



## It's the end of an era, and an exciting new beginning as we transition to be part of Health New Zealand this week

**After 21 years from 2001 – 2022, Canterbury DHB will become part of Health New Zealand this Friday, 1 July. We'll have a new name and a new Chief Executive. Margie Apa will be the Chief Executive of Health New Zealand, and leader of the more than 80,000 people working in health in New Zealand. Our new name will also be announced this Friday.**

There have been a number of chief executives and chairs leading Canterbury DHB over the past 21 years. The chief executives include Jean O'Callaghan, Gordon Davies, David Meates and me in the chief executive role, along with seven board chairs. The chairs over the years were Syd Bradley, Alister James, Bruce Matheson, Murray Cleverley, Ta Mark Solomon, Dr John Wood and Sir John Hansen and I want to acknowledge and thank the leaders and governors of Canterbury DHB for their stewardship of the organisation.

### Canterbury

District Health Board

Te Poari Hauora o Waitaha

Our objectives, outlined when the DHBs were formed in 2001, included:

- › improving, promoting and protecting the health of people and communities
- › promoting the integration of health services, especially primary and secondary care services
- › seeking the optimum arrangement for the most effective and efficient delivery of health services in order to meet local, regional, and national needs
- › promoting effective care or support of those in need of personal health services or disability support.

I think we can all be very proud of what has been achieved during the past 21 years. Canterbury has been through a lot since district health boards were established. We've had more than our fair share of disasters and challenges with the Canterbury earthquakes, Kaikoura earthquakes, Port Hills fire and the Christchurch terrorist attacks as well as supporting the response to Whakaari/White Island. We have also been incredibly progressive and many of our milestones are positive, including significant facilities redevelopment, new technology, and an international reputation as a high-performing integrated health system.

### Only four more sleeps until we join Health New Zealand!

Finally, I can say - this is the week! On Friday we will all join with wider health system partners and colleagues to become Health New Zealand. I wanted to take the opportunity to remind everyone why we're making this momentous move and reiterate what to expect on day 1 and look ahead to what's next in developments after 1 July.

New Zealand has a sound publicly funded health system and a highly skilled, dedicated and professional health workforce, but we know there are opportunities to make improvements. We need to recruit more staff and we need to build a health system that will perform better for all of us.

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We're on a journey to transform our health system for a few reasons, but the ultimate one is to improve the health and wellbeing of all New Zealanders.

As part of Health New Zealand, the plan is for our new health system to be:

- › **People-centred:** a system that brings together the voice of all communities
- › **Equitable:** a system that focuses on working in partnership with Māori and honouring Te Tiriti o Waitangi
- › **Accessible:** a system that offers more equitable, convenient and integrated access to services for all New Zealanders
- › **Cohesive:** a national health system that delivers locally, supported by co-ordinated planning and oversight

## What to expect on day 1

As we've mentioned before, unless you've been told otherwise, not a lot will change for you and your role on day 1 of Health New Zealand. You will continue to report to the same person you always have, with the same duties and responsibilities.

- › Some of you might want to get together on Friday to share morning tea or a cup of coffee or shared lunch to mark the end of an era and the beginning of a new one. If you do get together please take a photo and send it through to [communications@cdhb.health.nz](mailto:communications@cdhb.health.nz) so we can share them next week.
- › Information will be sent to every new Health New Zealand team member on Friday so keep an eye on your emails and on the [Prism page](#) where information will also be posted. I'm looking forward to being able to share our new name and new-look logo. Once again, there's no need to get everything changed on day 1, nor do we have to get rid of anything that has a Canterbury DHB logo on it, we'll update when items need replacing. There will be some relatively easy things you can update on Friday and this includes your email signature and phone voice message.

I am very pleased to be staying on in two different roles: first as Interim District Director for Canterbury and West Coast DHBs, assuming many of the responsibilities of my current CEO role. In addition, I will also be the Interim Regional Director for Te Waipounamu | The South Island, and in this role will work closely with the District Directors for Southern, South Canterbury, and Nelson Marlborough DHBs.

It's important to remember why we are changing: to create a simpler, more equitable and accessible health service. While it sounds straightforward, it's going to take a lot of work over the coming weeks, months and years to achieve the goals of Health New Zealand, and this Friday we take the first small steps to a new national health system and become part of a team of teams.

In the meantime, there is a lot of information available on Prism so please make the time to read this if you have any questions and want to understand the big picture. You can also talk to your manager if you would like more information or have any concerns. Importantly, very few changes on day 1, and we still have a very busy health system to run and need everyone to keep playing their part.

## What happens after day 1?

Day 1 is the beginning of our transformation journey. The real development work will begin for us all, and there will be opportunities to input and shape our future after Friday (1 July).

As recruitment into the permanent national leadership roles continues, work will begin once those leaders and teams are in place to develop our new operating models, identify new functions, capabilities and processes across our system.

We'll also start identifying opportunities for streamlining mahi where it makes sense.

We'll keep you updated on how you can input and support these developments and there will be more details on what to expect next after 1 July.

## Looking back before we move forward

To mark the end of Canterbury DHB, we have interviewed three special staff members:

- > Kay Jenkins, Board Administrator who has been with the organisation for 21 years.
- > Janis Watson, Clinical Records manager who is the DHB's longest serving staff member, having already clocked up 55 years' service
- > Pat Irvine, who has been a midwife for nearly 50 years. Pat now focuses on supporting new mums with breastfeeding and is based at our Rangiora Maternity Unit.

These three remarkable women share insights from their careers in health and offer some wise words of encouragement about embracing change – you can read their stories on [page 8](#). We'll hear more words of wisdom from some of our long-serving staff in next week's update.



Clinical Records Manager  
Janis Watson shares her career memories on [page 10](#)

## No let-up in acute demand

It was another incredibly busy weekend for Christchurch Hospital's Emergency Department (ED) and Canterbury's after-hours clinics. Christchurch Hospital ED saw 384 people in the 24 hours ending midnight Saturday and another 392 in the 24 hours ending midnight on Sunday. Urgent Care clinics were also incredibly busy, and like us, were also impacted by sick staff. The 24-Hour Surgery saw 322 people in the 24 hours to midnight last night.

Vaccination is our best protection, so please ensure your vaccinations are up to date and note the updates to eligibility announced this morning by the Minister of Health and Minister for COVID-19. You can read all the details of the new eligibility criteria on [page 4](#).

Kia pai tō koutou rā

**Peter Bramley, CEO**  
**Canterbury District Health Board**

## Farewell to the CEO Update

This is my last CEO Update in its current format, look out for a fresh new look next week (more information on [page 7](#)).

I do hope that those who could take time off over the long weekend enjoyed a well-deserved break and marked Matariki with some reflection, goal-setting and shared kai with whānau. To those who worked through, thank you for keeping up with the busy workload at the moment. I know it's not easy at present, but please know that your work is valued and appreciated, regardless of whether you provide hands-on patient care or support those who do. We are a 24/7 organisation and so many of you really are going above and beyond at the moment.

If you are feeling stretched, or overwhelmed, please make the time to take a coffee break with a friend or colleague – it can be just the circuit-breaker you need.

And please remember there's a wide range of free support services available to all staff and contractors. Check [here](#) for details.

Please email us at [AskPeter@cdhb.health.nz](mailto:AskPeter@cdhb.health.nz) you have any questions for Peter.

