



## Releasing Time to Care in our hospitals

The reason we are all here is our patients, and if ward staff can spend more time looking after them - that is best for the patient and the hospital teams involved in their care.

That's what an innovative quality improvement programme - Releasing Time To Care (RT2C) is helping achieve.

It was originally developed by the NHS Institute for Innovation and Improvement, in England, where this patient-centred approach increased time spent with patients by up to 60 per cent.

Nurses and other care providers often spend valuable time away from the patient looking for items, searching for information about patients and dealing with numerous interruptions.

RT2C helps care teams change the way they work by identifying where they spend time on activities that do not add value for patients so they can increase the time they spend on direct patient care.

Canterbury DHB is using RT2C as a framework for improvement with a focus on preparing staff for the move into new/refurbished facilities at Burwood Hospital next year and Christchurch Hospital in 2018.

Christchurch Hospital, The Princess Margaret and Burwood hospitals are participating in the programme in a staged approach, with priority given to areas that are involved in transitioning to new facilities. We are planning to start in Ashburton next year. The aim is to increase the time health professionals spend with their patients and families from an average of 30 per cent to 50 per cent by June 2016.

Mary Gordon, Executive Director of Nursing, says RT2C is helping staff shape how they will work more efficiently in their new environments.

"Teams are using a systematic approach to review the way they work, so they can make the most of the new facilities. The process is owned and driven by staff, ensuring the changes that take place are more likely to be effective and sustained."

As well as supporting the transition to the new hospitals, Canterbury DHB aims to see a reduction in harm events such

as falls and medication incidents by 20 per cent by next June.

As part of the initiative, staff have developed an Activity Follow iPad App to observe how clinical staff work in the ward environment, and to track how much time is spent on direct patient care.

Richard Floyd from the Business Development Unit presented the iPad app at an Informatics conference in Sydney last Thursday, along with the Cortex App developed by Canterbury DHB.

At Burwood Hospital, Brain Injury Rehabilitation Service (BIRS) patients require intensive periods of therapy (contact time) but also need quality rest to aid rehabilitation. The BIRS healthcare team is now looking at how the scheduling of therapy affects the patient's day, and how to better identify the nature of non-contact time and to ensure it effectively contributes to a patient's overall rehabilitation.

The Burwood Spinal Unit will be next to consider the day from a patient's perspective, with independent spinal patients keen to participate in their own patient follows. The patient activity follow app will also be used to measure data on Admissions and Discharges at Christchurch Hospital.

This is great work which is saving staff time to spend more quality time with patients. It really is making it better for Canterbury people.

## The most important rebuild in Canterbury

If you didn't catch the article in last Friday's Press, it's well worth a read. While there's always a lot of focus on new buildings post-quake, rebuilding the wellbeing of our population will take some time.

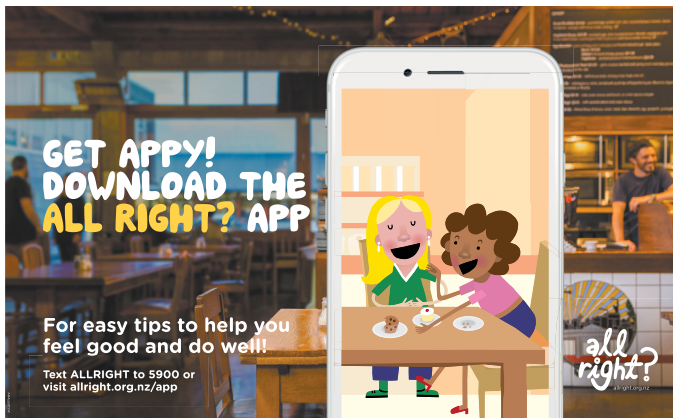
Billions of dollars, kilometres of pipelines, thousands of homes...however you measure it, the scale of Canterbury's rebuild is enormous. But the earthquakes and resulting stressors damaged something far more precious than

» Article continues on page 2

### In this issue

- |  |   |  |
|--|---|--|
| » Hospital Health Pathways live 25 November...page 3 | » Electronic medication reconciliation pilots in Older Person's Health...page 8 | » Tipu Ora graduation for Te Korowai Atawhai staff...page 10 |
| » Canterbury Grand Round...page 6                    | » Transition from The Princess Margaret Hospital...page 9                       | » Telehealth connecting Kaikoura...page 13                   |
| » Progress towards transformation...page 7           |   | » Be present this Christmas...page 14                        |

» Article continued from page 1



## WellNow - coming to a letter box near you!

Every day I get to meet people from across the health sector who are doing remarkable things. While the huge diversity of the work can be a little overwhelming at times, what brings it altogether is the passion we share for keeping our communities healthy and well.

