### CEO UPDATE 2 March 2020 | 2 Poutū-te-rangi 2020



## Canterbury Health System ready for novel coronavirus COVID-19

Key people from across our health system have been preparing for weeks and we are ready to care for someone with COVID-19 should a case be confirmed in Canterbury.

Our Emergency Coordination Centre has been activated and we are regularly liaising with the Ministry of Health. Our Community & Public Health team's Emergency Operations Centre has been operating for the past five weeks with a presence at our airports and ports, providing information to everyone arriving on all international flights into Christchurch and also health screening checks for anyone who is unwell.

Canterbury Health Laboratories is one of three labs in New Zealand that can carry out same-day testing for COVID-19, and we are in close contact with primary care to ensure our General Practice Teams are equipped and prepared to assess and treat anyone who arrives at their practice. The Canterbury Primary Response Group has also stood up a virtual Emergency Operations Centre. Work is underway to ensure sufficient personal protective equipment (PPE) is available where it's needed, and training and information on how to put PPE on and off safely is also being shared. Our health system's Infection



Members of the Community & Public Health Incident Management team at their daily COVID-19 meeting. From left, South Canterbury Manager Neil Brosnahan, Administrator Sarah Kerr and Medical Officer of Health Ramon Pink

Prevention and Control Executive Committee has also issued guidance for clinical staff in primary care and our hospitals.

Canterbury DHB's Emergency Coordination Centre is providing coordination and support to the planning activity across our health system. Our people have presented to a number of key groups, including the Mayoral forum, and will be presenting to the next combined Emergency Services Group meeting. Last Friday Chief Medical Officer Sue Nightingale, Medical Officer of Health Ramon Pink, Clinical Director of Microbiology Josh Freeman and Community & Public Health's Emergency Preparedness Coordinator Hamish Sandison attended the Canterbury Civil Defence Emergency Management Joint Committee (comprising the mayors of Christchurch City and Canterbury District Councils). Hamish presented on COVID-19, focusing on timeline, symptoms, risk assessment for New Zealand, transmission, infection prevention, and wellbeing.

## In this issue

- > Regulars Kōrero ai... pg 4-11
- Canterbury treats the highest number of hepatitis C patients in New Zealand... pg 12
- Ensuring people on multiple medications are safe.... pg 13
- Christchurch Summer Studentship programme.... pg 13
- 'Give your cervix some screen time' campaign... pg 14
- > One minute with... Debbie Smith... pg 15
  > Notices Pānui... pg 16-20

New Zealand currently has one confirmed case of COVID-19 in Auckland, with a number of close contacts of that person in self-isolation for 14 days.

More than 136 lab tests have been carried out in New Zealand, largely to rule out COVID-19 in people who have travelled to affected countries and have influenza-like acute respiratory symptoms. At the time of writing there are a further 11 COVID-19 test results due back.

Symptoms of COVID-19 include a cough, fever and breathing difficulties.

I know there has been a lot of concern about the scaremongering and misinformation on social media, in particular, about COVID-19. The facts are that we have a <u>national</u> <u>pandemic plan</u> and as the lead agency in New Zealand, the <u>Ministry</u> <u>of Health website</u> can be trusted to have the latest information. We also have a localised <u>Canterbury pandemic</u> <u>plan</u>. Our plan outlines the various groups involved in our response and their roles in managing the risk of a pandemic. The intention of our local plan is to provide:

 a coordinated view of the multiple and detailed plans at service, hospital and sector level that form the Canterbury Health System response  > guidance around processes to be followed to ensure appropriate support, decision-making and direction is provided by the DHB for reduction, readiness, response and recovery in the event of a pandemic.

It's important to stress we have only had one isolated case in New Zealand to date and we have robust contact tracing and the ability to isolate and manage cases in New Zealand. In areas overseas where there are large numbers of cases it's important to remember that for most people COVID-19 is a mild illness and people can safely be cared for at home. Those who need hospital care are generally older and often have other long-term health conditions.

To put things in perspective in the peak of Canterbury's winter 'flu season' last year we were admitting an additional 50 people with influenza to Christchurch Hospital each day. Our contingency planning includes modelling a 'worst case scenario' if we had another heavy influenza season and an influx of COVID-19 patients at the same time. Our plan would be to discharge anyone who could safely continue their recovery at home with appropriate in-home care to free up available space for those in need of specialist hospital care.

### 2 March 2020

It's likely we would also have to postpone some planned surgery to free up beds and staff, and perhaps transfer more patients to other health facilities. We have dedicated areas for infectious patients at Christchurch Hospital. These areas have already been identified as part of our annual winter planning process and we are running over this again to ensure everyone is up to date with the plan. Our plans include flexing up staff numbers to accommodate 'surge capacity' in the event of a large influx of patients in a short timeframe.

Christchurch Hospital currently has 11 negative pressure rooms which are needed when carrying out aerosolcreating procedures on patients with infectious diseases. These rooms are used regularly for caring for people with a wide range of infectious diseases every week.

Together we're powerful containment starts with you. Our greatest enemy right now is not the virus itself - it's fear, rumors & stigma. And our greatest assets are facts, reason and solidarity.

Dr Tedros Adhanom Ghebreyesus, World Health Organisation

If you have questions, concerns or suggestions about our preparedness or plans, please talk to your manager in the first instance or email <u>ECCManagerCDHB@cdhb.health.nz</u>.

## Frequently asked questions about COVID-19

#### Who needs to self-isolate – what are the current 'Category 1' and 'Category 2' countries?

Any member of the public who has travelled to mainland China, Iran, South Korea or Northern Italy in the 14 days prior to arriving in New Zealand is being asked to selfisolate. These countries and regions are classed as Category 1 countries.