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 [communications@cdhb.health.nz](mailto:communications@cdhb.health.nz). 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](#).

## While general practices are offering vaccinations, many pharmacies also offer vaccinations with no booking required, making it very convenient, so you can pop in when you have time.

Canterbury DHB's clinics are listed here [www.VaccinateCanterburyWestCoast.nz](http://www.VaccinateCanterburyWestCoast.nz)

Vaccination eligibility has been extended and a second booster recommended for those at higher risk of severe illness from COVID-19

### Extended flu vaccinations to 3-12 year olds

- › Children aged 3-12 years and people with serious mental health or addiction needs now eligible for free flu dose – **these will be available from 1 July.**
- › Free flu shots are already available for everyone over the age of 65 and those at risk of becoming seriously ill or who have underlying conditions.

### Second booster for those at risk of severe illness from COVID-19

- › A second booster is recommended for those at increased risk of severe illness from COVID-19, a minimum of 6 months after a first booster.
- › For those who are not considered at risk of severe illness from COVID-19, a two-dose primary course and a booster dose provides very good protection against severe illness from COVID-19.

The following people are recommended to receive a second booster as a priority:

- › people aged 65 years and over
- › Māori and Pacific peoples aged 50 years and over
- › residents of aged care and disability care facilities
- › severely immunocompromised people who received a three-dose primary course and a fourth dose as a first booster (noting this would be a fifth dose for these people)
- › people aged 16 years and over who have a medical condition that increases the risk of severe breakthrough COVID-19 illness and
- › people aged 16 years and over who live with disability with significant or complex health needs or multiple comorbidities.

In addition, a second booster is available for:

- › all people aged over 50 years
- › health, aged care and disability workers aged over 30 years.

These groups can book an appointment for a booster dose through **Book My Vaccine from tomorrow, Tuesday 28 June 2022**, or by calling the COVID Vaccination Healthline on 0800 28 29 26 (8am to 8pm, 7 days a week).

# STAY WELL THIS WINTER

Join the fight against winter colds, flu and viruses and wear a mask. Wearing a mask plays an important part in reducing the spread of winter illness and protecting those most susceptible to getting sick like older people, those with low immunity, or those with some health conditions or disabilities.

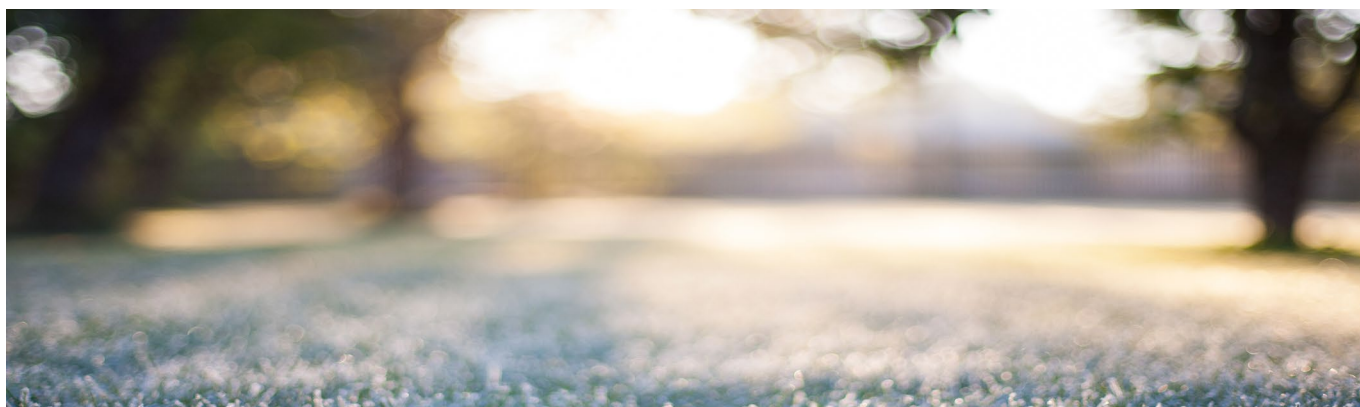
Across the motu, we are seeing an increase in respiratory illnesses like colds and flu, in addition to COVID-19, put pressure on hospitals and local healthcare providers.

Wearing a mask is an effective way to protect ourselves, and others as they help to stop infection spreading between people, particularly when we're close together, or indoors without good ventilation. Whenever you're out and about protect yourselves and others by wearing a mask.



[Watch here](#) as Director General of Health, Dr Ashley Bloomfield shows us how to put one on correctly, to help keep us all safe





## Bouquets

### **Emergency Department (ED) and MAU (Medical Assessment Unit, Christchurch Hospital**

I would like to thank the staff who looked after my father and me when my step-mum was admitted. We knew she was palliative and not long for this life, yet she was treated to ensure her comfort at all times. A special thank you to Nurse Clarice and Dr Garrick who were so kind and compassionate in ED and the MAU staff who looked after us until my step-mum passed away peacefully. From a fellow colleague – thank you.

### **Radiology, Christchurch Hospital**

Very friendly service. The team was exceptionally good at making us feel comfortable during my CT scan. We were impressed by the friendly staff who made the experience a positive one. We appreciate and would like to thank every staff member.

### **MAU, Christchurch Hospital**

I have had two stays in MAU recently. Thanks to all the great medical staff who helped and attended to me.

### **Christchurch Hospital**

I have had several check-up visits over the last month or so. Always very good service and helpful staff.

### **ED and Coronary Care Unit (CCU), Christchurch Hospital**

I wanted to pass on my sincere thanks and compliments for how well my father was treated in a recent visit involving both ED and the CCU. He had a sudden and life threatening heart issue, that was pretty frightening for him and us, but on arriving in ED he was seen very quickly and was treated by a team of very friendly and professional doctors and nurses. The cause was quickly identified and he was scheduled for a procedure the very next day which has got him back to feeling normal, and able to live independently,

which is very important to him. These days we hear more about when things don't go right in the public health system, so I really wanted to say a big thank you! In this case, I couldn't fault the treatment my father received and am very grateful for the work you do.

### **Claudio de Tommasi and Ward B8, Christchurch Hospital**

Neurosurgeon Claudio de Tommasi and his surgical team were excellent. Please convey our appreciation. We get many comments as to the neatness of the job he did. Further, the staff in Ward B8 were faultless. Please convey our appreciation.

### **Birthing Suite and Maternity Ward, Christchurch Women's Hospital**

I wanted to write in to say the biggest thank you to the team. The delivery of my first baby wasn't smooth but the whole team were kind, calm and made me and my husband feel that our baby was in the best hands! A particular thank you to Clare, Ginny, Mary and Registrar Jo who brought our son into the world safely. I know the work you do can feel thankless but we are very grateful and have nothing but positive things to say about our interaction with staff (from reception, cleaners, and WellFood staff to the medical team). Thank you for all that you do!

### **Surgical Unit and Radiology, Christchurch Hospital**

I was the support person for my daughter and want to say a huge thanks to all those who were so sensitive and caring. She has PTSD from many hospital interventions as a baby and young child. The permission to be her support person, and the welcome by RN Rachel, fun with the Orderly Lionel and the professional approach were fabulous and helped us all. Thank you.