A great illustration of the diversity of our work, and the huge impact it's having, can be seen in the summer edition of WellNow, currently being delivered to letterboxes throughout Canterbury. Highlights include:

- » Patient-centred care - Find out how Travis Medical Centre has changed how they're delivering care by putting the patient at the centre of everything they do. The approach is led to decreased waiting times, increased the time available for consultations, improved patient satisfaction levels, and has even decreased ED presentation rates amongst their patients.
- » Maternal health – baby Mason and his parents light up the cover of WellNow. Mason is the first baby to be born at the new Rangiora Maternity Unit. We're investing more and more in primary maternity units, as for most healthy women they provide the best possible start in life for their babies.
- » Māori health – The significant disparities between Māori and non-Māori in relation to health outcomes means that improving Māori health, and reducing health disparities, are priorities for our health system. There are a couple of great Māori health initiatives highlighted in WellNow – a story on how Kaupapa Māori health provider He Waka Tapu is using mobile technology to support the health needs of their clients; and another story on how Community and Public Health are working alongside the Rāpaki community to create a healthier environment.
- » It's all happening – There is so much facility redevelopment work going on across our region and WellNow plays an important role in keeping our community up-to-date. There's an update on what's happening at Burwood, the Acute Services Building at Christchurch Hospital, the recently opened facility at Kaikoura, and the Rangiora Health Hub

Canterbury's infrastructure, land and buildings — they also had a major impact on our people.

That impact is as widespread and diverse as the damage to our properties. Some of us experienced comparatively minor issues and, five years on, the cracks are healing and we are excited about our future. But for others of us, the damage is only just being discovered and there's no quick fix.

You can read the full story [here](#)

(which is being officially opened this week by the Minister of Health).

- » Wellbeing – Canterbury's been through a lot over the past five years and all of us need to take care of ourselves. There are stories on the latest research from All Right? which has shown that Canterbury parents have had it tougher than most, our increased focus on supporting schools to meet the growing mental health needs of their students', and opportunities for people to rediscover Christchurch's red zone.

There are a lot more stories packed into WellNow and I encourage you to flick through a copy. You can't help but feel proud (and be a little awed) by the great work going on in our hospitals and communities.

If you can't wait to get your own copy you can [read it on our website](#).

Have a great week,

David Meates

David Meates  
CEO Canterbury District Health Board



# REMINDER - Hospital Health Pathways – live from Wednesday 25 November



**HealthPathways**

online from  
Wednesday 25 November

[Read More](#)

Hospital Health Pathways (HHP) goes live on Wednesday this week.

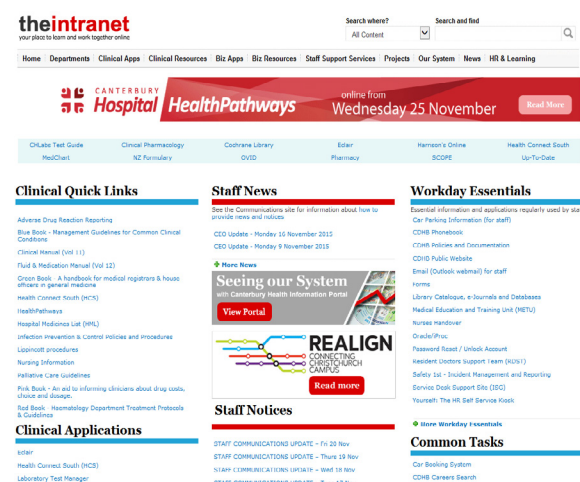
It can be accessed via the banner on the intranet, and will eventually replace The Blue Book, which provides clinical and process guidance for patient management in Canterbury DHB hospitals.

For the first few months, most of HHP will be made up of content taken straight from the Blue Book. Over the next 12 months however, that balance will change. We will be progressively working through all of the content and it will be reviewed and refreshed or totally re-written if that's what is needed.

After a 12 month transition period, by 1 December 2016 our goal is for all of the content to be updated and we will be switching over to solely using Hospital Health Pathways.

New pathways are being developed by relevant groups of clinicians and these groups will change depending on the pathway. In addition there is a team of clinical editors who oversee each pathway.

More information on Hospital Health Pathways, including who's involved, can be found [here](#).



Above: Hospital Health Pathways can be accessed from the intranet homepage.

## Update from the Christchurch Children's Team

Significant changes are underway that will make a fundamental difference to how New Zealanders protect and support vulnerable children. Through the Vulnerable Children Act (2014) and the Children's Action Plan, the Government has made sweeping changes to how we protect vulnerable children so that they thrive, achieve and belong. Through the Christchurch Children's Team, health is working with other social sectors to support early identification and preventative action with vulnerable children and their families/whānau.

Momentum for the Christchurch Children's Team is rapidly building towards a launch next month. To date, 18 Children's Team Panel members and 63 Lead Professionals have completed training and the children's workforce is completing the safety checking necessary to ensure we can all contribute to supporting Christchurch's vulnerable children.



Read the latest [newsletter](#) from the Christchurch Children's Team.

