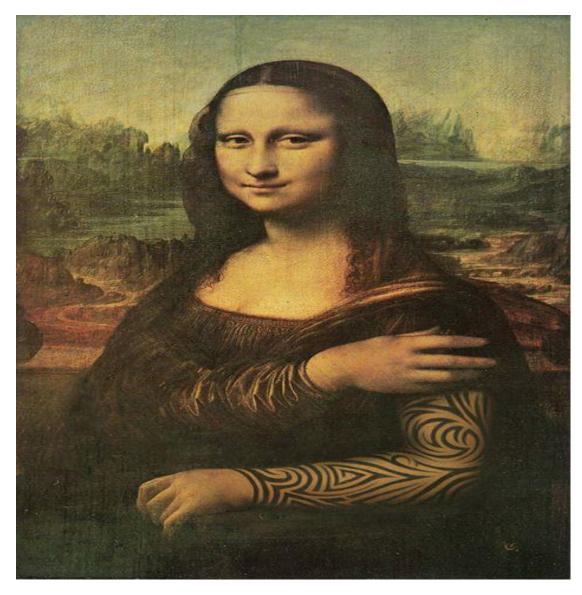
Recognition of inherited knowledge systems

Understanding the whakapapa.

We know the whakapapa, we understand context - we understand our shared Aotearoa history









How do we put the people first and the relational, as the central thing within a system?

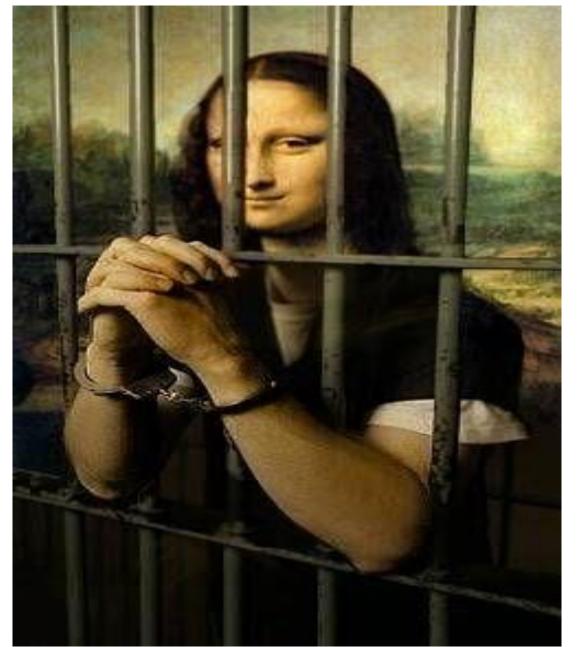
Now in COVID – what have we learnt? What are the learnings from Māori?

A Maōri systems worldview is a relational view, what can we do to support this when not in crisis?

Caged by structure? systems processes, possibly constrained by current ways?

"This is simply the way we do things here, we have always done it like this"

Structure can support however is dependant on relationship





Complex – We Can Adapt





Use our knowledge, design skills and style

Lets look closely at ourselves

Recognise the blemishes

Potential for multiple adjustments & applications

Remain conscious & curious Important not to box Important not to "other"

Māori constants HAVE REMAINED - epistemology







TO BE COMPLETED WITHIN 24 HOURS OF ADMISSION

PATIENT ID LABEL

Preferred name		Obtained by	Obtained by	
Reason for admission		Date/time of admission		
Emergency contact person .		Phone		
ALLERGIES & SENSITIVITIES:		On regular medication? Same charted? Patient has own meds?	□ Yes □ No □ Yes □ No □ Yes □ No	
_	□ No Reason for iso	s 🗆 No Does the pt have an i		
	(catton Chart) 🗆 Heig	rivations Chart) ht(roter to Medication Chart) ilysis		
HEALTH HISTORY/CO-MORBIE	omes			
HEALTH PERCEPTION/MANAG	EMENT & COPING (Dosca	Anderstanding of condition adhere	ence to therapy & coping)	
COGNITIVE/PERCEPTUAL/SLEI PAIN: □ Yes □ No INT Location	TENSITY: At rest	<u> </u>	□ Acute □ Chronic	
Level of consciousness: Emotional state: Cognition: Communication barriers: Sleep pattern: Comments	□ Co-operative □ Orientated □ Nil	Confused Drogs	□ Unresponsive □ Withdrawn □ Hearing	
		□Yes □No		
Mobility (brior to admission):	at home (eg Home help.)	detrict nurses)? □ Yes □ No ther		

re there any spiritual/religious/cultural practices that may be affected by hospitalisation?