### Midwives

My midwife Brenda Mackay was absolutely amazing throughout the whole experience - cool calm and collected. I felt very lucky she was my Lead Maternity Carer. I was transferred to St George's and the thing I remember most from my short stay was a midwife called Chris. My health was good but something changed. She acted fast. She was amazing, an ambulance was there within 10-15 minutes. She hugged me and held my hand tightly. It was like having my mum there, it kept me so calm!! She even came in the ambulance and continued to hold my hand the whole ride. Some things are a bit blurry from here but one thing that's very vivid is the level of care I received. I ended up in the Intensive Care Unit part of Maternity. I met over a dozen midwives. When I moved up to level 5 the care I received was still fantastic! It was so busy. It felt like the call bell was constantly going off in the ward but every midwife still had time for me. I can't say thank you enough. I gained such an appreciation for midwives and what they do. The empathy, compassion, kindness and dedication of women who looked after me was unreal. Thanks again for everything amazing midwives. You all made a bad situation not seem bad at all. We will be forever grateful.

### ED, Saxon Connor and Surgical Team, and Tony Rahman and team, Christchurch Hospital

The ED duty doctors were very responsible to communicate my case to the right persons and the hospital. Mr Saxon Connor did major surgery on me and saved my life. I could not see the process but definitely I could feel it in my heart. He and his team did an excellent job. Dr. Tony Rahman and his team took the post-surgery chemotherapy. The entire process was very carefully organised, which enhanced my recovery magnificently. Christchurch Hospital has very excellent competence in terms of doctors, nurses, equipment, services and systems. I owe my sincere appreciation.

### Belinda, Reception, Waipapa, Christchurch Hospital

My father was admitted to hospital and transferred to ICU. My mother and sister had a bag of belongings for him which went missing. I spoke to Brenda at Waipapa Reception and she went above and beyond to help me locate Dad's bag. We would like to thank Belinda so much as we had been searching for three weeks. Her customer service needs to be recognised.

### Ward B4, Christchurch Hospital

My stay in Ward B4 last week was an eye-opener of warmth and kindness for me watching the nurses and other staff interact with patients. They have so much outflow of love towards their patients, there was never not a smile under the right situation. Thank you for your service to us all. You all deserve a 'Medal of Honour'.

### MAU, Christchurch Hospital

My wife was recently admitted to the MAU. After hearing all the press about how bad our health system is, we were pleasantly surprised how a bad situation for us was managed both professionally and with consideration. All staff were confident and professional while also maintaining a level of compassion that made us feel confident and reassured. All staff who had contact with us, introduced themselves, they explained what they were doing, and what was likely to happen next. Please pass on our thanks to all the staff, they are doing great job.

### Ward 12, Christchurch Hospital

I was admitted to to have a pacemaker fitted and I was extremely impressed with all the staff that I came in contact with. Every one of them gave me the feeling that I was being looked after and made my stay in hospital a most enjoyable one.

### ED and Wards A3 and B3, Christchurch Hospital

My care was very good and I was listened to and treated as an intelligent person who knows her own body. The final decision reflected my opinions. Thank you for your care despite a hospital system that is at crisis point.

### ED and Parkside Medical, Christchurch Hospital

I'd like to thank and compliment the staff that have added to my overall care experience while in hospital. Thanks to ED Nurse Sarah, a lovely lady who reassured me and cared. Extremely professional in her care. Personal in her interest and ultimately helped me with further assessment and medical needs. To the COVID-19 ward staff, amazing people, thank you to them for their professionalism and care. I leave today feeling so much better and appreciative of this service. Not judged but listened to and ultimately given meds to support my recovery. Not made to feel insignificant or in the way. Wonderful follow-up service on discharge. These staff are a brilliant representation of the hospital and humanity. Many thanks.

## Big Shout Out

### To: Housekeeping staff

As a member of the ED team, I would like to offer my sincere appreciation to the housekeeping staff. They are fantastic, they go about their jobs quietly and thoroughly. They just keep on going. We could not do our jobs without them doing theirs. I thank them all for jobs well done.

From: Registered Nurse Tom Murphy

#carestartshere

## The CEO Update is changing!

Effective Friday, Canterbury DHB is no more.

Despite the change to Health New Zealand, we know there remains an appetite for Canterbury health news, and we are more than happy to provide it.

From Monday 4 July, a different Canterbury health update will be published. There will be a fresh look, a new name (watch this space!), and a few changes to content.

A new section we're excited to introduce is: **Ā mātou tāngata – Our people** in which we will share:

- › Stories about our people – achievements, events, retirements etc
- › Profiles – One minute with....
- › Stories for our people – wellbeing, development, education
- › Benefits – Something *for You*

We look forward to sharing the new update with you and welcome your feedback and contributions.

- › 'One minute with...' and any stories you have to share, email: [naomi.gilling@cdhb.health.nz](mailto:naomi.gilling@cdhb.health.nz)
- › Any stories you want to share, email: [susan.henderson@cdhb.health.nz](mailto:susan.henderson@cdhb.health.nz)

Move well,  
Stay well



## The Transalpine Moving and Handling Policy now live on Prism

The [Transalpine Moving and Handling Policy](#) has been published and is available to read in Prism.

The purpose of this policy is to ensure 'no-lift' systems of moving and handling are utilised to minimise the risk of injury or harm to clients, employees, visitors, volunteers and contractors.

This policy underpins the Safe Moving and Handling Programme and its components:

- › Training
- › Facility Design
- › Equipment Management and
- › Risk Assessment.

All staff are responsible for aspects of this policy, including attending training and supporting a culture of safety. Please see these links for courses currently available for you and your team(s). [Ergonomics and Body Mechanics Patient Moving and Handling](#)

The Move Well, Stay Well team continue to work alongside services and teams, delivering training and support.

If you are interested in finding out more, please contact [health.safety@cdhb.health.nz](mailto:health.safety@cdhb.health.nz).

### What are 'no lift' systems of work?

**No lift systems** improve patient and worker safety. Workers use appropriate equipment and techniques to minimise the manual handling requirements of the activity.

Apply basic rule: 'if it feels heavy, it is heavy; find another way or get help'

# Witnesses to history – some of Canterbury DHB's longest serving staff share their memories

## Pat Irvine

Pat Irvine trained and worked as a nurse on the West Coast in the 1960s.

In the mid-1970s she moved with her family to Rangiora, where she still lives and works today. Although her experience included work on the surgical ward, time in Gynaecology and even a stint with the Royal Flying Doctors in Australia as part of her Advanced Diploma of Nursing, it was midwifery that Pat was drawn to.

Around 1975 she trained as a midwife. Rangiora at that time was a sleepy country town with a strong tight-knit community and Pat loved it. She worked with local GPs who taught her more about delivering babies than any textbook and developed personal and professional friendships that have lasted through the years.

Pat describes her workmates as her "other family" who have been with her through her personal triumphs and tragedies throughout most of her life.

Initially a Core Midwife, Pat has worked as a Charge Midwife and spent more than 20 years as a Lead Maternity Carer (LMC). These days she works three days a week, still in the Rangiora Maternity Unit helping the mums and bubs.

Passionate about breastfeeding, Pat provides a wealth of experience and gentle support to mums and whānau, making their transition home a little easier.

Reflecting on her career, Pat says she has seen a tremendous amount of change.

"I used to work a 24-hour shift in the Rangiora Maternity Hospital. You would do the afternoon shift and then go upstairs to the staff quarters to sleep. There was a bell in the room that the staff on duty would ring if you were needed during the night", she says.