For more information, visit  
[www.ccn.health.nz/ChildrensActionPlan](http://www.ccn.health.nz/ChildrensActionPlan)



## Facilities Fast Facts

### Burwood

Dan Coward, General Manager of Older Persons' Health, is presenting an update on progress to staff at Burwood today, and to staff at The Princess Margaret Hospital on Wednesday 25 November, including the latest on migration planning. At this stage, a broad migration macro-plan is being drawn up, but exact dates for commissioning new areas or moving staff to the new facilities are not yet known.

### Christchurch

Fletcher Construction workers are currently tidying up at the Acute Services Building site, where their foundation construction work is almost complete. The complex sequence of concrete pours came in on time and exactly to plan. Well done to all involved!

The next stage of the build, including the erection of steel framing, is expected to begin in the New Year.

Elsewhere on campus, the first floor slab has been poured for the electricity substation building on St Asaph Street, the blockwork is being done for the first floor, and the roof trusses are being added to the single-storey part of the building (see photo, looking east).



### Changes to the Park & Ride service

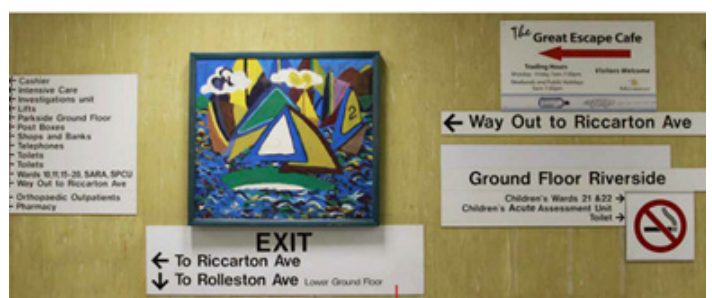
A reminder that the CDHB's Park & Ride car park is moving from the Metro/Brewery site. It will relocate to Deans Avenue, on land formerly occupied by the Sale Yards, from 1 December 2015. Please note that the shuttle buses are not for staff – they are for patients and visitors to hospital.

More information, including FAQs, is available on the [intranet](#), and on the Canterbury DHB [website](#).



### Wayfinding and signage

The high-level wayfinding and signage work for Burwood and Christchurch is also nearing completion. As you can see from the photo, current CDHB signage can be very confusing. One of the most important aspects of the new wayfinding is to simplify decision making at key points, rather than providing too much information and other distractions.





## Bouquets

### Ward 12, Christchurch Hospital

Wonderful care, very good meals – all good.

### Acute Medical Assessment Unit (AMAU), Christchurch Hospital

Admitted to Emergency Department... treated with dignity and respect and well cared for. Same when admitted to ward. Everyone was helpful and careful and I would like to thank everyone for their care.

### Day Surgery Unit, Christchurch Women's Hospital

What a wonderful team here who looked after me so well during my recent procedure. As a working mum it was so nice to have someone looking after me for a change. Special thank you to Carmel who kept a close eye on me from admittance to home time. I feel very privileged to be able to access this high quality of health care.

### Caught being fantastic – doing the right thing

Grateful thanks to Mike Gluyas, hospital aide at The Princess

Margaret Hospital who found a wallet on one of the tables in the café. He went to great lengths to find the very thankful owner. Thanks Mike – you're a star!

### Ward 24, Christchurch Hospital

Lovely nurses caring for my mother. Awesome work. Also I'd like to add very awesome team in the Intensive Care Unit. Wouldn't have been able to get my mother better without them. Good stuff.

### Ward 23, Christchurch Hospital

Thanks for your wonderful/ caring ways for my mother-in-law. We know she's in good hands. Thank you to the security guard who walked me to the carpark last night after the shuttle service was finished. I really appreciated it. God Bless.

### Ward 23, Christchurch Hospital

I was picked up by ambulance in so much pain. The ambulance drivers were really great. It was the start of so much attention, every pain was analysed. Nurses, male nurses, porters all went out of their way to

make me feel more comfortable. I have complimented Christchurch Hospital before but this time it really was unbelievable.

### Emergency Department, Christchurch Hospital

I arrived at the Emergency Department on 9 Nov, I was taken care of straight away, the staff including the volunteers, everyone was friendly and attentive. Couldn't have been better. THANKYOU.

### Cleaning Services, Christchurch Hospital

The cleaning staff are always really helpful and swift to respond to emergencies. We had a poorly patient in the corridor outside our office who was unfortunately very unwell. The cleaning staff responded within minutes to clean up. Nothing ever seem to be too much trouble for them every time we've contacted them for help. Thank you!

## Tell Us About Your Commute from Waimakariri to Christchurch



Do you commute from Waimakariri District into Christchurch? Then take this chance to have your say. Waimakariri District Council and the New Zealand Transport Agency want to find out what commuters think about their travel and how they can help make your commute easier.

[You can do the survey here](#)



## World COPD Day

The Canterbury Clinical Network celebrated World COPD Day on Tuesday 17 November with a shared lunch for those involved in the many support programmes available for people with Chronic Obstructive Pulmonary Disease (COPD) in Canterbury.

Attendees and health professionals came together from Respiratory Relief classes, other ongoing exercise groups and the Canterbury Community Pulmonary Rehabilitation Programme to raise awareness of this under-diagnosed condition. COPD is responsible for thousands of this country's hospital admissions every year.