People who return to New Zealand after visiting Category 2 countries which include: Japan, Singapore, Thailand and Hong Kong do not need to self-isolate, however, if they develop any COVID-19 symptoms they should either phone the dedicated Healthline COVID-19 line 0800 358 5453 or call their General Practice team ahead of their visit, to ensure the practice is appropriately prepared before you arrive. The dedicated COVID-19 advice line is free and available 24 hours a day, 7 days a week.

Note, Canterbury DHB is taking a precautionary approach with staff returning from overseas, and each case of a staff member returning from a country where there is community spread of COVID-19 is being assessed individually. Staff should call their manager before turning up to work. See page 4 for more information.

### What can you do to keep yourself and your whānau safe?

Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand. Border restrictions and travel advice are regularly being reviewed and advice around any changes should be followed.

The Ministry of Health website has the latest information which is being updated daily: <u>health.govt.nz/covid-19</u>.

Here are some simple steps you can take to help stop the spread of diseases like COVID-19:

- Avoid close contact with people with cold or flu-like illnesses.
- Cover coughs and sneezes with disposable tissues or clothing, or sneeze into the crook of your elbow.
- > Wash hands for at least 20 seconds\* with soap and water and dry them thoroughly:
  - Before eating or handling food
  - After using the toilet
  - After coughing, sneezing, blowing
  - your nose or wiping children's noses
  - After caring for sick people.

 If you don't have soap and water available, you can use an alcoholbased hand gel. Rub it all over your hands, including the backs of your hands and between your fingers. Rub it in until it dries.

(\*As a guide for how long you should wash your hands for 20 seconds is about as long as it takes to sing two verses of 'Happy Birthday to you')

- Clean all hard surfaces regularly with disinfectant or diluted bleach (one teaspoon of bleach diluted with 500 ml of water) especially if someone in your household or workplace is unwell.
- Importantly if you're sick please stay home.

The Ministry of Health has launched the campaign shown on the right to promote public health messages encouraging good hygiene practices that help protect you and your whānau from a range of viruses and illnesses.

### 2 March 2020



Ministry of Health - Manatū Hauora Just now · @

Here's a top tip to protect yourself and others from germs and viruses – wash your hands for 20 seconds with soap and water, and dry them well.



Here's another top tip to stop the spread of germs and viruses – if you don't have tissues handy, fire that cough or sneeze into the crook of your elbow.



Your health is in your hands Help stop the spread of germs and viruse

## If COVID-19 is similar to influenza, why are we trying so hard to keep it out of New Zealand?

Minimising the number of people infected and transmitting the virus for as long as we can is important. It means that overall, fewer people are likely to get infected and that they are less likely to all get infected in a short period of time.

Some individuals are at higher risk from viral infections such as influenza, including those with co-morbidities (other illnesses or long-term conditions that affect their health). It is important to protect all New Zealanders from the spread of COVID-19 to protect these vulnerable groups. Isolation and contact tracing are proven to be the best ways to reduce the spread of infection.

Reducing the rate of spread of COVID-19 reduces the potential demand on the health sector and provides time for us to learn about the virus, ensuring that our policies and procedures will be effective as the situation changes.

## Are we going to open community-based assessment centres (CBACs)?

Planning is underway for how New Zealand will manage if there are a lot of people with COVID-19 infection. Canterbury DHB is in discussions with primary care providers such as General Practices and Primary Health Organisations to plan and create pathways of care and settings that best suit our region and population.

## Do patients who test positive for COVID-19 require admission to hospital for inpatient care?

Patients with suspected infection of COVID-19 should be managed according to their symptoms and clinical state. They do not need to be hospitalised unless it is clinically indicated.

### As a health care worker, what is my risk of catching COVID-19?

The risk of catching COVID-19 from a confirmed case largely depends on the patient and how you are caring for them. COVID-19 transmission is similar to that of the influenza virus and it is recommended that standard droplet and contact precautions are used when managing patients with suspect COVID-19 infection. Standard droplet and contact precautions include:

- > gloves
- > surgical face mask
- > disposable, fluid resistant gown
- > eye protection.

Regular hand hygiene is important. The risk is higher when performing aerosol-generating procedures, and the PPE is slightly different when performing these procedures. It is not recommended that aerosol-generating procedures are undertaken in primary care. The Ministry's infection prevention and control advice for primary care health workers can be found under <u>Resources for health</u> <u>professionals</u>.

Aerosol-generating procedures are those that produce droplets that are small enough to be widely dispersed. They pose a higher infection risk for health professionals. Aerosol generating procedures (including using nebulisers) should only be done in a hospital setting if COVID-19 infection is suspected.

#### Do I need to start wearing a mask?

No. For most people in the community, Personal Protection Equipment (PPE) such as face masks are not recommended. However, for people with symptoms of an acute respiratory infection and who have travelled to a country where there are cases of COVID-19 you should wear a face mask when seeking medical attention. You should phone ahead of your visit to the doctor. Call Healthline's dedicated 24/7 COVID-19 advice line 0800 358 5453 or your own general practice team's number 24/7.

### What's the advice for staff travelling or returning from overseas?

The Ministry of Foreign Affairs and Trade website has the most up to date information on travel. This can be found on <u>Safe Travel</u>. Please note that Canterbury DHB's travel insurer has advised it is not providing cover for any claims in relation to COVID-19 (coronavirus) for international travel booked after 30 January 2020.

Canterbury DHB is taking a precautionary approach with staff returning from overseas, and each case of a staff member returning from a country where there is community spread of COVID-19 is being assessed individually. Staff must call their manager before turning up to work. We are taking a more stringent approach with healthcare workers than with other members of the public because of the particular risk posed by having contact with vulnerable patients in the course of their work.

