



Continuous quality improvement shown in the latest Health Quality & Safety Commission's Quality Safety Markers report

The reports along with accompanying tables and graphs chart steady progress and improvements to meet important markers of quality care, however, despite being the only DHB to achieve 100% compliance in assessing patients for their falls risk and 100% compliance in creating an individual care plan for those identified as being at risk of a fall, some patients in our hospitals still experience falls. There's clearly more we need to do to further minimise risks and provide the safest possible care and I thank you for your continued efforts in this important area.

The Health Quality and Safety Commission's latest [Quality Safety Markers' report](#), just published, highlights that despite all the challenges of the past five years, the Canterbury Health System remains focused on continuous quality improvement.

The key quality safety markers chart our progress as we continue to strive towards improved standards of high quality and safe care.

It's pretty remarkable given we've all been working in some pretty difficult conditions post- quakes and have had a lot of change going on around us, both at work and home.

I feel incredibly proud when we see the results of our efforts in the latest QSM report that show patient safety remains the cornerstone of high-quality health care for people in Canterbury.

Canterbury has undeniably risen to the challenge to make improvements across all markers. Since the introduction of the QSMs in 2013, we have maintained a strong performance in falls prevention (giving older patients a falls risk assessment and developing a care plan for them), and made great improvements on our hand hygiene.

However we must not get complacent. Quality and safety improvements should always be a priority in everything we do.

By delivering quality and safe care we achieve a reduction in harm, save time and avoid costly mistakes.

It's small changes to the way you work that can make a huge difference. The converse applies when things go wrong. What may seem like a minor oversight or error can have devastating consequences for a patient. It's estimated around 10 percent of hospitalised patients may experience harm.

Patient safety is a priority for everyone throughout the Canterbury Health System – and not just something that happens in our hospitals. Whether you provide care in a person's home, general practice or non-government organisation, quality improvement and a drive to make things better underpins everything we do. This is even more critical in the Canterbury Health System with the increasing emphasis on delivering the right care, in the right place, at the right time and by the right person.

Quality and patient safety needs to be top of mind at all times with every effort taken to ensure better care is provided everyday. Being able to measure and monitor our progress through the Quality Safety Markers is another important tool available to help make the invisible, visible. They help us see what we're doing well and where we can do better.

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Quality Safety Markers – What are they?

The QSMs are sets of related indicators concentrating on the four areas of harm covered by campaigns promoted by the Health Quality and Safety Commission:

- » falls
- » healthcare associated infections:
 - » central line associated bacteraemia (this marker was stopped in December 2014)
 - » hand hygiene
 - » surgical site infection
- » perioperative harm
- » medication safety.

The markers chosen are essential processes that should be maintained all the time, so the threshold is set at 90 percent in most cases. Outcome measures are shown at a national level, to estimate the size of the problem that the campaign is addressing. The markers set the following thresholds for DHBs' use of interventions and practices known to reduce patient harm:

- » 90 percent of older patients are given a falls risk assessment
- » 80 percent compliance with good hand hygiene practice
- » all three parts of the WHO surgical safety checklist used in 90 percent of operations
- » 100 percent of primary hip and knee replacement patients receiving prophylactic antibiotics 0-60 minutes before incision
- » 95 percent of hip and knee replacement patients receiving 1.5g or more of cefazolin or 1.5g or more cefuroxime

- » 100 percent of hip and knee replacement patients having appropriate skin antisepsis in surgery using alcohol/chlorhexidine or alcohol/povidone iodine.

One of our real success stories is falls prevention where we achieve 100% compliance for all patients being given a falls risk assessment and 100% of patients at risk of falling received an individualised care plan. Not only is preventing falls better for patients, it's also better for our health system. Despite the measures we have in place and our high level of compliance falls are still happening, so this is an area we continue to focus on with a range of quality improvement initiatives.

The poster above shows some of the positive aspects of our falls prevention programmes. Preventing falls is important and remains a spotlight area of focus for our health system.



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Congratulations to our 2016 IPANZ finalists

Last week I attended the [IPANZ Awards](#) in Wellington – congratulations to two entrants from the Canterbury Health System who were named as finalists. This is quite an achievement as the organisers said they had a record number of entries this year. Well done to everyone who entered.

The process of entering is useful and it's another way we reflect on our practice and the fantastic outcomes we are achieving for Cantabrians.

The team from Travis Road Medical were finalists in the category Improving Public Value through Business Transformation. The Integrated Family Health Service is certainly a winner for their enrolled patients and the staff who work there. To learn more about how they do things differently, read their [case study](#).