The Canterbury Pulmonary Rehabilitation Consumer Group chair, Pauline Mohi, and members helped organise and run the event. Community Pulmonary Rehabilitation Programmes are designed to help patients with COPD manage their symptoms, which include breathlessness, coughing and wheezing. The programmes run for eight weeks and provide a safe and supportive environment for people with COPD to learn breathing, diet, exercise and day-to-day living techniques.

For more information on support available to people in Canterbury with respiratory conditions like COPD, visit [www.ccn.health.nz/IntegratedRespiratoryServices](http://www.ccn.health.nz/IntegratedRespiratoryServices)



Above: Members of the Pulmonary Rehabilitation Consumer Group: From left, Noel Butler, Derrick Ingold and Pauline Mohi join members of the Community Respiratory Services team Louise Weatherall, Jacqui Morriss and David Chen at the shared lunch to celebrate World COPD Day in Shirley.

## Canterbury Grand Round

Friday, 27 November 2015 – 12.15- to 1.15pm, with lunch from 11.45am.

Venue: Rolleston Lecture Theatre

Speaker one : Maggie Meeks, Course Convener Quality and Patient Safety Course.

### Advanced Learning in Medicine

My talk will not be quite as exciting as Sex Bugs and Rock and Roll! However both talks have at their core communication styles. I want to talk about professional communication and the place of deliberate practice with a common language.

Speaker two: Ed Coughlan, Sexual Health and Jen Desrosiers, Sean Macpherson, Ngaere Dawson

"Sex, Bugs and Rock 'n Roll"

An innovation by Public Health, University of Otago.

Chair: Anthony Butler

Video Conference set up in:

- » Burwood Meeting Room
- » Meeting Room, Level 1 PMH
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton

All staff and students welcome

Talks (with speaker approval) will be available in two weeks on [the intranet](#).

Next Clinical Meeting – Friday 4 December 2015

(Rolleston Lecture Theatre)

Convenor: Dr RL Spearing.

[ruth.spearing@cdhb.health.nz](mailto:ruth.spearing@cdhb.health.nz)

# Progress towards transformation

The Canterbury Clinical Network has released its first report on progress for the 2015/16 year, showing positive advancements in many areas of focus for our increasingly integrated health system.

Promising outcomes reported include reduced demand for rest home beds and positive results for ED waiting times as a result of extensive efforts to keep people well at home. The report shows that people in Canterbury continue to be supported to access many services in the community that were previously only available in hospital. Professionals across our health system continue to take steps to find new and better ways of working together and support people to stay healthy and well in their own homes, including through the Integrated Family Health Services and Collaborative Care Programmes.

Rurally, the Kaikoura community has fed back on a new model for providing the people and visitors of Kaikoura access to the most appropriate and sustainable healthcare. People in Hurunui and Ashburton will also benefit from work on similar locally-led transformation to health services in their communities that will continue throughout the year.

CCN Programme Manager, Ruth Robson said the report demonstrates that there is continued positive progress towards the strategic goals of the Canterbury Health System.

View the summary report at: [ccn.health.nz/Resources/QuarterlyProgressReports.aspx](http://ccn.health.nz/Resources/QuarterlyProgressReports.aspx)



**7654**

referrals for urgent packages of care accepted by the **Acute Demand Management Service**

TARGET: >25000 pa



**513**

new referrals (+65) to the **Community Based Falls Prevention Service**

TARGET: >1200 pa



**541**

subsidised **skin lesion excisions** in the community without the need for a hospital visit

TARGET: 2720 pa



**88**

**Pipelle biopsies** from GPs in the community without the need for a hospital visit

TARGET: 405 pa



**96**

people with **Type 2 diabetes** started **insulin** with the support of their doctor

TARGET: 433 pa



**438**

subsidised **spirometry tests** in the community without the need for a hospital visit

TARGET: 1814 pa



**116**

people were **newly diagnosed** with **Type 2 diabetes** in the community

TARGET: 563pa



**805**

**Steroid injections** through general practice without having to wait for a hospital orthopaedic appointment

TARGET: 3265 pa

## Two new Allied Health, Scientific and Technical Research Committee appointments

A Physiotherapist and Laboratory Scientist have been appointed to the Canterbury DHB's Research Committee, chaired by Mark Smith.

Physiotherapist Joanne Nunnerley and Laboratory Scientist, Malina Storer, have been appointed to the Allied Health section of the committee from a group of highly qualified applicants.

Executive Director, Allied Health, Stella Ward said she received such outstanding applications she asked the Research Committee to consider two new members, rather than one – a request which was accepted.

She was so impressed with the degree and calibre of interest she had decided to set up an Allied Health Research Network. This would be chaired by Change Champion, Allied Health, Sandy Clemett and Joanne and Malina would also be members.

"With the calibre of people applying we have the opportunity to put together an Allied Health Research Network and think about how we better support and profile research within Allied Health."