Any Canterbury DHB staff member returning to New Zealand from mainland China, Iran, Northern Italy or South Korea will need to <u>self-isolate</u> for 14 days from the date of departure of the 'high risk' country.

As at 2 March 2020 staff who have returned from other countries currently in Category 2 (which includes Japan, Singapore, Thailand and Hong Kong) do not need to self-isolate as the risk from exposure does not justify standing down staff who do not have symptoms – unless you have been in close contact with a suspected or confirmed case of COVID-19.

Any staff member who develops symptoms of COVID-19 (including a cough, fever and breathing difficulties) at any stage within the 14-day period after having returned from any Category 1 or Category 2 country should phone their General Practice team to get advice on testing/clinical management and their line manager for wellbeing and leave advice.

#### se note insurer g cover cOVID-19 I travel D. Staff each hing from Staff each Stay away from others if you're sick



### If I need to self-isolate or standdown from work what sort of leave do I need to take?

Please talk to your manager for advice as everyone's situation is different. The People and Capability team is finalising nationally consistent detailed advice for managers which covers a range of scenarios. This will be sent to managers by Tuesday 3 March.

## Protect yourself against

ealthli

2 March 2020

coronavirus



### How infectious is COVID-19?

This novel coronavirus is similar to seasonal influenza in terms of its symptoms and it has a similar infectivity rate – one person with novel coronavirus is expected to infect two others. This is much lower than measles which is highly contagious, with one infected person expected to infect 12-18 unimmunised people.

#### What is a pandemic?

A pandemic isn't nearly as scary as it sounds. It's a term used by health organisations to describe an epidemic that becomes very widespread and affects a large proportion of the population in a whole region, a continent or the world. Despite its rapid spread, COVID-19 (commonly known as the coronavirus), has <u>not been declared a pandemic by the</u> World Health Organization (WHO).

Our health system is well-prepared for an infectious disease outbreak and we have the skills and expertise to ensure we can respond appropriately. There will be some challenges in terms of space and resources, but we have met such challenges before.

We aren't in this alone. We are part of a nationally informed and resourced response which is able to tap into global leadership and expertise.

#### What is COVID-19?



Short videos in New Zealand sign language about COVID-19 are available on the Ministry of Health's website

### Where can I get more information of the wider impacts of COVID-19?

An All-of-Government website has been set up as the key information hub for coronavirus: <u>https://www.govt.nz/novel-coronavirus-covid-19</u>

The Ministry of Health is the lead agency for national planning and people should go to its website for accurate and reliable information on the health risks associated with the virus: <u>https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus</u>

Civil Defence and Emergency Management groups will support the health sector with welfare coordination if required.

## COVID-19 public information evening

Te Papa Hauora Health Precinct is hosting a public information evening on Coronavirus COVID-19 at Manawa on Monday 9 March.

The event is an opportunity for members of the public to hear from experts and ask questions about this rapidly developing situation.

The following issues will be covered:

- > Understanding the disease: What is the virus, its features, nature, and how does it infect and affect us?
- > Protection: How we can protect ourselves, our families/ whānau and community, and what can we tell our tamariki?
- > Management: How prepared are we, what actions are being taken to prevent and control the virus, and management plans for an outbreak?



The presentation will be followed by an expert panel discussion and question time, led by international infectious diseases expert David Murdoch.

Registrations are essential. For more information and to register visit the **Eventbrite website here**.



### Pharmacy's efforts recognised at national healthcare awards

Congratulations to the high-performing Longhurst Pharmacy in Halslwell taking top honours at the New Zealand Primary Healthcare Awards He Toho Mauri Ora this weekend. The pharmacy won the Pharmacy Guild Community Pharmacy of the Year Award with judges recognising the pharmacy's efforts in to create awareness in their community of a pharmacist's role in producing better outcomes. They also won the Research and Education Award for their research-based programme, "Osteoarthritis – reducing the disease burden", a collaboration with Riccarton and Longhurst Physio to enhance the wellbeing and mobility of people with osteoarthritis.

Haere ora, haere pai Go with wellness, go with care

David Meates CEO Canterbury District Health Board

If you have a story idea or want to provide feedback on *CEO Update* we would love to hear from you! Please email us at <u>communications@cdhb.health.nz</u>. Please note the deadline for story submissions is midday Thursday.

If you're not a staff member and you want to subscribe to receive this newsletter every week please subscribe here.

## regulars – kōrero ai

2 March 2020



## **Bouquets**

### Tainee, IV Technician, Christchurch Hospital

My mother has very thin skin and tiny veins. The last couple of admissions to hospital it has always been a relief when the lovely IV technician Tainee Wongsanguan arrives and strikes gold. Tainee has a lovely kind and gentle manner and is an extremely skilled and competent IV tech. We deeply appreciate her work. Many thanks.

### Katie, Aranui Community Dental Clinic

I had my little girl in to visit Katie, the dentist. We thought she was just lovely, had a wonderful manner and made the visit a very positive experience for my daughter.

### **Radiology, Christchurch Hospital**

Thank you for the very good care you gave my husband when having an MRI for his heart. Very kind. Thank you so very much.

### **Orderlies, Christchurch Hospital**

Over a period of years, probably 30 at least, when my husband and I have reasons to be treated or admitted, we have always been treated with respect and care by the wonderful orderlies. At times they have even gone the extra mile to deliver us to a bus stop or fulfilled another wish. Our heartfelt thanks for your wonderful service.

### Theresa, Medical Day Unit, Christchurch Hospital

Theresa, my nurse for the duration of my iron and blood infusion, was very professional and caring. Thank you very much.

### Gabe, Day Surgery Unit, Christchurch Hospital

I want to compliment a nurse called Gabe who was thorough and diligent in keeping the family informed after our family member's operation.