The All Right? campaign – was named a finalist in the Excellence in Public Engagement category. Anyone living in Canterbury over the past few years will be aware of the campaign, but you may not be aware how the finely-tuned campaign themes are based on research. In line with best-practice the various phases of the All Right? campaign are designed, tested and tweaked to meet the needs of people at different stages of recovery. Have you visited their [website](#) lately? Visit allright.org.nz and find your hidden strengths!

Making our fleet vehicle use smarter

I've often talked about working smarter in order to save the health dollar. Canterbury DHB is embarking on a new system of fleet booking which I believe will make much more efficient use of our vehicles and (in the long term) life easier for car users.

We are switching to SMARTRAK, a fleet booking and management web based application that will give us a complete view of our vehicles day-to-day operation. Through it we'll be able to:

- » Gain a more accurate picture of fleet vehicle use.
- » Make sure staff in greatest need of a fleet vehicle have access to one.
- » Reduce operational costs.
- » Gain an accurate recording of FBT.
- » Provide a health & safety benefit to users.

Individual DHB vehicle users will:

- » Be able to book cars online from home.
- » Get a reminder about their book via email.
- » Be able to carpool more – the booking system will show which cars are going out, when and where.

The switchover means that how you book, use and record use of CDHB vehicles will change. Regular users and key holders will receive an email detailing the changes and providing instructions on how to use SMARTRAK. Once in place all fleet vehicle users will need to use this system if they want to use a fleet vehicle. There are further details about the things you will need to do differently on the [intranet](#).

The new system is already being trialled by one of our teams (Adult Community Therapy Service), will be available to Rangiora staff this week and rolled out to other teams as appropriate. West Coast DHB staff will also come online as part of the rollout. Each team will be contacted prior to switching over, please be patient.

I know change can be unsettling and the new system will need a little extra work from car users, at least to begin with, but it will make a substantial difference to fleet efficiencies. There will be further information about SMARTRAK in upcoming CEO Updates.

Have a great week

David



David Meates
CEO Canterbury District Health Board

Facilities Fast Facts

Fast Facts – Burwood

Dan Coward's next staff forums will be held on 20 July at Burwood Hospital, and on 21 July in the Heathcote building for TPMH staff.

The secure bicycle storage area near the Back of House building is currently being constructed and work is estimated to take around one month. In the meantime, other bike racks are available, including outside the new main entrance and near the Admitting Unit entrance.

The demolition of the old Birthing Unit and Brain Injury Rehabilitation Service building got underway over the weekend. Because this building is "landlocked" by other buildings, it has been necessary to close the staff entrance via the container walkway (the old temporary main entrance) and a small area of the adjoining car park for a few days, to gain access to the site. The car parks will reopen at the end of Friday 15 July and the staff entrance will reopen on Saturday 16 July.

Fast Facts - Christchurch



The first concrete pour for the floors of the Acute Services building is planned to take place overnight from Thursday 14 July into Friday 15 July. The pour is for the floor of Level 3 of the building. The pour will start at around 1.30 am on Friday 15 July and take around five hours to complete. This pour is the first of many for the building, but none will be as large as the foundation pours that were done in 2015.

The photo shows a view from Hagley Park, taken on July 4, of the steel framing and the cranes, with Christchurch Women's Hospital on the right.

The new St Asaph Substation project is drawing to a close, with the finishing touches being completed on the building and landscaping. This Importance Level 4 (IL4) building is essential to the running of Christchurch Hospital and houses some of the major electrical distribution equipment for the hospital campus. The building contains two high voltage electrical supplies from the Orion network, two banks of high-voltage circuit breakers, three 1000 kVA transformers, two low-voltage main switchboards and a 1000 kVA back-up diesel generator.

All of this equipment was transferred from the old blue public car park building, which is now being demolished. Several major items such as the generator and transformers were reused to keep costs as low as possible.

Even though it is a utility building, the Christchurch City Council required that the building was pleasing to the eye. The decoration on the front and side represents traces on an electronic printed circuit board.



Reminder – Name the Cranes!

Christchurch Hospital's youngest patients (and children of staff members) have a chance to get involved in the Acute Services building project by choosing a name for each of the tower cranes on site. Look out for the posters with more details, ask your charge nurse manager for information, or download an entry form from cdhb.health.nz/itsallhappening

The closing date for entries is 28 July.



Bouquets

Ward 28 (Nephrology and Neurosurgery), Christchurch Hospital

Our daughter was in the special care room in June. Nurses – Jen, Lucy and Jenny were truly wonderful with her – not only caring and diligent but they also developed a relationship in an extremely short time inspiring her trust – hence she would follow their advice. They were wonderful with parents too. The food services woman was also very kind. Many thanks for your care, diligence and kindness to our daughter.