Sandy would set the network up next year "and I look forward to supporting more excellent clinical allied health researchers", Stella says.

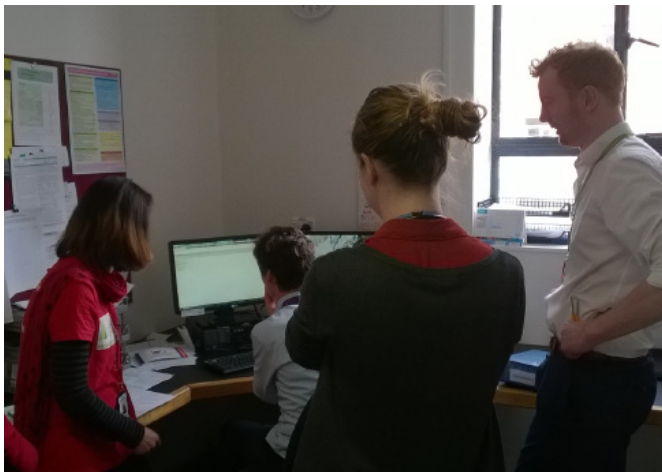


# Electronic Medication Reconciliation Pilots in Older Person's Health

During October, the writing was on the wall for another paper-based process, as part of Canterbury DHB's move towards a paper-lite system.

Thanks to another collaboration between Canterbury District Health Board and strategic partners, Orion Health, the pilot phase of Electronic Medication Reconciliation (MedRec) is underway in Ward 1b at Older Person's Health & Rehab service.

MedRec creates an accurate reconciled list of a patient's medication which takes into account medications prescribed in the community, self-purchased over-the-counter, herbal remedies and medications prescribed in a hospital setting. The information sits under 'clinical notes' in Health Connect South, and replaces the 'green form' (paper-based reconciliation).



MedRec is one of five components which fall under the eMeds programme of work. The reconciled medication information is used to inform the Discharge Summary which is sent to the patient's general practitioner, and is also accessible by the community pharmacist. Stella Ward, Canterbury's Executive Health Innovation Lead, says MedRec is set to be a major leap forward for patient safety.

"MedRec has the potential to provide significant benefits to the patient, especially in terms of medication safety, by providing the whole team involved in a patient's care with an accurate list of preadmission and current medications. This knowledge leads to better, safer care by informing critical clinical decisions at critical times – as a patient is admitted, if the patient is transferred and when they are discharged from hospital," Stella says.

"What's good for patients is also good for clinicians who have patient safety as their number one priority. They now have reliable and accurate information to support better care

decisions. Not having to chase and decipher hastily written paper records also makes the most of everyone's time and significantly reduces the possibility of errors being made."

MedRec has received some great feedback from the staff that have used the system so far;

*"It's a different way of working."*

*"It's good being able to take the laptop to the patient's bedside to talk to the patient about their medicines."*

*"It's intuitive."*

*"(eMR Discharge Summary) takes away the fatigue associated with prescribing multiple medications allowing me to be more focussed on minimising medication errors."*

Over the next few weeks MedRec will be securely embedded in OPH specialist services to ensure everything continues to work as it should, before being rolled out to other wards and departments.

"I am confident, that with its growing clinical support, MedRec will be welcomed by our wider health system soon enough as yet another huge win for patients and clinicians at the expense of paper records," says Stella.





# It's a big job – record your part



The transition for staff from The Princess Margaret Hospital is going to be a big job. As we move from our Cashmere base to fields further away, we'd like to record the move and we'd like your help.

The plan is to produce a book (available online primarily but able to be printed) which will document the current teams working within Older Person's Health & Rehabilitation, Corporate and Mental Health Services on site, talk about what they do, where they will be moving to, who the key people in the move are and feature photographs of the process including key milestones taken by the teams themselves. A little bit of TPMH and OPH&R history will also be included.

There's a number of ways you can be involved:

1 Put your name forward as a team contact.

This means you would represent your team in a group created to work on this project. You will need to share and take back ideas, oversee the photo project including the book and make suggestions for the final look of the book.

2 Provide text for the book – current roles, historical info etc.

3 Take photos for the book

If you would like to be involved please email [Vicky.heward@cdhb.health.nz](mailto:Vicky.heward@cdhb.health.nz) providing details of your current role/ team, location and which of the three tasks above you would like to be involved in.

Thank you to those who have already indicated their interest. We're still looking for more people especially from Older Person's Health and Rehabilitation.



## November South Island Alliance Newsletter out now!

The November issue of the [South Island Alliance Newsletter](#) is now available online. Highlights in this month's issue include:

- » News about the growing success of Lippincott Online Procedures
- » A new report on determinants of health for South Island children
- » Information Systems workplan updates
- » ISSLA appearance at the Health informatics NZ conference (HiNZ)
- » South Island interRAI data review underway

## Christmas Card orders

Here's the printed Corporate Christmas Card on offer this year – please place your order via [communications@cdhb.health.nz](mailto:communications@cdhb.health.nz).