### Morgan Lingard, Ward 23, Christchurch Hospital

I would like to commend the lovely house surgeon, Morgan Lingard, who our whānau dealt with on Ward 23. He had such a warm and kind bedside manner and patiently listened to our questions, then explained things clearly in a way we could understand. Thanks Dr Lingard, you made our experience in hospital just that little bit easier.

### Emergency Department (ED), Christchurch Hospital

I would like to thank ED for their expedient, efficient care on my last visit. They are under an inordinate strain managing large numbers of patients with acute problems. We are lucky to have such an excellent service available to the Canterbury population. A special thanks to Dr David Richards, Dr Sarah Carr and Nurse Tracy who dealt quickly and effectively with my injury (again!) – fantastic job!

### **ED, Christchurch Hospital**

I would like to pass on my thanks to the staff in ED who looked after me at the beginning of February. I was seen very quickly after filling in the paperwork. Everyone who looked after me was fantastic, from the nurses and doctors to the receptionists, and radiographer. Everyone was amazing and a credit to Canterbury DHB.

### Ward 11, Christchurch Hospital

Awesome staff, nurses and doctors. Well looked after, no complaints, very nice food. Keep up the good work.

## Big Shout Out

### To: Seagar Clinic, The Princess Margaret Hospital

Just a quick note to mention the wonderful staff and management team at Seagar Clinic.

From: Fiona Barr, Stepping Stone Trust.

#carestartshere

#### WellFood staff, Ward 25, Christchurch Hospital

I am writing this compliment about the great catering staff on Ward 25. Over the years I have been a patient many times on Ward 25 and they have provided a great service. They're always keeping patients well fed and hydrated from breakfast to dinner time. I believe they are a big part in patient recovery and a big asset to Christchurch Hospital. Keep up the good work, you deserve praise for the hard work you do. Well done.

### **Cardiology, Christchurch Hospital**

Facility great, clean, and services good, organised, pleasant and professional. Even though I was at the end of Dr Elliott's morning list, he was helpful, professional and courteous. Thank you. Also thank you Nurse Bronnie Rate.

#### Wendy, Radiology, Christchurch Women's Hospital

The radiographer, I believe her name is Wendy, truly went out of her way to ensure that my time before, during, and after, was as comfortable as it possibly could have been. Wendy was personable, easy to connect with, and immediately made me feel that I was in good hands. She took the time to validate my fears and concerns, and to discuss the procedure in full with me beforehand.

#### Diane, Playroom Services, Christchurch Hospital

My daughter who is four years old and profoundly deaf had an appointment for blood tests after several attempts elsewhere to get bloods and allergy testing. We met with Diane, who is a Hospital Play Specialist, and after only a few minutes I felt like both my daughter and I were in capable hands. She knew what she was talking about, she advised me of a plan she had and walked me through it. My daughter has had many appointments and admissions to hospital in her short four years but this one was different. No tears, no tantrum, just the blood test that we were there for. Diane was amazing and what she does is so important, especially for children who have been traumatised by previous things they have had to go through. It's hard enough sometimes getting to the hospital knowing my child is going to lose the plot, fight against the doctors and nurses... and often we have to rebook because she will not allow them to get samples or whatever they need. As a parent this is extremely difficult, knowing your child is scared and doesn't understand why she's always required to be poked and prodded and needs blood tests and injections and medication, but this time was different. We left and made it back to our car without a fight, without the

screaming and running away, without heightened behaviour... I walked out of the hospital with my four-year-old smiling. Thank you Diane for making our appointment so easy, straight forward and manageable.

2 March 2020

## **Big Shout Out**

### To: Registered Nurse Jane Foley, Specialist Mental Health Services Training Unit

I would like to acknowledge the amazing work done by Jane Foley who works at the Clinical Skills Unit and the SMHS training unit. Without her knowledge, skills and the amazing way she supports just about every service in SMHS, we would be lost. Thank you, we see you, we appreciate you.

### From: Registered Nurse Barbara Kimber

#carestartshere

## **UNDER THE WEATHER?** Make your GP team your first call 24/7

Canterbury District Health Board



## Hīkina 🏹 🤃 🔆 🖘 to Hagley

## MIGRATING TO CHRISTCHURCH HOSPITAL HAGLEY

## **Counting back to move forward**

While we don't have a definite date for the move to Christchurch Hospital Hagley, there are a number of things being done ahead of time, by working backwards. So when the time comes to push 'go', the plan will simply slot into the calendar.

There are a number of things that need to happen in sequence before we can move into our new space, and these things will occur over a set amount of time. As soon as a date is set, the following needs to happen:

- > Staff familiarisation and 'train the trainer' refreshers
- Cleaning and pre-stocking, which will mean the building will be off limits for a time
- > Orientation and staff training

### Stocking the drug cupboards

Pharmacy Technicians Andrea McEvoy and Mo MacDonald recently carried out a trial stocking of a drug cupboard in Christchurch Hospital Hagley in preparation for the transfer of stock to the new building.

Andrea says each ward has had an increase in stock and many changes in supply since the design was done.

"We are happy that the stock fitted but will be making some minor adjustments to some of the bulk items and IVs," Andrea says.

"We also timed the exercise yesterday as part of the planning, so we can have a more precise plan for full stocking and labelling of the wards."

The plan is to have consistency across the building, with all ward drug cupboards being laid out the same.

There's a short timelapse video of the stocking exercise on the <u>intranet page</u> and on the <u>Facebook group</u>. Check out just how efficient they are!

- > Radiology apps training, theatre simulations
- > Sterile Services move
- > Migration.

During these periods, important work will be completed by the Canterbury DHB Facilities and Maintenance and Engineering teams to ensure the building is safe, ready and fit for purpose.