"You would wake up to do the morning shift and then you would go home for 24 hours before doing it all again."

Over the years, Pat has witnessed a lot of advancements in technology and processes, and while some have been welcome, others she feels have come at a cost.

Some of the most welcome advancements for staff at the Maternity Hospital were those that removed extra tasks from their day-to-day roles. In the early years of Pat's



Long-serving Midwife, Pat Irvine

career, staff and midwives were responsible for maintaining a fire in the hospital which acted as the hot water heating system. Once the kitchen was renovated and an electric hot water cylinder installed, there was thankfully no longer a need for this.

Going to the external washhouse with its 'big copper' to sterilise and launder all the linen and countless cloth nappies was one of the "less appealing" aspects of the job according to Pat. Utilising outside laundry services took away a much-despised chore for Pat and her colleagues.

Despite some of the difficulties of the job, it was a period that Pat looks back on fondly. The great sense of community and seeing the same extended families come back year after year to have their babies, made the staff feel really connected and valued in Rangiora. The hospital had a thriving vegetable garden that provided meals for the mothers and also for a time, Meals on Wheels.

One technological advancement that Pat feels has come at a cost is the advent of the mobile phone.



"That time after a baby is born is all about connection, particularly between the parents and the baby, as well as the extended family. These days straight after a baby is born, the phone gets pulled out and they're talking and texting," she says.

Focused as she is on the wellbeing of mother and baby, Pat says there is no technology invented that counters the exhaustion of having a newborn which is why this time after birth to quietly and calmly connect and settle into a routine is so important.

One of the biggest changes Pat has noted in her career has been the growth of Rangiora itself. After the 2011 earthquake the town's population grew considerably as many Christchurch residents left the city.

With a growing population and increased demand on services, the old Rangiora Maternity Hospital had to give way to a new, modern facility. Pat, like much of the community members who grew up in and around Rangiora, appreciates the new unit but feels strong affection and nostalgia for the old maternity hospital and all the lovely traditions it represented.

Retirement may be on the horizon for Pat but for now, families welcoming a new bub in Rangiora, like thousands before them, can still benefit from her kind support and advice.

## Kay Jenkins

Many of you will know Kay Jenkins, our Executive Assistant (EA), Governance, who joined Canterbury DHB in December 2000. Since then, Kay has seen a lot of change through the six Chairs (plus an Acting Chair) and the Boards that have governed our local health system.

Kay was also there right at the start of the transition from Canterbury Health and Healthlink South to Canterbury DHB in 2001 – which means she knows exactly what it's like to form a new health organisation and all that entails.

Working with Syd Bradley, our first Canterbury DHB Chair, Kay remembers some of their first tasks were to appoint a new CEO, while also setting up the new governance approach the DHBs introduced. That included creating new Statutory Advisory Committees and for the first time Board meetings were held in the public arena. There was also the opportunity for members of the public to speak at the meetings by way of a deputation.

Kay says the most important thing she needed to be in those days, and has continued to be during her time as EA to the various Boards, is flexible to the different styles, direction and needs of each Chair and Board. Kay says being a people person and liking working with people has been one of the things that has really helped her in her role, as well as ensuring she was discreet with the confidential information she managed for the Board.

Kay's role as EA has also been a real anchor in her life, and as she's navigated challenges, including some major health issues in the last few years, Kay has felt very grateful for the stability and purpose her work with the Canterbury DHB has provided her.

In looking to the future, Kay hopes our new health system will focus on a few things she believes are really important for a successful health approach going forward:

- › To keep moving forward with the integration between different health services, both secondary and primary, that we've gained through events like the earthquakes.
- › To address our workforce issues. Kay has recently had first-hand experience of our wonderful frontline health teams who continue to work above and beyond, but who she recognises won't be able to work at that rate forever. As Kay said, she recalls great advice from her time in netball when former Silver Ferns Coach Louis Muir said to her, "We can only ask our players to play their socks off every once and a while – they'll run out of steam if we constantly ask them to do that every week".

For someone who has worked with us for a remarkable 21 years, Kay has no plans for retiring. A testament to someone committed to health, Kay says you couldn't work with some of the passionate health leaders she has over the years and not have it rub off a little. It sounds like it has rubbed off a lot.

Ka pai Kay and thank you for your service!



## Janis Watson

When Janis Watson started working as a Physio Aide at The Princess Margaret Hospital (TPMH), Mr Lee Grant's single '[Thanks to you](#)' hit number 1 on the New Zealand music charts. It was also the year 19 men were killed in the Strongman mine explosion at Rūnanga; and the year New Zealand adopted decimal currency – we moved from pounds to dollars.

The year was 1967, and a fresh-faced Janis, along with a number of her chums from Cashmere High School ventured across the bridge to TPMH where they all secured jobs with the Hospital Board. Some of those school pals are also still working in health today.

After an impressive 55 years working for Canterbury DHB and its previous incarnations, Janis is, we believe, our longest-serving staff member. She is now a manager in Medical Records and has no plans to retire anytime soon.

As DHBs will cease to exist after this Thursday and we enter a new era as part of Health New Zealand, it felt like a good time to have a chat with Janis to hear about her career, and some of the changes over the years.

Janis worked in the Physiotherapy department at TPMH. At that time, it provided all the specialties, including surgery, and Janis was given her own patients to support – often people who'd had a stroke. Janis worked under the tutelage of Miss McLaughlin who, despite being blind, didn't miss a trick. If you happened to upset the boss, you would find yourself lying down on a bench completing sets of back exercises!

At the end of every week, Janis' pay envelope contained £10 – until the week after decimal currency was introduced on 10 July 1967, then she received \$20 a week.

There are tales of the wind whistling down the corridors of TPMH, or was it the ghosts? Janis said when she was working there alone, she preferred to have all the lights on. Back in the 1960s TPMH's physiotherapy unit was a hive of activity, with a Respiratory unit, a postural drainage room, mini spa baths to help ease the pain of people with arthritis: to get the bubbles going it required calling out to someone in maintenance to get the compressor on. There was an ultraviolet room for skin conditions, and a wax tub with warm paraffin wax – used to coat the hands of people with arthritis. After a dip in the warm wax, hands were wrapped in greaseproof paper and a blanket glove to ease the pain. It's believed some female staff would 'test' the temperature of the paraffin wax quite often – as it left their hands beautifully soft.

There are vivid stories of romance involving administration staff and junior doctors – and we will not be naming names. Suffice to say there was enough going on behind the pillars at TPMH to make today's Shortland Street writers blush.

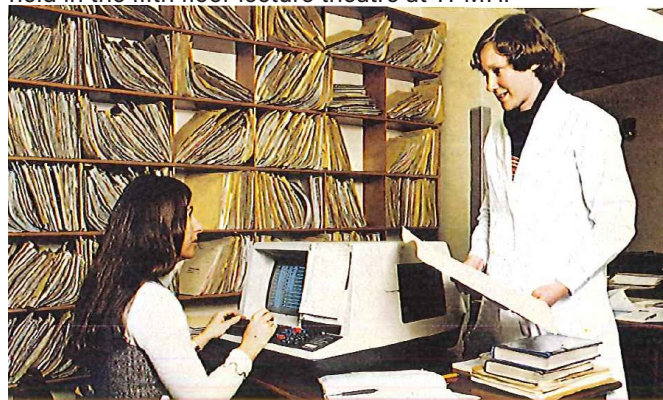
After a year as a Physio Aide, Janis branched out into Clinical Records and relocated to Christchurch Hospital. In those days it was all concertina files and manila folders from floor to ceiling.