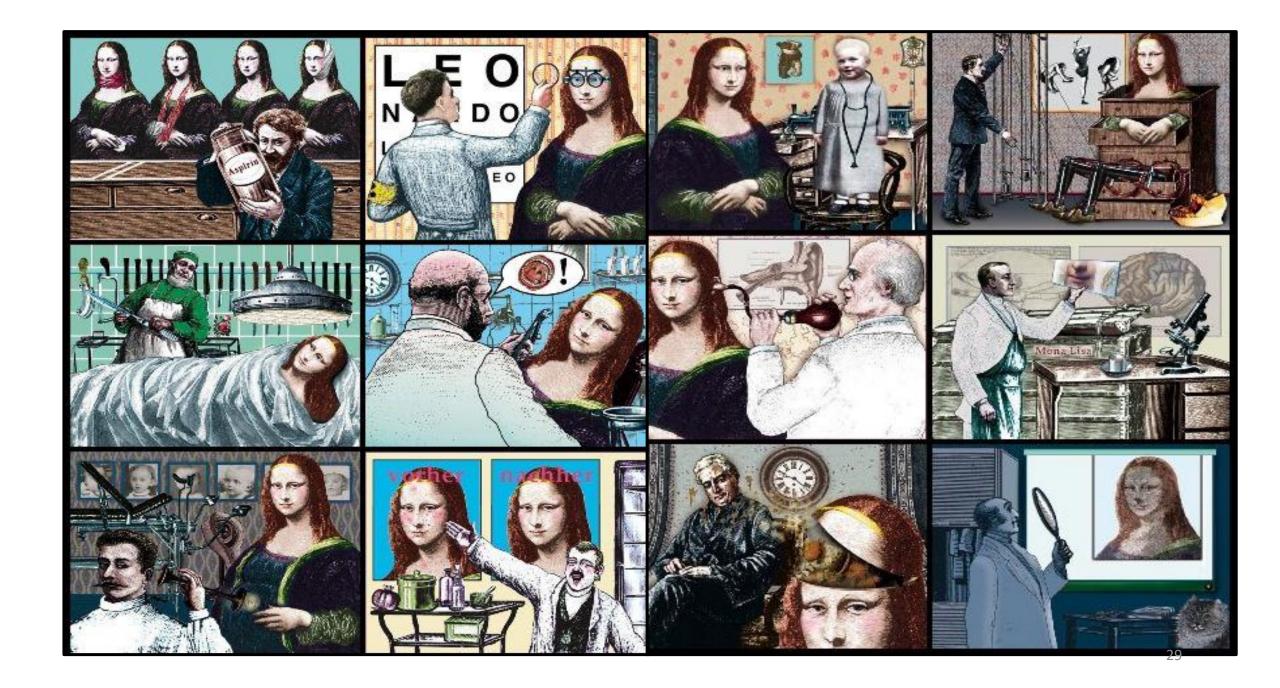
VALUES/BELIEFS:

Are there any spiritual/religious/cultural practices that may be affected by hospitalisation?





We adjust for the weather – We whakawātea







Can be hard to find the perfect attire

Relational, cultural, spiritual connecting, belonging are often made peripheral in a system that is focused on outcomes