A lot of planning is being done behind the scenes to keep the timeframes on necessary work as short as possible, but it's essential that the building is ready for occupation when migration begins so when we move to our new spaces it'll be straight into business as usual.



Pharmacy Technician Mo MacDonald carrying out a trial of stocking the drug cupboard in Christchurch Hospital Hagley

## Looking after yourself

## Tech neck

Spending a lot of time on mobile phones, laptops, computers and tablets leads to the risk of a common health issue called 'tech neck.' This is musculoskeletal discomfort usually associated with looking down at a device.

## What can you do to avoid neck strain?

**Move more** – if you've been in a stationary position for a while, remember to get up, walk around and try some neck and shoulder stretches frequently throughout the day.

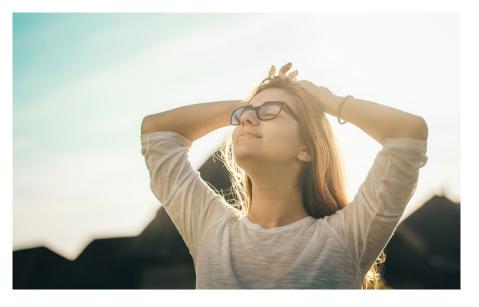
**Your neck is an extension of your spine** – keep it lengthened. The further forward the head hangs, the greater the pressure on the spine.

**Avoid overreaching** – whether it's reaching for something in the back of the car, at the back of your desk, or over a patient at work. Think about whether you can realistically reach it or if you should reposition yourself.

**Hold it!** – avoid cradling your phone with your shoulder, hold it in your hand, or better still, consider using your headphones. If you don't need to be on your phone, put it down and enjoy nature!

**Disconnect when you can** – laptops, cell phones and tablets should only be used for a small amount of time, adjust the settings on your devices to reduce blue light after a certain time, such as 8pm onwards.

**Workstation set up** – If sitting at a desk or using a computer in any part of your day, make sure your chair is set at the correct height, so that your shoulders are relaxed when typing, and the top of the screen is at eye level.



**Stretch it out** – Try these stretches to get some relief from neck strain:

2 March 2020

- > Sit or stand upright. Without lifting your chin, glide your head back until a stretch is felt.
- Drop your head slowly to one side, taking your ear towards your shoulder until you feel a stretch.
- Raise your shoulders towards your ears until you feel slight tension across your shoulders.
- > Sit with your back supported, and slowly roll your shoulders up and backwards in a circular motion.
- > Hold each of these stretches for a slow count of 10 and repeat them three to five times.

Try a few of these suggestions throughout your day and see if it helps with neck strain.

Check out the <u>Wellbeing Health and Safety section</u> on the intranet for more information to help you to be and stay well at work.





## A Windows 10 update

Windows 10 and Office 2016 continue to be progressively rolled out across Canterbury DHB, along with the replacement of end of life laptop and desktop computers.

So far, 4112 deployments have been completed. Of these:

- > 1921 staff have new desktops and 489 staff have new laptops with Windows 10
- 1702 existing computers have had the Windows 10 operating system installed.

The rollout has been a collaborative team effort, and along the way the Project team had the opportunity to employ some students from the ARA

Institute of Canterbury to help assist with deployments. This was rewarding for everyone involved and provided these students with their first experiences of working in a corporate environment.

We know that, at times, the deployment has been disruptive and ISG would like to thank staff for their continued support of the team and the work they are doing.

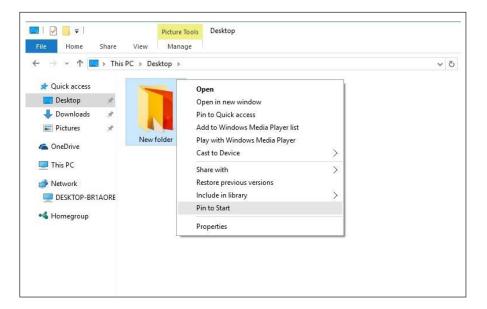
The Project team will continue installing Windows 10 across Canterbury campuses, and then provide support for the West Coast DHB rollout.

For those computers that can't be upgraded, primarily due to an application compatibility issue with Windows 10, please be assured remediation plans are in progress to address these roadblocks.

### Help and support

Visit to the <u>Windows 10 intranet site</u> for support documentation, as well as updates on the locations where the team has been and is off to next.

If you have any questions, please email <u>windows10@cdhb.</u> <u>health.nz</u>.



### Windows 10 tip: Pinning items to the Start Menu

If you find yourself using a particular application more than most, consider pinning it to your Start menu for quicker access. From your "All Apps" list, just right-click an app, then select "Pin to Start". From now on, this app will be accessible in the right pane of your Start Menu.

Applications aren't the only thing you can pin to the Windows 10 Start Menu – folders and other items can be pinned as well. Using Windows Explorer, just rightclick an eligible item, then choose "Pin to Start" for quick access.

## our stories – ā tātou kōrero

## Canterbury treats the highest number of hepatitis C patients in New Zealand

In February last year, PHARMAC began funding Maviret – a direct-acting antiviral drug that can treat all types of hepatitis C.

One year on, 3400 New Zealanders have been treated with this medication. Canterbury DHB has treated 576 patients, which is the highest treatment number of any DHB.

"With cure rates of 98 percent with a short course of Maviret tablets, we are already seeing significant improvements among our patients in terms of better quality of life, and less symptoms, such as fatigue. We also anticipate seeing reductions in serious health complications such as liver failure and liver cancer," says Gastroenterologist Associate Catherine Steadman.

The success in Canterbury has been due to a combined effort from both primary and secondary care, with a marked increase in GP prescribing, resulting in hepatitis C treatment being more accessible to people in the community. <text>

2 March 2020

The ongoing work of the team at the Hepatitis C Community Clinic has also been highly effective, particularly for people who are not engaged well with other health services, she says.