There were no computers, and Janis quickly managed to find a role doing the more interesting aspects of the job, and that involved providing the statistics for the Board. With her trusty adding machine, complete with a roll of white paper, she would tot up the average occupancy rates of hospital beds, bed turnover, and the turnover interval – all done manually. She took part in ongoing education to upskill herself and learnt to be a Clinical Coder.

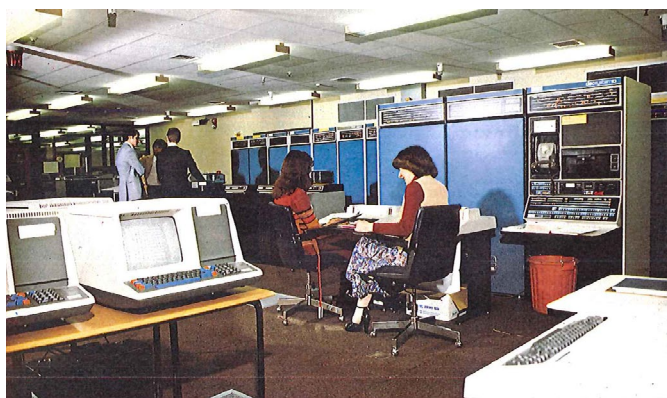
It was an exciting day at work on the 10 July 1969, when astronaut Neil Armstrong was the first man to step onto the moon. It was the talk of the tea room!

One day she had a call from someone in Wellington asking her to be part of the project team working on the introduction of the new national computer network. Janis was selected to work on the new National Health Index (NHI) number system. This involved extensive travel around the North Island visiting hospitals and health centres.

Some years later, the system was introduced. Masterton Hospital was the first to roll it out. Each patient who presented was to be asked a standard set of questions and their information would be entered into 'the system'. The trouble was, it was a very quiet day at Masterton Hospital, and it took hours before a patient arrived, so anyone present became a guinea pig, and had their information entered into the system – including Janis and the rest of the project team. Janis says she was the 32nd person to be entered into the NHI system, and her NHI number starts with AAA – putting her in a very exclusive club. She was president of the Health Information Association of New Zealand for a year and organised study days, which were held in the fifth floor lecture theatre at TPMH.



Janis, pictured on the left and a colleague entering patient data into the new computer system



Pictured above are the state of art (at the time) mainframe computers

In the 70s, patient information was coded onto 'punch cards' much like today's lotto ticket system (If you choose your own numbers) a machine would read the code and store it in one of the system's futuristic looking main-frame computers.

## Timely access to accurate medical records saves lives

Janis' role is part researcher and part detective, often bringing together various pieces of information to form a full medical record. In the past, people with the same name and birth date had occasionally had medical events recorded under the incorrect NHI number, but this is no match for super-sleuth Janis whose knowledge of the quirks of various systems throughout the last half a century is second to none.

*Her motto is 'never accept something at face value – if something doesn't look or feel right, you can bet your bottom dollar it's not.*

She says she instils the importance of the work of Clinical Records staff with her team at every opportunity.

"I sometimes feel the work of Clinical Records isn't given the recognition it deserves," she says, "I definitely feel like we are an integral part of the team – we may not be there in a uniform with the patients, but we are beaver away in the background, ensuring patient notes are complete and securely stored. It's a very responsible job, as the Clinical Record can inform future treatment. It's certainly not 'just a pile of paper' to us. It's valuable information about an individual's interactions with our health services."

In her Medical Records roles, Janis has worked in various locations including Christchurch Hospital, Hillmorton, back across to TPMH, where thousands of paper records were stored in the basement and sadly were flooded after a pipe burst just before a long weekend in 1992. Water was gushing out at a rate of 80 litres a second and the basement soon filled up. Thousands of paper files were sodden and soiled with silt.

Janis worked on this project for a number of years and enjoyed the travel and meeting people from around the country.

In the 80s the use of computers really took off and changed the way health information was stored. Hospitals up and down the country were developing their own systems, Paxus and Continuum were a couple of the bigger systems. Having a single national system was far more efficient and made sense in terms of common language and processes.

Data integrity and the release of information for Privacy Act requests, are two things Janis works on currently, particularly records for mental health patients. "Many people are unwell when they are admitted and can't recall much about their time in our care, so are keen to see their medical records, often years after their treatment," Janis says.

Kiwi ingenuity saved the day though: discarded wire framed beds were stacked high and used as drying racks to lay out pages of notes, so they could still be retrieved in an instant when needed.

Some medical records go back to the 1850s, where the language and terminology was very different to that used today. When was someone last 'Detained by way of being an imbecile'? Janis also remembers the [Coronation Hospital](#), which housed the [Cashmere Sanatorium for TB patients](#) and the [Children's Fresh Air Home](#). These hospital facilities were located on top of, and on the slopes of, what is now known as Huntsbury Hill.

Janis clearly recalls the terror of having to drive a large Hospital Board car up the steep, narrow winding road to the Coronation Hospital.

"It had a column gear change on the steering wheel, and without power steering took quite a bit to navigate the bends, but I managed it, and was so relieved to return it to the car pool manager unscathed!"

These days Janis specialises in providing information to individuals who have requested their medical records under the Privacy Act, specifically in relation to mental health care.

"I find it incredibly rewarding to be able to help people piece together their own history," she said.

"There have been some fascinating family experiences I have been able to assist with, and I won't go into details, as that would breach privacy – but one case involved an error on the part of another agency, and through dogged determination and perseverance I managed to un-earth the facts and provide closure for a family".



"It's not every day you get a big bunch of flowers arrive from a grateful member of the public, for simply doing your job. Helping people is so rewarding, I find it incredibly satisfying work."

Janis enjoys her role, the people contact, and doing work that matters – and there's no sign of her slowing down anytime soon. "We may work behind the scenes but think of us next time your clinician looks up your medical record," she said.

With the move to Health New Zealand, Janis says we should look forward to standardised national systems, as they can save time and money.

"We'll always have our local people and our local way of working within the system and that's what matters," Janis says. "I'm always looking at how we can streamline things and improve the way we work, and I'll keep coming up with suggestions when I see them.

"On Friday we'll have a new name, and be employed by Health NZ, but I'll keep doing my work with my colleagues, for our clinicians and patients," Janis said.



Janis cuts the cake at a morning tea celebrating her 55 years of service to healthcare in Canterbury



**Are you  
winter  
ready?**

**STAY WELL  
THIS WINTER**



# Stay well this winter

Winter 2022 is already a challenging one.

The usual cold weather is here, but on top of this, winter illnesses are having a real impact across Canterbury.

After a couple of years of closed borders, flu and other infectious illnesses are back, as well as infections we haven't seen for some time, such as measles and whooping cough.

Alongside new COVID-19 variants, this is a recipe for a difficult winter here in Waitaha (Canterbury).

## Be prepared

Winter illnesses don't have to stop you doing the things you love. Keeping yourself well this winter is all about being prepared.