Child's Activity Room, Christchurch Hospital

My child would not do his blood test - kicked, screamed, ran, bit and punched. It was horrible. But after play therapy - No tears. It was done! I cannot believe it. Thank you.

Maintenance, Christchurch Hospital

Ruben the sparky always has a pleasant attitude and most helpful member of the team we have dealt with. Thanks from Radiology Reception, Christchurch Hospital.

Ward 15 and Gastro Team, Christchurch Hospital

I made my first ever admission visit to a hospital today for a liver biopsy, which was administered with superb professionalism. I cannot praise their polite, patient communication and calm too highly. Lionel the orderly needs commendation as for my Ward 15 nurse, Diane. Please commend them all for making this a calming visit – also RMO John Llewelyn.

Birthing Suite – Christchurch Women's Hospital

To the team of midwives, doctors and nurses (and any other helpers). Thank you so much for all of your kindness, advice and for your wonderful service over the past three days. It has meant so much to both me and my partner. To have friendly staff who are professional, respectful and caring has made the birth of our first child a much more positive experience (with complications being handled well). My partner is recovering well and feels she can trust the team if she has any worries - this means the world to me. Thank you so very much - keep up the awesome work you do for these amazing mothers.

Occupational Therapy Unit, Ward 19, Christchurch Hospital

The whole of the staff on these wards are absolutely wonderful, right from the cleaners and caterers through all the levels of nursing and including the orderlies and doctors of the spinal unit. No problem big or small hasn't been handled without the utmost respect for my recovery.

Ward 19, Christchurch Hospital

I cannot speak highly enough of the care and attention I have been receiving these past eight days in Ward 19. Nothing has been a bother to staff and they have attended to my every whim and need. The meals have all been excellent, and so many choices. A big thank you for the Canterbury District Health Board. My husband and I have been overwhelmed with the care and

attention given to me. Everyone here at this hospital deserves positive feedback. Does one say, I've enjoyed my stay in Ward 19! Thank you.

Birthing Suite – Christchurch Women's Hospital

The surgeons and staff that delivered my son were amazing! I arrived just in time for the C-section. They made me feel calm and relaxed, and I felt my partner and son were in the best place possible. Thank you all so very much.

Emergency Department, Ward 19, X-ray, CT and Bloods, Christchurch Hospital

I have spent seven days in the wonderful care of, firstly the Emergency Department, then Ward 19. I also encountered X-ray and CT services while in the ward. I cannot praise enough the care, compassion, patience and support I received from all the people I had contact with. From the cleaners and food staff to the incredible nurses and doctors who had to break some difficult news to me and who helped me break the news to my family. I have only praise and huge gratitude for their help and friendly, kind and considerate care. I thank you all so much for all you have done for me. Keep up the good work. You are all amazing.

Ward 12 Cardiology and Coronary Care Unit, Christchurch Hospital

If asked to rate the standard of care and professionalism of ward, cath lab staff and doctors on a scale of 1 to 10 my rating would be 12. I was treated with dignity and respect and always kept

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advised of treatment options and timings. I know the public health systems gets its share of criticism but my experience was very positive. Whatever you pay your nurses, doctors and specialists it is not enough!

Eye Outpatients, Christchurch Hospital

My Dad recently had cataract surgery. I would like to acknowledge the outstanding service provided for his care. The initial outpatient appointment was well organised and very prompt with getting a date for surgery. The post op check was also very efficient. This helped my Dad immensely and he is very appreciative of the care he received and so is his family. He has a new lease on life thanks to the surgery Thank you.

Lincoln Maternity Hospital

I am writing to express my gratitude for the postnatal care received at Lincoln Maternity Hospital, and in particular the midwifery services given by Lauren. The facility as a whole was run in a warm and welcoming manner and allowed my wife

and I to relax and begin to understand our son and our new position as parents. Upon arrival we were given a guided tour of the facilities and a full explanation of what was at our disposal. All the staff were friendly and willing to help but at the same time left us to explore our new situation in our own time and were very discreet. The meals were superb and the generous home style nature of the servings were very welcomed.

Community Rehabilitation Enablement and Support Team (CREST), Older Person's Health

Many thanks for arranging the shower rail and back door grip for my mother. Both were installed by John from JKM Engineering (details from memory) who was superb and made it very easy.

Thanks too, for the blocks to raise the sofa. As you know, none of these aids was needed from mother's perspective but she now recognises that they are quite helpful! She's making very good progress. It's a remarkable return to independent living for a 96 year old!

HealthInfo Canterbury

On Saturday our 10 year old daughter was at a birthday party sleepover. Around midnight one of the girls didn't feel well. Two of the girls went off in search of the host parents. Our daughter stayed and comforted the sick friend at the same time, using an iPod, she searched Healthinfo! While she didn't come to any conclusion, she tells us that she did eliminate a few things!