However, it is still estimated that up to half of the 40,000 people in New Zealand infected with hepatitis C have not yet been diagnosed.

"All health care professionals can therefore play a role in encouraging people to consider testing for hepatitis C, as well as giving them the clear message that this is a curable virus that we want to see eliminated from New Zealand," Catherine says.



When you search for health information, which websites can you trust?



Take a look at www.healthinfo.co.nz

2 March 2020

# Ensuring people on multiple medications are safe

A group of health professionals is working together to ensure patients who have been prescribed multiple medications (polypharmacy) are not at risk of side effects.

These can include an increased risk of falls, hospital admissions and various illnesses.

Secondary care and primary care clinicians, including general practitioners (GPs) and pharmacists, Primary Health Organisation (PHO) analysts, and Canterbury DHB's Planning and Funding Pharmacy Portfolio Manager are involved in a Polypharmacy Working Group to examine the issue.



Polypharmacy Working Group member and Pharmacist Kezia Buttle (pictured at the back) with some of her team at Community Pharmacy Linwood

Working Group Chair and GP Marie

Burke says it's important to look at this group of patients to mitigate any risks to their health and wellbeing.

"Currently we are working to ensure all Canterbury general practitioners and pharmacists can easily identify patients on multiple medications, so they can review their medications.

"As well as improving patient wellbeing, this piece of work is about making sure everyone on multiple medications gets the same care no matter what general practice they are enrolled with," she says.

The Working Group is also promoting the use of Royal New Zealand College of General Practitioners audits to help general practices identify patients on multiple medications.

Work has been carried out to connect patients at risk of inappropriate polypharmacy with existing services, including the <u>Medication Management Service (MMS)</u> and the Falls Prevention Programme.

GPs, nurse practitioners and practice nurses making falls prevention referrals have been encouraged to also consider a patient's medications and whether a Medicine Therapy Assessment (MTA) would help the patient.

An MTA can identify many issues with polypharmacy patients. It involves meeting with the patient to talk about their medicines. It is essentially a clinical review of their medicines aimed at optimising their current treatment and reducing inappropriate polypharmacy. The MTA offers a great opportunity for patients and/or carers to become involved in the decision-making process when reviewing inappropriate polypharmacy, says Working Group member and Pharmacist Jo Comper.

Kezia Buttle, who is also a Working Group member and Pharmacist, says there are a number of qualified pharmacists in Canterbury and the West Coast doing MTAs.

"Initial results show the MTA pharmacists are having a positive impact on patients who are on multiple medications," she says.

The referrals to MTAs are being recorded and audited to measure the Polypharmacy Working Group's impact.

The Polypharmacy Working Group has been working to address inappropriate polypharmacy since the group emerged as part of Canterbury's response to the Ministry of Health's <u>System Level Measures (SLM)</u> Framework in 2016.

The System Level Measures (SLM) Framework requires each district alliance to identify actions that will contribute to improvements in six high-level outcome measures; one of which is Acute Hospital Bed Days. Locally the prevention of, or reduction in, the risks associated with inappropriate polypharmacy was identified as a contributor to the Acute Hospital Bed Days SLM.

For more information, visit <u>Canterbury Clinical Network's</u> website.

## Canterbury DHB plays key role in University of Otago, Christchurch Summer Studentship programme

Canterbury DHB clinicians were involved in a wide range of research projects – on topics from irritable bowel disease to gender bias in healthcare– during the annual University of Otago, Christchurch Summer Studentship programme.

The University of Otago, Christchurch runs the 10-week programme every summer. It gives young and aspiring researchers the chance to work with clinicians and senior academics on meaningful research projects. Clinicians from specialties such as paediatrics, gastroenterology, gerontology and oncology act as supervisors on the projects. This year Canterbury DHB also sponsored a project on using electronic medicines data to reduce the unnecessary use of antimicrobial medication, and another project that provided an overview of spinal infections at Christchurch Hospital over the past decade.

Canterbury DHB Head of Research Cameron Lacey said it is invaluable for the DHB to be involved in this programme and is an excellent example of how research in Canterbury DHB enhances both the careers and experiences of summer students and clinicians, as well as provides valuable findings that are directly fed back into the health system.

At the end of the 10-week period students submit a report and present their findings. Four winners are chosen, including the best overall project. This year's overall winner



Students from the University of Otago, Christchurch Summer Studentship programme

was Jessica Permain, for her study on the stability and reliability of a newly discovered test for gut inflammation in children with irritable bowel disease. Jessica was supervised by paediatric gastroenterologist and researcher Andrew Day. The best clinical project was won by Isla Evison, who was supervised by cardiologist Paul Bridgman. Isla's project asked the question whether there is a doctor/ patient gender mismatch, or whether we are all treated the same? The winner of the community project award was Caitlyn Cunningham-Tisdall for her project quantifying the incidence of type 1 diabetes in

Canterbury for the past 50 years. One of Caitlyn's supervisors was paediatrician and diabetes specialist Martin de Bock. The Summer Studentship laboratory prize was won by Heath Ryburn who analysed the resistance of mycobacteria to human neutrophils.

2 March 2020

The students have submitted their reports, which are now being reviewed by their supervisors before being published. If you would like to know more about the Summer Studentship programme or want to read the reports in future, visit the <u>University of Otago Christchurch</u> website.



## 'Give your cervix some screen time' campaign

Young New Zealand women are being encouraged to look after their cervix in a new media campaign from the Ministry of Health designed to get women to start regular cervical screening from 25 years of age.

The 'Give your cervix some screen time' campaign launched nationwide last week and seeks to help women feel informed, empowered and motivated to protect their body and future health through regular cervical screening.