Vaccination is the best defence against many preventable illnesses. It's essential that we are all up to date with our protection for flu, COVID-19 and other illnesses like measles. You can find out if you are up to date by talking to your general practice team or health provider.

## Your winter-ready checklist

Protect the ones you love by making sure you're winter-ready:

- › Eat well and stay active. These play an important part in our overall health and wellbeing, including our ability to fight off illness. Getting a good night's sleep also helps.
- › Get your Winter Wellness kit together. This might include painkillers, a thermometer, tissues, cold and flu medications, enough food and household items for a few days, and a good stock of the regular medicines you or your whānau will need.
- › Make sure you and your whānau are up to date with all available vaccinations against infectious diseases like influenza, measles, mumps and rubella (MMR), chicken pox, whooping cough, pneumococcal diseases and COVID-19.



COVID-19 has taught us a lot about how effective simple hygiene can be at protecting us from all airborne viruses, such as the flu:

- › Wear a mask when you're out in public
- › Maintain good hand hygiene by washing and drying your hands thoroughly or using alcohol-based hand sanitiser

If your symptoms worsen or you are concerned about the health of someone you care for, call Healthline on 0800 611 116, for free health advice 24/7, or your doctor.

Noho ora i tēnei takurua - stay well this winter, Canterbury!

# Library work “a privilege and a joy”

Canterbury Medical Library Manager Marg Walker retires on Thursday after nearly 30 years of service.

She is the longest serving library staff member.

Marg joined the Canterbury Medical Library on the cusp of health-wide system changes following the implementation of the Acute Services Review in the early 90s. Over the years numerous changes were to follow in the delivery and development of library services including relocation of branch library services and updated software systems and reference services, often coupled with financial constraints.

The earthquake and pandemic events added another layer of complexity to her role. Marg instinctively and successfully oversaw these challenges to ensure our library service continued for the benefit of both staff, students and library staff. This is a credit to her leadership and management.

“I’ve absolutely loved my work as Library Manager for Canterbury DHB and University of Canterbury staff and students,” Marg says.

“Myself, and all the library staff, enjoy hearing about the work being done by Canterbury DHB staff, and we get great pleasure from helping them get the information they need.

“We’re so proud of you all and of the excellent service you continue to give through earthquakes, pandemics, and staff shortages. Canterbury DHB staff are amazing!

“It’s been a privilege and a pleasure to provide services to Canterbury DHB staff. All my very best wishes to you all for the future,” Marg says.

As a manager Marg is known for always being approachable, taking a genuine interest in library staff, and creating an excellent environment in which to work. She encouraged and supported library staff with professional development, including attending courses or completing professional library registration with the Library Association of New Zealand Aotearoa (LIANZA).



Librarian Marg Walker

Marg herself attained Associateship with LIANZA.

We really appreciate her hard work over the years. She has been an invaluable staff member, dedicated to our library service and the wider library community, all approached with a positive attitude and humour.

Her presence will be greatly missed.

Thank you Marg. All the very best for a well-deserved retirement.

# Reflections of pioneer Haematology nurse

Fifty-four years in the nursing profession is a remarkable achievement and one of dedication to Christchurch Hospital. Now Jane Allen has retired and is moving on to life's next adventure.

Haematology was Jane's first love. She has been passionate about providing exemplary nursing care for patients with haematological diseases.

Jane's nursing journey began in Medical Ward 8 where she was Sister-in-Charge. She attended the International Cancer conference in London in 1978 and the following year visited the Haematology Unit at St Vincent's Hospital, Sydney.

In 1975, with Jane as Charge Nurse, Christchurch Hospital's Haematology/Medical Ward moved to Riverside Ward 29. It was in this setting that New Zealand's first allogenic transplant (taking bone marrow from a matched donor) was performed. This was followed by New Zealand's first peripheral blood stem cell harvest (collecting stem cells from the blood).

A further advance in the treatment of Haematology patients led to the performing of autologous transplants (harvesting the patient's own bone marrow) and reinfusing it following chemotherapy and radiation.

In 1982 the vision to have a dedicated South Island Bone Marrow Transplant Unit (BMTU) was initiated by Clinical Director, Haematology Michael Beard. He and Jane worked together finding ways in which this could be realised. Jane travelled to numerous international BMTU centres overseas and was greatly involved in the project, participating in the design, development and establishment of the South Island BMTU.

Finally, in 1991 the goal was achieved with Jane as the unit's Nurse Manager.

Jane identified the importance of research-based nursing protocols and guidelines for this new speciality and following a further visit to the Sydney and Brisbane's BMTUs developed the first New Zealand nursing protocols for the management and care of Haematology and Bone Marrow Transplant patients.

The first matched unrelated donor transplant was carried out in 1992 in the BMTU in Christchurch Hospital. The South Island BMTU, as it became, was a New Zealand first, paving the way for future centres.



Jane is pictured holding a bag of stem cells (left) and a bag of blood cells

In 1995 Jane flew 5000km on a 'life or death mission' from Christchurch to the Royal Perth Hospital return carrying a priceless cargo of fresh human donor bone marrow to a waiting recipient back in the BMTU. At 1130am the marrow reinfusion began and 90 minutes later the procedure was complete.

At the time Jane was interviewed by The Press newspaper and said:

"You've got someone's life in a chilly bin and you have to protect it with your own"

Jane presented at many international conferences, nursing symposiums and co-authored several Haematology publications between 1991- 1995. She had a change of direction in 1996, and was appointed Infection Control Officer for Canterbury DHB.

Jane was able to take the knowledge and skills she had used in the prevention of infection of severely immunocompromised patients, to wider issues relating to Infection Prevention and Control.



In 2001 and 2003, under the auspices of the New Zealand Vietnam Health Trust, Jane visited Qui Nhon in Bin Dinh Province, Vietnam, and assisted in creating the job description for a Volunteer Abroad Infection Control Nurse Specialist.

During the visit she also provided advice on infection control measures in the province's hospitals.

Jane was appointed Charge Nurse Manager of Women's Health Outpatient services in 2000, where she developed and established the Hysteroscopy Service in collaboration with the consultant gynaecologists to streamline investigations undertaken for patients.

She was part of the relocation team that moved the Outpatients service at the old Christchurch Women's Hospital to the new one. This was followed by the

establishment of the Anaesthetic Assessment Clinic for Gynaecology pre- operative patients.

Jane then joined the Orthopaedic Outpatient team and finally the Customer Services team.

Haematology nurses are indebted to Jane. She passed on her extensive wisdom, knowledge and experience gained over almost two decades. She leaves a remarkable legacy. Her desire to lead change and develop Clinical Haematology as a nursing specialty through research and education continues to this today and ensures patients receive the best care outcomes.

## 2022 Minister of Health Volunteer Awards

During Te Wiki Tūao ā-Motu National Volunteer Week (19-25 June) it was great to see the efforts of Cantabrians formally recognised.

The annual Minister of Health Volunteer Awards were presented by Minister Andrew Little on 20 June and three Canterbury groups were among the recipients.

In the category of Community or NGO Health Service Team Awards, the Outstanding Achievement prize went to One Mother to Another. For the past six years, under the leadership of Chief Executive and co-founder Joy Reid, One Mother to Another has been providing free care packages

to parents and caregivers with sick children in hospital. Around 100 people have volunteered 3427 hours in the past year to deliver 3500 One Mother to Another care packages to mothers and carers in seven wards of four South Island hospitals and one community support organisation.

