Getting to the Heart of Guideline Implementation – Social Marketing

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PHARMAC – Crown Agency

> Pharmaceutical Management Agency (PHARMAC) has a legislative function “to promote the responsible use of pharmaceuticals”

> We are concerned about what medicines are used and how much they are used

> Use social marketing techniques to influence volume and mix of subsidised pharmaceuticals

> Key focus on inequality
Evidence Based Access to and Optimal Use of Medicines

> Evidence-based approach - analysis of volume and mix of pharmaceuticals
> National reach across the health sector
> Focus on Maori responsiveness and inequality
> High value existing - One Heart Many Lives Programme
Guideline Implementation approach

> Identify the evidence practice gaps
> Identify the key stakeholders who need to be involved in the practice change
> Understand their barriers and enablers to adopting the change in practice
> Develop a spectrum of strategies/activities to reduce or mitigate the barriers
> Develop a comprehensive plan
> Evaluate and measure the activities and look for sustainability
Methods of Implementing Guidelines

Based on Van Woerkem (1990)

- **Involuntary**
  - Laws, regulations and obligations

- **Voluntary**
  - Focused on Extrinsic motivation
    - Financial Measures
    - Rewards, penalties and barriers
  - Influencing work setting
    - Structural measures
    - Resources, practical support Process redesign
  - Social influence
    - Peer reviews, audit Patient oriented interventions
  - Focused on Intrinsic motivation
    - Behaviour oriented
      - Feedback, Monitoring Reminders Decision support
    - Competence/ attitude oriented
      - Training, instruction, Consultation, encouragement

- Steering, controlling method
- Educational, facilitating method
**Examples of Implementation Activities**

<table>
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<th>&gt; Educational materials</th>
<th>&gt; Substitution of tasks</th>
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<td>&gt; Conferences, courses</td>
<td>&gt; Multi-professional collaboration</td>
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<td>&gt; Interactive group meetings</td>
<td>&gt; Mass media campaigns</td>
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<td>&gt; Feedback on performance</td>
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<td>&gt; Reminders</td>
<td>&gt; Patient mediated interventions</td>
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<td>&gt; Computerised decision support</td>
<td>&gt; Combined interventions</td>
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* Grol and Grimshaw 2003
Social Marketing & Community Action

> Consumers involved throughout the programme in all stages and phases

> A systematic method for creating a change in behaviour

> Marketing with a social imperative

> Focus on “what is in it for me”

> Uses the “P”s of commercial marketing
  - Product
  - Place
  - Promotion
  - Price
“He aha te mea nui o te Ao, maku e ki atu
He tangata – he tangata – he tangata”
What is the most important thing in the world, it is for me to say
It is people, it is people, it is people”
Discussion
Connecting evidence and people
Tell us your story

> Aha moment
> Was it evidence-based advice?
> What did you learn
> Is it scalable?
Case Study

Implementing cardiovascular guidelines in NZ
NZ Cardiovascular Guidelines 2009

> Key partners – Ministry of Health, Heart Foundation, NZ Guidelines Group (NZGG) and the Best Practice Advocacy Centre (BAPC) and consumers

> Mix of clinical, policy, strategic, social marketing and grass roots skills

> Design of an implementation plan that answers the 2:00 pm Thursday afternoon question
Average annualised IHD mortality count, ages 35 – 74, by sex, total population, 1956 – 2015

Total population age-standardised IHD mortality projections ages 35-74 yrs, 5 year periods 1956-2015
An increasing burden for Māori

For Māori, an actual increase in the absolute number of deaths is projected for males and a relatively stable number for females.
One Heart Many Lives

> A cardiovascular disease primary prevention programme
> Designed for Maori and Pacific Island men aged 35+
> Aims to raise both awareness of heart disease and cardiovascular risk
> Established as a result of research identifying marked variation in the prescribing of statins
> Provides local heart checks, and mentors, lifestyle coaches and advisers for people on the programme
> Activities have been focused in regions based on evidence
The Bro’s Andre, Tamati and Antz
National Roll-out of CVD guidelines

> Multifaceted Implementation

- Dissemination and promotion
- Patient mediated interventions
- Education
- Audit and feedback
- Evaluation
- Partnered with Government, primary care organisations, professional groups, NGOs and commercial partners
Dissemination and Promotion

> CVD Handbook combines all CV guidelines for primary care
> Distributed 20,000 to GPs, practice nurses, pharmacists, Maori and Pacific community workers, policy makers and prison nurses
> electronic versions (5,600 downloads) CD Roms, wall charts of the risk tables
> Webcast the launch of the guidelines
> Developed an interactive FAQ site
> Competitions to promote the guideline
Social Marketing Activities

- Caring 4 the Carers
- Role modelling service reconfiguration with nurse led care
- Community heart checks and nurse training
- Heart heroes – videos and presentations
- Community ownership of heart issues
**Educational Activities**

> National educational sessions at GP, nursing, pharmacy, Maori health events and conferences

> Educational sessions run by clinical opinion leaders and local heart heroes

> Clinicians offered Heart Checks (*Caring for the Carers*)

> Articles placed in local health journals

> Clinical facilitators trained to become local trainers

> An educational slide set developed for local educators

> An online quiz for GPs, nurses and pharmacists
Patient Mediated Interventions

> Providing free community based heart checks at sporting and community events eg markets, hui etc

> Local Heart Heroes and clinical staff on hand to talk to people

> Everyone went away with information about their personal risk and what they could do to modify their risk

> All the data collected was forwarded on to their regular GPs
Audit and Feedback

- Monitoring statin uptake and fasting lipid or glucose tests by location, age, ethnicity and gender
- Monitoring the PHO performance data for collection of CVD risk data
- Designing a national audit of primary care practices
- Surveying people having heart checks and those participating in educational activities
- Collecting data on access to the website and use of the online quiz
Comparison of approaches

- Dissemination
- Clinical education
- Key opinion leaders
- Social marketing
- Consumers at the heart of the planning and implementation
- Caring for the carers
- Demonstrating best practice
- Linking the implementation to a high value existing brand
Wrap Up

> Be bold, brave and humble
> Have **Passion**
> Integrity and authenticity are critical - Don’t overcook it!
> Try things - Don’t over analyse
> Expect nay-sayers
> Team approach – work with your target group throughout the process
> A constrained budget unleashes creativity
> Form relationships with other agencies
> Do it anyway
Workshop Challenge

NRT
Nicotine Replacement Therapy Project

- Describe the functions and benefits of these products
- Describe some of the barriers to their use
- How would you make this attractive to a high health need group in your country
Workgroups

> Who is the target audience
> Characteristics of the target audience
> Identify a hard to reach high deprivation low socio economic group vulnerable communities
> Describe the population group
> Define the characteristics