Boundless

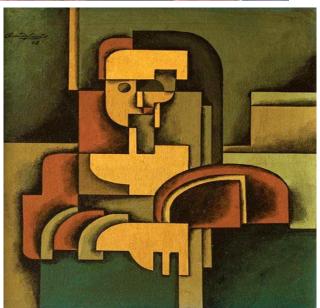
Creativity

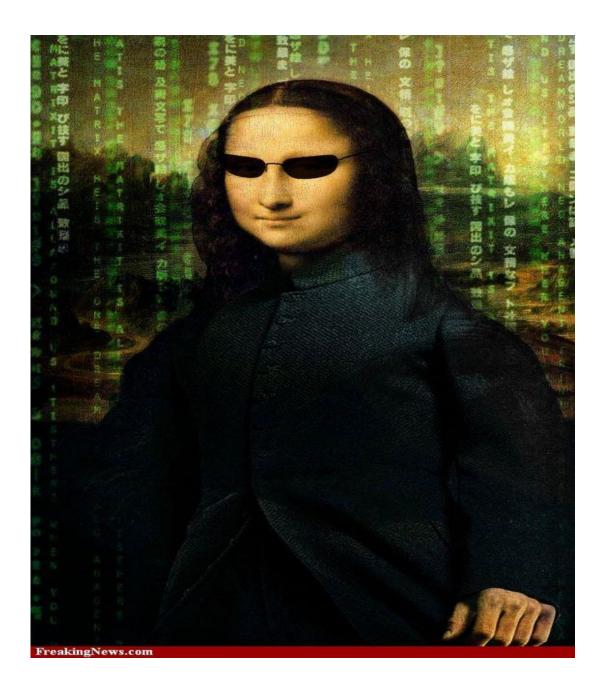








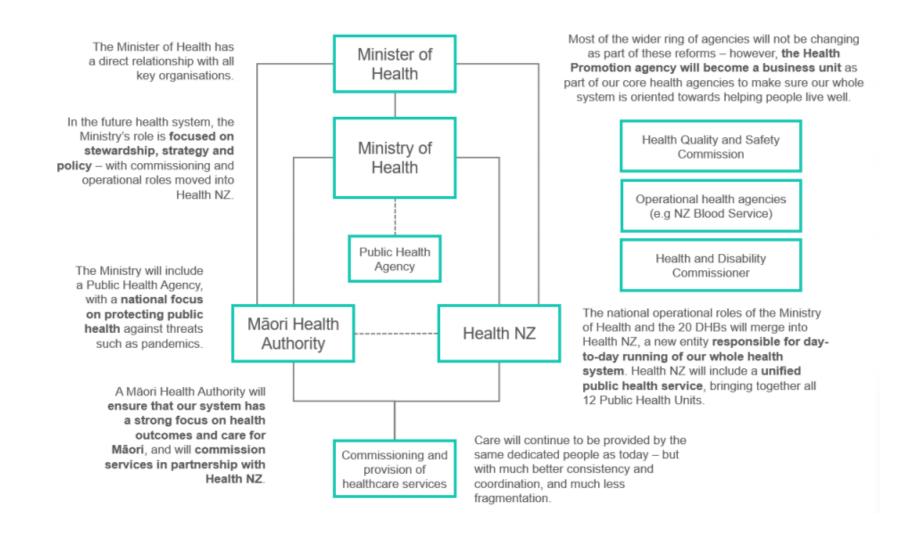




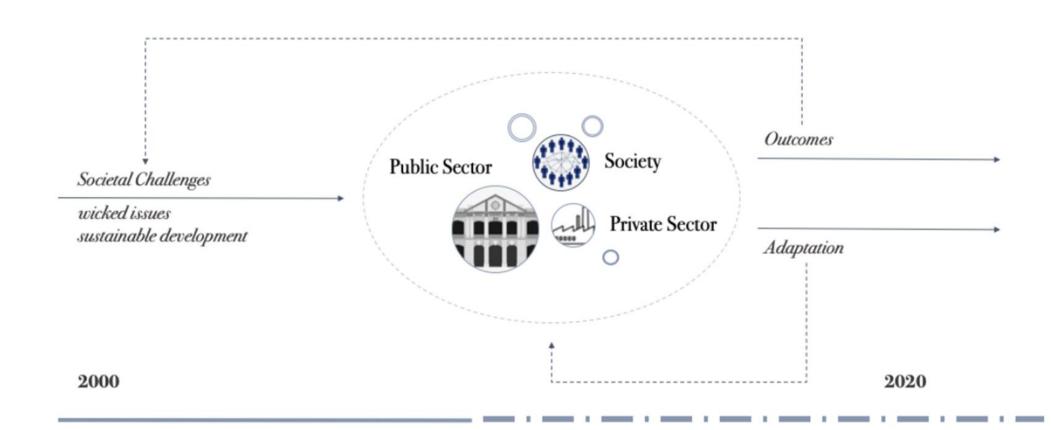
Like Xmas



Change is a Constant



New Ways of Working Together



We Are All Part of the System

















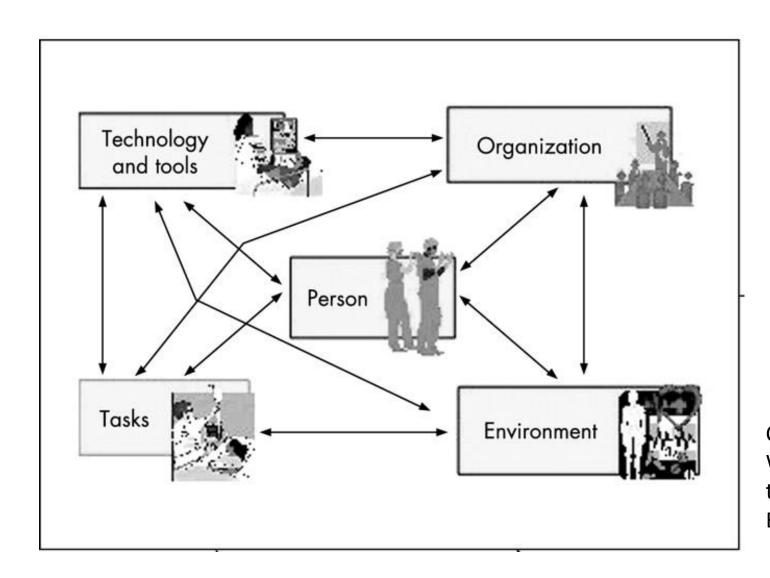






Public

Interactions and relationships



Carayon P, Schoofs Hundt A, Karsh B, et al Work system design for patient safety: the SEIPS model BMJ Quality & Safety 2006;15:i50-i58.

Understanding context and difference

What works,

for whom,

under what conditions,

to what extent,

and how



It's All About the Relationship

- Learning from each other
- Seeing value in the different viewpoints
- Working together on shared problems that matter
- Mutual support
- Enhancing mana through the relationship





"Kua tawhiti kē tō haerenga mai, kia kore e haere tonu. He tino nui rawa o ōu mahi, kia kore e mahi nui tonu. You have come too far, not to go further. You have done too much, not to do more."

Tā Hemi Henare (Ngāti Hine, 1989)