It is a phenomenal labour of love that makes a huge difference to whānau who are experiencing a very difficult and stressful time.

In the Youth Health Volunteer Team Awards category, the Youth Advisory Council (YAC), Canterbury District Health Board was awarded a runner-up prize.



From left, Chairperson of One Mother to Another, Robert Murfitt, Trustee Graham Dockerill, Volunteer Coordinator Catherine Holland, CEO Joy Reid and Minister of Health Andrew Little

For the past eight years, YAC has been working alongside Canterbury DHB on a range of initiatives to improve the experience of rangatahi in the health system. The Council delivers workshops and training for health staff to support positive engagement with rangatahi and advocate for young people to have a voice in their own health care. The YAC 'backpacks' are famous. Provided to every rangatahi aged between 14 and 24 admitted to hospital, these backpacks contain boredom busters and information related to their hospital stay. More recently, YAC has produced podcasts and run information evenings on health issues affecting young people.



Also recognised with a runner-up prize in this category were students from Cashmere High (years 12 and 13).

In 2021, Hōhepa Canterbury, a disability support service provider supporting 140 people with intellectual disabilities, joined forces with its neighbour, Cashmere High School. The residents and participants in the programmes of Hōhepa are offered diverse living options, learning and activity programmes, community participation and therapies.

The year 12 and 13 students use their study break and sometimes their free time after school, to help out with the activities and spend time with the participants. They bring their own interests and skills to engage in sports, games, crafts or music.

The wonderful team of more than 50 volunteers at Radio Lollipop were recognised with a Volunteering Canterbury award last week. For nine years, Radio Lollipop has provided entertainment, support and an escape from the stresses of being in hospital, to children, whānau and even staff. Operating out of a purpose-built radio studio on level 7 of Waipapa on the Christchurch Hospital campus, children can request their favourite songs, win prizes and hear their own voices on the radio. Some can also become DJs themselves.

Radio Lollipop believes in the healing power of play - providing smiles and laughter to tamariki at a time when they need it most. Those activities give youngsters/siblings and whānau a haven of normality in the hospital day which in other respects can be a strange, difficult and often scary place.



From left, Youth Advisory Council Co-Chairs Chelsea Skinner and Jasmine Irving receiving their award from Minister of Health Andrew Little



From left, Deputy Chairperson of Radio Lollipop Kay Weeks, Lynette from Volunteering Canterbury and Radio Lollipop Chairperson Nicky Horne

# Data and Digital sub-committee established

Data and Digital are key parts of our health system. They help us manage patient flow and care and provide us with information to make key decisions. They also support our models of care and ways of working to improve how our people, whānau and communities experience and access healthcare.

So how do we make sure the investment we have for Data and Digital is going to the right area? How do we know if it's meeting clinical, business and patient/consumer needs? How do we prioritise and sequence the allocation of funds we have? How do our plans align to what is happening in Te Wai Pounamu or across Aotearoa?

To help us collaboratively respond and consider broader system-wide needs, we have established a **Data and Digital Governance Sub-Committee** (a sub-committee of the Executive Management Committee).

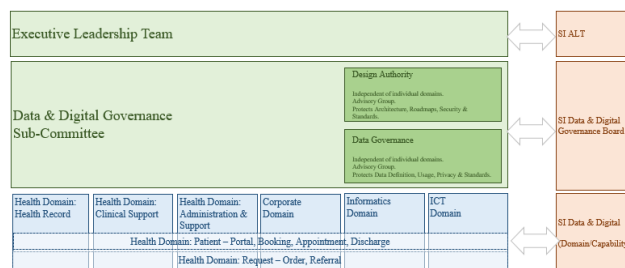
The sub-committee is chaired by Executive Director for Planning and Funding, Tracey Maisey with other executives onboard to represent Nursing, Allied Health, Midwifery, Clinical, Finance, Māori and Pacific Health, and Information Communication Technology (ICT).

The purpose of this sub-committee is to provide a clinical and business-based view and prioritisation of ICT investment including:

- › Strategies and roadmaps (plans)
- › Investment portfolio (changes)
- › Operational performance (operations)

**Domains and Advisory Groups** have also been introduced to develop more detailed data and digital strategies and roadmaps that represent areas of the health system. These advisory groups and domains report to the sub-committee and are being established over the next several months, starting with:

- › Data Governance
- › Design Authority
- › Corporate Domain
- › Health Domain: Clinical Support
- › ICT Domain
- › Informatics Domain



The domain groups will consider and prioritise the requests that fall within their area, taking into account any risks and issues as well as costs and benefits. This information will be used to seek support and funding from the Sub-committee. The Domain Chairs will also meet regularly with the sub-committee to report on progress and performance for their area.

The sub-committee's role will be the prioritisation, scheduling, funding and resourcing for approved ICT investments that deliver to the approved strategies and roadmaps. The sub-committee may also delegate discretionary funds for minor enhancement investments to be administered by the domains and ISG directly.

If departments are considering data and digital activity or changes they will need to proactively engage with domains and the sub-committee, as the first step.

Chief Digital Officer James Allison is excited about this response. "In coming to Canterbury, I was asked how as CDO I would prioritise projects, for example, should Maternity go before Oncology. I noted that I do not see that as the responsibility of any one individual, but of the collective, and we need a collaborative framework to enable these decisions. As we transition into Health New Zealand I am excited that we have reached this point where these conversations can occur. With the clear visibility that our governance framework will provide, we will be able to do more and go faster, together".

Tracey says this is an exciting opportunity to enable better health, better care, better value, enhanced equity and staff wellbeing through prioritised targeted data and digital investments.

"I am looking forward to being able to support our clinical and corporate teams with a structured decision-making framework that ensures our staff and key stakeholders know what will be delivered, and when; and what is and isn't being supported, and why."

If you are interested in learning more about Data and Digital Governance, please send a Teams Chat Message to **Debra Parker**.

# One minute with...

## Janine Maher, Communications Contractor



### What does your job involve?

My main focus is working closely with Executive Director of Communications Karalyn Van Deursen (and her team), along with communications managers from the other DHBs around the South Island, on the communications supporting our transition to Health NZ. I'm also a bit of the 'how can I help' person for the Communications team while they've been dealing with the intense and large volume of work during COVID-19. So, you might find me helping out on a whole lot of different communications, from our Canterbury measles campaign, to ISG projects!

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

I've worked specifically in health communications for over 15 years now, both here in Aotearoa and in England. I wanted to use my skills to do something that would help people, and I also love hearing a good yarn and sharing it. So, communications has been the perfect role for me!

### What do you like about it?

I love working with people, and I get to work with a lot of fab people every day here and in the wider Canterbury DHB community. I also love that the work we all collectively do in our health community can have a really positive impact on people's lives. We all deserve the opportunity to have the best health and wellbeing that we can.

### What are the challenging bits?

Juggling lots of different bits of information at one time and trying to remember which bit fits where under the pressure of a deadline! As a Communications person you're also often at the 'end of the line' waiting for information or sign-off from people, so it can be a bit stressful knowing the deadline won't change but how long you have to produce a piece of work might!

### Who inspires you and why?

Our frontline health professionals have been beyond an inspiration to me throughout my health communications career, and of course especially in the last few years. Their professionalism, care and kindness make me want to do better in my role every day!