The electronic card suitable for emailing is currently being created. We'll keep you updated via the CEO Update and global emails.



# Tipu Ora Graduation for Te Korowai Atawhai staff

**Te Korowai Atawhai staff successfully completed Hauora Māori education programmes through Tipu Ora last month.**

The graduation ceremony took place on October 23 in the Tipuna Whare /ancestral house of Whatumanawa Māoritanga o Rehua. Elsie Roder (Taua) provided the karanga/reply to the first call, on behalf of Whānau and Manuhiri who attended.

Kaye Johnston, Service Manager for Te Korowai Atawhai witnessed te reo me ona tikanga Māori /the language and Māori customs through the karanga/the call, whaikorero/oratory by Dean Rangihuna and Taipari Mahanga, karakia/incantation, waiata/song and kata kata/laughter.

Vi Anderson, a past Diploma Graduate, was invited by Tipu Ora to act as Master of Ceremonies, which she executed in a very professional and witty manner.

Congratulations to the following Te Korowai Atawhai staff who gained their Certificate in Hauora Māori:

- » Dianne Patuwai
- » Lesley Kelly
- » Maria Rusbridge
- » Justine Riwai

Congratulations also to those who passed their Diploma in Hauora Māori:

- » Dean Rangihuna
- » Jill Sunnex
- » Holly McLaren
- » Daryl Beattie

Whānau Tautoko /Family Support included John Kavermann for Dean, Wiki Crofts and Doug Wells for Maria and Dennis O'Connell for Justine.

Te Korowai Atawhai has forwarded Nga mihi/ acknowledgements to Specialist Mental Health Service leadership for their tautoko/support in approving the applications and the Pukenga Atawhai who provided cover during matauranga Māori/their time of learning.



Pictured at the recent Tipu Ora graduation ceremony (L to R): Elsie Roder (Taua), Kaye Johnston (Service Manager), John Kavermann (Coordinating Consumer Advisor), Dean Rangihuna (Māori Consumer Advisor), Daryl Beattie (Pukenga Atawhai), Lesley Kelly (Pukenga Atawhai), Justine Riwai (Pukenga Atawhai) and Vi Anderson (Pukenga Atawhai and MC)



HEALTH QUALITY & SAFETY  
COMMISSION NEW ZEALAND  
*Kupu Taurangi Hauora o Aotearoa*

## E-UPDATE

Your fortnightly update from the Health Quality & Safety Commission



**Issue 46 - 26 October–15 November 2015**  
[Read Issue 46 online](#)



# CHOOSE a career with us...

## Prevocational Educational Supervisors

With over 450 Resident Doctors employed at the CDHB we aim to be the centre of excellence in medical education, training and supervision.

With changing models and a new structure of supervision we now have the exciting opportunity for you to lead and nurture our future senior medical workforce. We have two fixed term roles of 0.1FTE for Prevocational Educational Supervisors to support our PGY1 & 2 doctors.

This role is about education, training, leadership, mentoring and pastoral support. You will play an integral part in creating a supportive and motivated environment which results in the Canterbury District Health Board being the top of all Resident Medical Officers wish lists as a centre for training.

For further information on this role please feel free to contact Liz Hill, Recruitment Specialist – Medical/Dental on +64 3 337 7954 +64 3 337 7954 or email [liz.hill@cdhb.health.nz](mailto:liz.hill@cdhb.health.nz)

## Regional Implementation Manager - Christchurch

healthAlliance provides a national procurement service for the District Health Boards (DHBs) across New Zealand.

If you're looking to add a real sense of purpose to your career, put your energy towards a great cause at healthAlliance. Managing more than \$1.3 billion of spend is significant anywhere, but it takes on extra significance when you know it's directly contributing to better healthcare in our communities. Procurement here genuinely makes a tangible difference - we're ensuring every one of the 1.2 billion dollars goes as far as possible. And as part of our supportive team, we'll make sure your career development goes as far as possible too.

You will be responsible for providing support at the local DHB level to ensure all stakeholders are working together to achieve healthAlliance goals.

For more information please email [vacancies@healthalliance.co.nz](mailto:vacancies@healthalliance.co.nz)

Applications close 24 November 2015



## Children donate toys to Christchurch Hospital children's Activity Room



Children from Polkadots Preschool in Culverden donated toys to Christchurch Hospital Children's Activity Room bought with money they raised themselves.

The children held a stall at the Culverden Christmas Fete, selling items they made including cards made with Christmas pictures they painted.

Left: From left, Activity Room Team Member, Rebecca Pilbrough, Polkadots Teacher, Gemma and her son



## One minute with... **Stacey McEwen (nee Hosking), Revenue Officer, Christchurch Campus**

### What does your job involve?

My job as an Eligibility Specialist for Canterbury DHB involves a lot of contact with overseas patients and their families. I am required to ensure that all chargeable patients are invoiced for services provided. I deal with the Immigration Department, insurance companies and a wide range of staff members and run daily reports to monitor and confirm all targets are met by our finance team. New challenges arise daily so it's always interesting. We are currently also focusing on staff education which in turn will make our processes easier.