The multi-layered media campaign from the National Cervical Screening Programme features a series of videos starring a dancing cervix persona who highlights the importance of cervical screening; not only to prevent cervical cancer, but also to protect future reproductive health, whakapapa and whānau wellbeing.

A series of high-profile ambassadors and influencers are supporting the campaign's messages.

The campaign webpage <u>www.starttoscreen.nz</u> has informational videos about what to expect at a screen and why cervical screening is important. These videos can also be accessed by providers to help communicate information about screening to clients.

The media campaign will run on digital, TV on demand, and social media channels and has campaign pages on Facebook and Instagram (@start.to.screen) that health providers can link to through their own communications.

A dedicated communications toolkit has been created to support providers to share the campaign messages and tools with their staff and local communities. You can view the campaign toolkit on the National Screening Unit website and health practitioners can also download a one page overview of the campaign and key information <u>here</u>.

The campaign supports the change to the cervical screening starting age, from 20 to 25, which was put in place in November 2019 and brought New Zealand in line with international best practice.

Any questions can be emailed to the National Cervical Screening Programme team: <a href="https://ncsp@health.govt.nz">ncsp@health.govt.nz</a>.





#### What does your job involve?

Health Protection Officers (HPOs) investigate public health concerns and provide advice and information to community leaders and the public as part of a public health enforcement team. We carry out a regulatory role on behalf of the Director-General of Health and are 'designated' to do so.

Areas of focus are environmental health and communicable diseases. In environmental health, HPOs identify and quantify threats and work with others to minimise them. This includes bio-security and quarantine, drinking water quality, hazardous substances, waste disposal, resource management, recreational water issues and contributing to managing sustainable environments.

HPOs undertake surveillance and investigation of notifiable communicable diseases and outbreaks. We prevent diseases spreading by food, water and people and respond to emergencies with a public health component. HPOs provide a 24/7 on-call response.

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

I am fascinated with microbes and their ability to adapt in order to infect organisms. Working on the response to the current COVID-19 at the border is just the latest in a line of such beasties to challenge us.

#### What do you like about it?

Mainly that it offers a lot of variety. You never know what will come in with the next phone call, but the one thing I have learnt is that just when you think you have heard it all the next phone call will disabuse you of that notion. It is job that relies on building and maintaining relationships with a variety of people and organisations while providing the opportunity to continually learn new things.

#### What are the challenging bits?

Working in emergency and outbreak responses as they usually require undertaking actions with a lack of information in a fast-moving environment. The current response to the COVID-19 is a great example of having to carry out a response at the border – meeting flights with



2 March 2020

information that was changing daily at one point, while also undertaking planning and preparation for dealing with a case should one arise.

#### Who inspires you?

The rest of my team and the way we all come together and respond during outbreaks and emergency responses and just get the work done under challenging circumstances.

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

It is fundamental to doing a good job and being a decent human being.

### Something you won't find on my LinkedIn profile is...

I am a proud sci-fi/fantasy nerd.

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

Taking in a bunch of Broadway shows in New York.

#### What do you do on a typical Sunday?

Definitely a sleep in, followed by a combo of going to the gym/for a walk, to a movie with friends, reading, crafting, or catching up on TV shows.

#### What's your favourite food?

Depends on the day, but I'm a dessert girl.

#### And your favourite music?

The louder the better. I love the symphonic metal bands 'Within Temptation' and 'Nightwish' and for rock it has to be 'Queen' and 'Muse' but at the moment I am really into 'The Hu', they are a throat singing folk metal band from Mongolia.

If you would like to take part in the column or would like to nominate someone please contact Naomi.Gilling@cdhb.health.nz.

Friday 6 March 2020 – 12.15pm to 1.15pm with lunch from 11.50am

Venue: Rolleston Lecture Theatre

Speakers: Ramon Pink, Medical Officer of Health, Josh Freeman, Infection and Prevention Control, Alan Pithie, Infectious Diseases

#### "COVID-19 Preparedness Questions and Answers"

#### Chair: Sue Nightingale

It is requested out of politeness to the speaker(s) that people do not leave halfway through the Grand Rounds.

This talk will be uploaded to the staff intranet.

Video Conference set up in:

- > Burwood Meeting Room 2.6
- > Wakanui Room, Ashburton
- > Administration Building, Hillmorton
- > The Princess Margaret Hospital, Riley Lounge

All staff and students welcome. Next Grand Round 13 March 2020, Rolleston Lecture Theatre.

Convener: Dr R L Spearing (email: <u>ruth.spearing@cdhb.</u> <u>health.nz</u>)

## Something For You

Something For You is the Canterbury DHB employee benefits programme. The deals offered are from the Canterbury business community to say thank you for all that you do.

Check out <u>Something For You</u> on the intranet for more information on these deals and many more! Remember, you'll need your Canterbury DHB ID badge to claim these deals, so be sure to take it along with you.



2 March 2020



**SIMPLE NAKED SOAP** - Get 10 percent off all products from the Simple Naked Soap website throughout March, find the code and the link on the Something For You homepage.



**GREEN DINNER TABLE** – 20 percent off your first order of plant-based dinners delivered to your door find the code to redeem your discount under the Lifestyle and Entertainment section.



**MOZITA AUTOMOTIVE -** 101 Springs Road, Hornby and 42 Hawdon Street, Sydenham

Head into Mozita and get 20 percent off all automotive services, repairs and WOF's for all Japanese, European and American vehicles.



KOHA FITNESS - 48 Hereford Street, Christchurch Central

Receive a discounted rate of \$33 per week (12-month memberships), no joining fee, two free personal training sessions and more!

## Elective services guidelines updated

Elective Services Guidelines, "The Orange Book" has been updated.

