



This is your copy of the Integrated Healthcare Framework for Pharmacists and Doctors.

A community with fully integrated primary healthcare services is acknowledged as the ideal way to ensure a modern, innovative, high performing health system providing best health outcomes for our people.

Doctors, pharmacists and other health professionals, have services, ideas, initiatives they wish to combine, collaborate on and integrate clinically and administratively.

HOW DO WE DO THIS.

The Pharmaceutical Society of New Zealand (PSNZ) and the New Zealand Medical Association (NZMA) have developed a framework model as a resource for practitioners wanting to partner to do things differently. It describes what is needed to develop and implement new models of integrated, person-centred practice, in which pharmacists and doctors could work with each other and other Multi-Disciplinary Team members to ensure continuity of patient care

The resulting Integrated Health Care Framework draws upon recognised evidence and best practice to provide the structure for identifying and managing all necessary factors in developing new innovations or models of care so that these are person-centred, integrated, support collaborative practice, and can be successfully implemented to meet the desired outcomes

This Framework is designed to be used collaboratively by anyone interested in person-centred integrated care, including but not exclusive to pharmacists, doctors, nurses, health providers, practice managers, PHOs, planners and funders.

There are 6 main components of the Integrated Health Care Framework:

1. Person-Centred Integrated Care: the definition and enablers of person-centred care as the primary focus and perspective of any service or innovation.
2. Pharmacist-Doctor Collaboration: consideration of the level of pharmacist – doctor collaboration that may exist or may be required, and enablers to enhance this.
3. The Innovation: the definition, objectives, actions and outcomes related to the particular health innovation, service or model of care.

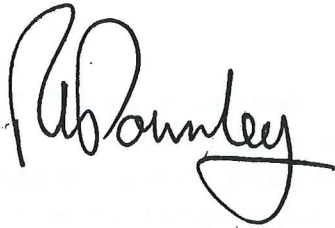
4. Influences: the factors (facilitators or barriers) being considered that influence each component within the Framework, strategies for accommodating or addressing these, and mechanisms of evaluation.

5. Contextual Domains: how 'influences' are defined and apply to the contextual domains of practice or influence i.e. levels of the health care system including individuals, organisations, local setting and the wider health system.

6. Implementation: how 'influences' are defined and apply to the stages of implementation from the early discovery and development of an innovation, to testing and sustainable delivery that maintains outcomes and benefits

Provided with this Framework is your Free Workbook Toolkit. Use this workbook to guide you through the process, write your group notes on the pages provided. The workbook is well referenced with resources for each component of the Integrated Health care Framework.

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