### Why did you choose to work in this field?

I started with the Canterbury DHB back in 1991 in the mailroom at The Princess Margaret Hospital then moved to Accounts when user part charges were brought in and I have been in Accounts Receivable ever since. The role has evolved over time, now focusing more on overseas chargeables and debt follow up. The role is interesting and variable day to day. We deal with people from all walks of life and finding solutions for each family can be a challenge yet also very rewarding.

### What are the challenging bits?

Keeping emotions separate from work. The role deals with patients when they are vulnerable and unwell. It can be a difficult topic, but discussing the matter of money with families has to be addressed.

### Who do you admire in a professional capacity at work and why?

Gerard Thomas. He has been with CDHB many more years than I have. He was my manager for the most part of my career at Christchurch Hospital. I admire the way he shows unwavering dedication to this job. And after the expanse of time working at Christchurch Hospital he has become such a wealth of knowledge, second to none.

### What do Canterbury DHB values (Care and respect for others, Integrity in all we do and Responsibility for outcomes) mean to you in your role?

I guess the Canterbury DHB values for me, go without saying, as in my role I am working with other nationalities, cultures and religions. I pride myself on treating all clients with the respect and the dignity they deserve. The majority of patients we deal with are here acutely so they need all the support we can offer in their unexpected situations.

### The last book I read was...

The Girl in the Red Coat, by Kate Hamer. This wasn't a bad book but it was my 12 year old daughter who wanted to read it so I thought I'd read it first to be sure it was suitable for her. However Jody Picoult is my favourite author so I am just waiting for her latest novel "Living Colour" to be launched. I can't wait.

### If I could be anywhere in the world right now it would be...

Somewhere nearby like Fiji with my family, would be fantastic. Although sometime down the track I'd like to venture a little further, just as soon as I conquer my fear of flying.

### My ultimate Sunday would be...

A nice cooked breakfast, on a beautiful sunny day spending the morning pottering around our garden finishing off our landscaping, followed by a barbecue with friends and family.

### One food I really dislike is...

Jelly. It is just a weird consistency that I can live without.

### My favourite music is....

A little bit of Ronan Keating or Nickleback in the car suits me. My workmate, Antoanette and I, are listening to a little bit of country in the office right now...but don't tell anyone.



Stacey McEwen

If you would like to take part in this column or would like to nominate someone please contact

[Naomi.Gilling@cdhb.health.nz](mailto:Naomi.Gilling@cdhb.health.nz)



# Telehealth connecting Kaikoura

Kaikoura residents can now access specialist care closer to home thanks to telemedicine, which is available at the new Kaikoura Integrated Family Health Centre.

The connection between patients and their Christchurch based clinician can now be made using the high quality videoconference unit in the IFHC.

Dr John Garrett, Telehealth Clinical Leader, says Christchurch based clinicians are being encouraged to use the technology for consults with their Kaikoura patients, where clinically appropriate.

"Between them about 700 patients from in or around Kaikoura attend 3000 scheduled follow up appointments in Christchurch each year. Many more are transferred acutely after being stabilized in Kaikoura," Dr Garrett says.

"It is important for all health professionals in Canterbury to consider whether there are opportunities for them to include telemedicine in their practice."

Dr Garrett says the Canterbury DHB aims to save about 140 people a year from having to make the trip from Kaikoura to Christchurch for an outpatient appointment.

Some of the services already using videoconferencing to look after West Coast patients include Paediatrics, Oncology, Plastic Surgery, Cardiology, Intensive Care Unit, Neonatal Intensive Care Unit, Mental Health, and the Diabetes Service, but there is plenty of room for more.

Andrea Judd, Kaikoura GP, says having access to telehealth is making a difference for the entire community.

"Particularly for our frail elderly patients, who may not have been able to drive to Christchurch themselves, and would

otherwise have had to organise transport with family or friends. This of course can be challenging and distressing for some," Andrea says.

"Having access to telehealth means the patient can receive care right here – saving both their time and any stress of having to organise transport."

Any Christchurch Clinician or Service Manager who wants to talk more about using telemedicine should call John Garrett on 0272629886, or Nicole Redfern Canterbury DHB Telehealth Facilitator on 80520. The NZ Telehealth Resource Centre [www.nztrc.org.nz](http://www.nztrc.org.nz) is also a great source of information.



Above: Sam Franklin, Sobin P-Baby, Deb Posa, Dr Chris Henry, Moses Kahu and Lisa Kahu.

## Department of Psychological Medicine, University of Otago, Christchurch & Specialist Mental Health Service, Canterbury DHB Tuesday Clinical Meeting

Tuesday 24 November 2015, 12:30 pm – 1:30 pm

Venue: Beaven Lecture Theatre, 7th Floor, School of Medicine Building

Title: Opioid Substitution Treatment: Past, present and future

Abstract: Opioid substitution treatment is an effective treatment for opioid dependence. However, the nature and quality of this long-term treatment has been significantly influenced by socio-political and service related factors while the views of people receiving treatment have, in general, not been listened to.