### 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?

You can't really go wrong with a set of values like that now can you? With us all under a lot of pressure after a few years of both the personal and professional impacts of COVID-19, being extra caring and respectful of others is probably top of my list at the moment. Who knows what the person on the other end of the phone or meeting is going through? So, if you start with kindness you're in a pretty good space to head in the right direction I reckon.

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

My ability to do a headstand and eat desserts larger than my face. Not at the same time of course.

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

I've just moved home to Ōtautahi after a good 20 years away, so there's nowhere else in the world I'd want to be right now. It's lovely being home.

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

Coffee, yoga and a walk somewhere in nature. Heaven!

### What's your favourite food?

My Mama's spag bol. Nothing beats it.

### And your favourite music?

I'm a real music fan and love most genres - but if I have to pick one favourite I can't go past David Bowie.



## Something For You



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



**Evo Cycles** - 2/40 Carmen Road, Hornby

Get special discounts on a wide range of bikes and accessories with Evo Cycles, see more information on their [winter sale promotion here](#). Offers are valid until October 31 2022.

**Evo Cycles is our provider as part of the Government E-bike scheme**, you can order your bike from the [website here](#).

## Torpedo7

**Torpedo7** - friends and family Offer from 02-17 July 2022

Torpedo7 is offering up to 50 percent off on huge range of gear for Canterbury and West Coast DHB staff and their family. Show [this flyer](#) instore printed out or on your device or enter the promo code mentioned in the flyer at the checkout on the website [www.torpedo7.co.nz](http://www.torpedo7.co.nz)



**Porters Ski Field** - Springfield

Porters Ski Field would like to offer Canterbury and West Coast DHB staff season passes at the special rate of \$499 (This is usually \$659). This is available until **1 July 2022**. The season pass can be extended to immediate family members. There will be no blackout dates on the season passes i.e they can be used during holidays and weekends.

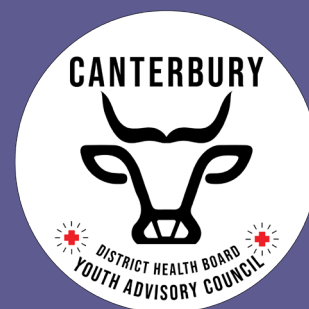
This compliments the current offer of 50 percent off lift passes midweek (outside of school holidays).

Contact [office@skiporters.co.nz](mailto:office@skiporters.co.nz) for more information and to purchase.



# Professional Development ✦ Opportunities! ✦

**Want to learn how to be more inclusive & accessible for young people in our health system?**



The CDHB Youth Advisory Council offer professional development for health professionals across the health sector who would like to learn more about how to work with young people and how to make their service more accessible, inclusive, and youth-friendly for young people!

We can tailor our session(s) to suit your needs as a service or health professional. We have been lucky so far to present to various groups, nurses in particular CDHB services, and different organisations across the health sector. But we would love to come & have a chat with your health professionals!

Get in touch with us at [cdhbyouth@gmail.com](mailto:cdhbyouth@gmail.com) if you are interested in us running some professional development or would like to know more!





**NZ TELEHEALTH**  
FORUM & RESOURCE CENTRE

YOU'RE INVITED TO A TELEHEALTH WEBINAR:

# Lessons Learnt and Highlights - Community Telehealth Initiatives

**THURSDAY 30 JUNE, 7-8PM**



**MODERATOR:**  
**Jess White**

*Practice Plus General  
Manager/Programme  
Director Health Care  
Home and Digital Health*

There are some fantastic initiatives and projects for telehealth in the community and this month we feature a great line-up of panellists who are doing some incredible telehealth work in their region.

Facilitated by Jess White and Nicole Redfern, Co-Chairs of NZTF Professionals Community of Practice working group - panellists will talk about their own experiences in telehealth, and share their learnings, including what's working and what's not - along with their highlights and lessons learnt along the way.

Telehealth is not about efficiency, it's about providing accessible, equitable options for healthcare and to give patients more choice to access their health providers. We're excited to bring you a wide range of panellists who are passionate about improving health equity through delivering telehealth in Aotearoa.

Be part of the online conversation and register today!



**MODERATOR:**  
**Nicole Redfern**

*Facilitator - TeleHealth,  
Support and Training,  
ISG, CDHB*

## PANELLISTS

**Jen Coatsworth**

Lakes DHB Digital Enablement  
Programme Manager

**Ani Olson**

Pokapū o te Taiwhenua Coordinator

**Sue Westbrook**

Pokapū o te Taiwhenua Coordinator

**Amio Matenga Ikihele**

Innovations Lead - Moana Research

**Malcolm Kendall**

National Māori Advisor – Customers &  
Supporters, Hato Hone St John.

## REGISTRATIONS REQUIRED

Please use the following link: [telehealth.org.nz/initiatives](https://telehealth.org.nz/initiatives)



# WINTER RESEARCH SERIES



BEGINNING **WEDNESDAY 6TH JULY**

## Seminar 1 – 6th July Evaluating Innovations in Health

Come and hear some of the latest research findings, and meet our researchers over tea and coffee. Held every three weeks at Manawa, Wednesday 4-5pm.

[www.healthprecinct.org.nz](http://www.healthprecinct.org.nz)

Brought to you by Te Papa Hauora and its partners



## Seminar 1 – 6th July Evaluating Innovations in Health

### Speakers include:

#### Dr Mairin Taylor

Te Kaupeka Oranga/ Faculty of Health,  
University of Canterbury  
Online Mindfulness Treatment for Children and families  
with Attention-Deficit/Hyperactivity Disorder (ADHD)

#### Julie Bowen-Withington

Ara Institute of Canterbury  
Using high fidelity simulation as an education  
platform for pre-registration nursing education

#### Isaac Tranter-Entwistle

Canterbury District Health Board  
Computer vision techniques to solve problems  
associated with laparoscopic surgery

#### Dr Martina Paumann-Page

University of Otago, Christchurch  
Innovative Approaches to Cancer Treatment

> To register attendance, please email  
[admin@healthprecinct.org.nz](mailto:admin@healthprecinct.org.nz)

## Winter Research Series

### Seminar 1 – July 6

**Evaluating Innovations  
in Health**

Where: Manawa HP108

### Seminar 2 – July 27

**Improving health for  
Māori and Pasifika**

Where: Manawa HP108

### Seminar 3 – August 17

**Sustainable Research  
in Healthcare**

Where: Manawa HP108

### Seminar 4 – September 7

**Learning from the Pandemic**

Where: Manawa HP108

### Seminar 5 – September 28

**Co-producing Research**

Where: Manawa HP314



# COVID-19

## Omicron Update 6: Disability providers

21 June 2022

*This is the sixth in a series of Omicron related updates to Disability providers. Updates provide new or updated information as it becomes available and is current at the time of publishing. This covers important updates for the sector (page 2), information and updates for the disability community (page 5), and COVID Care in the Community Hubs (page 7) and also includes information on Winter Wellness and Influenza Vaccinations.*

Click [here](#) to read the full update.



**Are you winter ready?**

- Kōrero with whānau and check everyone's vaccinations are up to date
- Flu, Measles, COVID-19, childhood immunisations

[cdhb.health.nz/winterwellness](https://cdhb.health.nz/winterwellness)

Canterbury  
District Health Board  
Te Pōari Hauora o Wairarapa

**STAY WELL  
THIS WINTER**