A key addition is the new section on 'Business Process Standards' that describes key expectations about how we will work. This, and the other material throughout the book, reflects the change to our work environment with the move from Homer to the South Island Patient Information Care System.

While the 'Business Process Standards' were developed with planned patient journeys in mind they are relevant to all patient journeys.

The Orange Book, generated by the 100 Days Programme Team, is structured around the health care journey of a patient with an elective need, covering referral to triage to first specialist appointment to treatment. It explains who does what, why things are done the way they are and is designed to support standardised and more consistent administrative work practices.

To make it easy to access and regularly use, <u>add it to your Work Tools</u> on the PRISM home page. You're advised to use the online version, rather than printing it out, to make sure you're always using the most up-to-date document.

The Orange Book can be accessed via the PRISM home page under Work Tools, the 'Elective Service - 100 days' link under 'Projects and Programmes' or via <u>this link</u>.

## South Island Alliance update



The latest bimonthly update from the South Island Alliance Programme Office includes information about the South Island's successful new telestroke service at Lakes District Hospital, facilitating change at the South Island Child Protection Forum, and planning for our shared digital future. Read more <u>here</u>.

## eCALD - Enhancing CALD Cultural Competence

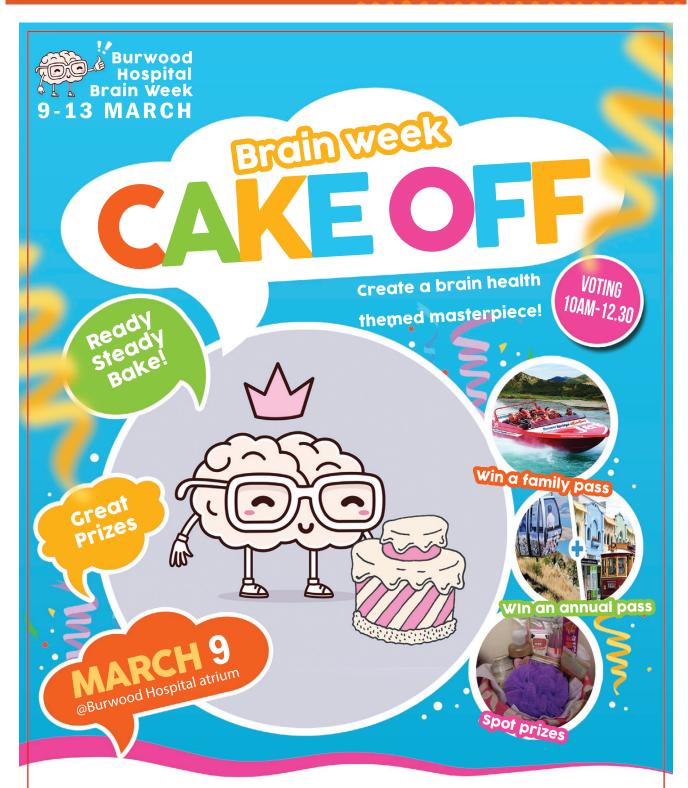
CALD refers to culturally and linguistically diverse groups who are migrants and refugees from Asian, Middle Eastern, Latin American and African backgrounds.

The latest eCALD news edition includes information on a new online course, "Working with CALD clients in palliative care", and powerpoints and recorded sessions from a recent seminar on developments in psychopharmacology.

Read more <u>here</u>.



## 2 March 2020



### Be a legend

Create a brain-health themed cake. Donate the cake to be raffled. Baking triumph or heroic fail, your cake will help raise not only awareness but also funds for resources to keep our patients' brains busy and happy!

**Register by emailing** 

### Win great prizes

There will be prizes for people's choice and judge's choice, with celebrity judge Jordan Luck from the Exponents., plus spot prizes. You could win amazing prizes thanks to Christchurch Attractions and others.

Lynn.Brice@cdhb.health.nz

### Health in the Home Innovation Workshop



## Do you have an idea that could improve the health outcomes for thousands of people in their home?

Canterbury DHB's Via Innovations Team is holding a one-day workshop on Monday 23 March to help you grow your concept.

We are looking for people with great ideas rather than well-developed products or services to attend the workshop, giving you a chance to see whether your innovative idea can become a reality.

If you are employed by Canterbury DHB, or by a provider whose services are funded by Canterbury DHB, then this workshop is open to you.

In this workshop, expert facilitators and local health practitioners will guide you through a hands-on process to understand how <u>your</u> health innovation concept could be implemented in the homes of thousands of people in communities like ours –whether as an improved way of working, or as a new product or new service with international commercialisation potential.

It's **free** to attend, and the first twenty applicants who register will be selected (subject to your usual employer approvals process). This Via Innovations event is hosted by Te Papa Hauora Health Precinct with support from Canterbury DHB.

To apply, <u>click here</u> for more details and to register.

### Date: Monday 23 March

Time: 8.30am - 6pm (morning tea, working lunch and networking nibbles included) Location: Manawa Building, Antigua Street. Facilitators: University of Canterbury Centre for Entrepreneurship. Cost: Free.



UC©Centre for Entrepreneurship **Canterbury** District Health Board Te Poari Hauora ō Waitaha



2 March 2020



### presents

# He Puna Mareikura

### For Māori women, aged 18 to 30 years.

### Explore

- o Your strengths
- Going smokefree
- Recognising your potential
- Taming the taniwha

### Starting Thursday 5 March 2020 (8 weeks)

### 5.00-6.30pm

Venue: Phillipstown Community Hub - Te Whare Whānau Whānui

### 39 Nursery Road, Phillipstown

Awesome support, great incentives, fun activities

Facilitated by Nika and Teresa

\*Transport available.

### Text us on 027 249 3190 for more information











2 March 2020