This presentation will provide a brief overview of treatment trends and focus on the increasing call for a greater person centred, recovery and wellbeing approach –inclusive of local research findings.

Presenter: Dr.Daryle Deering

Special notes:

- » These meetings will be held on a weekly basis (except during school holidays).
- » A light lunch will be served at the School of Medicine venue, 7th Floor, from 12 noon.
- » Psychiatrists can claim CME for attending these meetings.
- » The sessions will be broadcast to the following sites:  
For TPMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at TPMH.  
For Hillmorton attendees the venue is the Lincoln Lounge, Admin Building, Hillmorton Hospital
- » The dial in address is: Psych Med Grand Round.
- » If you have difficulties dialling in please call 0800 835 363 to be connected.



# BE PRESENT THIS CHRISTMAS

TAKING CARE OF YOUR BODY & MIND



## *The Staff Wellbeing Programme presents...*

**Dr Caroline Bell** Is a consultant psychiatrist at the Anxiety Disorders Service with a particular interest in managing stress.

**Ciaran Fox** Is the mental health promotion strategist for the All Right? campaign. He is a programme design and delivery specialist for the Mental Health Foundation.

### TOPIC

An opportunity to learn about the importance of taking care of ourselves – particularly during the holiday season. Caroline and Ciaran will talk for 20 minutes each followed by a further 20 minutes of general discussion.

Location	Date	Time
CHCH Women's Hospital Lower Ground Floor Parent Education Room	Wednesday 16 December	1200 – 1300

This presentation is restricted to 45 participants. Attendance is free of charge and registrations will be accepted on a first come, first served basis. Click [here](#) to register.

To find out more contact Andy Hearn [andy.hearn@cdhb.health.nz](mailto:andy.hearn@cdhb.health.nz) or 027 218 4924



## In brief



### Recruiting over the holiday period?

We are rapidly approaching the festive season and want to make your job as easy and stress free as possible so you can enjoy the summer sun and Christmas celebrations.

The Recruitment Team will have minimal staff working from December the 24th – 7th of January. Contact us as soon as possible to plan for your upcoming recruitment needs, to avoid unnecessary delays over the holiday season.

Advertising over the Christmas and New Year period is not the most fruitful time to attract all the candidates you want. December is an ideal time to tie up loose ends on current recruitment processes and to plan any new advertising to start in the New Year when people are putting their resolutions into action and looking for a new challenge!

- Do you have any vacancies you want advertised that you haven't already told us about? Contact your Recruitment Specialist immediately so we can ensure the recruitment process is completed before the Christmas break.
- If you are anticipating a vacancy but don't have approval to appoint yet, please get in contact with us so we can meet with you to complete a job brief. Perhaps you know of someone planning to take a sabbatical as a new year's resolution or perhaps that team members' maternity leave is creeping round faster than you thought. Tell us about the role now and we can have an advert drafted and all ready to go early next year.
- Are you taking leave over this time? Let us know so we can arrange closing dates, interviews etc around these dates to avoid long periods of waiting for the candidates.

We hope you've had an amazing 2015 and look forward to working with you all in 2016 to recruit the best new additions to the CDHB family!

The Recruitment Team

## Bake Sale

Friday, 4 December  
Christchurch Hospital Foyer, Ground Floor

10am to 12pm



Please  
Support

Canterbury  
District Health Board  
Youth Advisory Council

All proceeds go to the  
Youth Advisory Council for  
Welcome Books in the wards

Thank you!

Come early to avoid missing out...  
There will be a range of home made  
delights both savoury and sweet!

## CANTABRIANS TAKE A HI-VIS BREAK STAND TOGETHER AGAINST VIOLENCE

CATHEDRAL SQUARE, WEDNESDAY 25 NOVEMBER 2015, 12:30PM - 1:30PM  
Partnership by Canterbury District Health Board, Canterbury Family Violence Collaboration, Canterbury Police, Christchurch City Council, Ministry of Justice and Ministry of Social Development



Alzheimers *Canterbury*

## Community Education Seminar

December  
(Morning)

### Dementia caring and stress

*Dementia can be emotionally, mentally and physically stressful for all concerned. Looking after yourself is very important.*

Libby Gawith, Community Psychologist and CPIT lecturer, will talk about:

- How to recognise symptoms and sources of your stress
- Caring roles and stress
- Health effects of stress
- Strategies and techniques for managing your stress

There will be time for questions.

*Everyone welcome!*

**Date** Tuesday 8<sup>th</sup> of December 2015  
**Time** 10.30am – 12 midday  
**Venue** Alzheimers Canterbury  
314 Worcester Street, Linwood  
(Between Fitzgerald Ave & Stanmore Rd)

314 Worcester Street  
PO Box 32074  
Christchurch 8147

Making life better for all people affected by dementia  
Kia piki te ora mo ngā tāngata mate pōrewarewa



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