Convalescent Care – Rangiora Hospital

You've certainly got the wow factor! My two weeks of rehab was exactly what I needed. My room - 5 star, the staff very helpful as well as happy - good fun. Bed very comfortable and as for the meals - well they were first class - go to the top of the class Emma. Only gripe - no happy hour! Well done team - full marks to you.

Sue Berry - a born nurse



Above: Sue Berry

A celebration of former Oxford Nurse Manager Sue Berry's life was held last Friday at her funeral at Sacred Heart Catholic Church, Oxford. Sue passed away after a brave battle with cancer on Monday 4 July.

Sue was Nurse Manager at Oxford Hospital for many years and staff at Oxford Hospital and those who knew her throughout CDHB are grieving over her death. Sue became Principal Nurse at Oxford Hospital 36 years ago. Her enthusiasm for nursing kept her working as an RN at Oxford Hospital until recently.

Colleagues who worked with Sue for many years have written the following as a tribute to her commitment and passion:

"Over the years we have enjoyed Sue's sense of fun and frivolity with both staff and patients while maintaining the dignity required of a nurse manager. Always a willing listener and an advocate for her staff in times of need, Sue was a nurse of her times, teaching love and respect and a high standard of nursing skills.

"We will remember Sue with great admiration and gratitude for what she has given us".

Oxford Hospital Nurse Manager, Sarah Harvey, says Sue would have been so proud of the care she received from the Oxford Hospital staff in her last days. Many of those staff were people Sue nurtured, taught and encouraged.

"She had incredibly high standards and always led by example. We will all miss her wisdom but most of all the loss of a woman who was so very caring, she really was a 'born nurse'".

Sue began her training at the Christchurch School of Nursing in January 1966 and worked in Canterbury since. She held a number of senior nursing positions including a decade as a nursing tutor at the Christchurch School of Nursing.

Canterbury Grand Round

Friday 15 July 2016 – 12.15pm to 1.15pm, with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker one: Siobhan Cross, Paediatric Haematologist

“0-80 in 50 years: A history of childhood Acute Lymphoblastic Leukaemia (ALL)”

Since the early 1950s paediatric ALL has transformed from a disease that was incurable and rapidly fatal to a highly curable condition where low risk patients now have a near 100% survival. This is a story initially of trial and error but then later collaboration and sequential international trials, leading to remarkable outcomes for patients.

Speaker two: Dr Wayne Morriss, Department of Anaesthesia
“Tropical Cyclone Winston – Providing the right help to Fiji”

Tropical Cyclone slammed into Fiji on 20-21 February. It was reported to be the biggest cyclone to make landfall in the Southern Hemisphere and it left scores of people dead and injured and thousands homeless. What medical help did New Zealand provide? Was it the right help?

Chair: Andrew Butler

Video Conference set up in:

- » Burwood Meeting Room
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton
- » The Princess Margaret Hospital (Please note the level three F block VC is no longer available and the level 1 F block VC has move to the Riley Lounge.)
- » Pegasus, 160 Bealey Ave, Room 2

All staff and students welcome

Talks will be available within two weeks on the [intranet](#).

Next Grand Round is on Friday 22 July 2016 in the Rolleston Lecture Theatre.

Convenor: Dr R L Spearing, ruth.spearing@cdhb.health.nz

Green Prescription and Be Active Canterbury

Green Prescription is an effective way of increasing physical activity and has been running for over 14 years making significant improvements to New Zealanders' health in all the ways to wellbeing.

The benefits are not just improving physical health but also connecting with others and letting off some of that 'steam' we can build up during the working week.

Maintaining a healthy weight, improving mental health, preventing of a range of significant illnesses and better mobility are among many other benefits of a more active lifestyle. The robustness of the Green Prescription initiative is reflected in its proven success over many years and it's so easy to get involved.

Scripts are given nationwide and issued for weight management, diabetes and heart disease. An increasing amount are given for mental health issues. But there is so much more to gain from taking part in Green prescription. You can learn a new sport or activity that you may have never thought of before and make new friends in your community.

A Green prescription can improve your wellbeing by encouraging you to take notice of Christchurch's beautiful surroundings. You will benefit from having a support person who works with you to help you become more active, and provide encouragement through phone calls, face to face meetings or support groups.

[Click here to find out more about Green Prescription.](#)

This August 14 CDHB staff will have the opportunity sign up to a Green Prescription. If you'd like to benefit from a Green Prescription there is no need to go and see your general practitioner, just [click here to register](#).

Those who register for Green Prescription are automatically registered for the BE ACTIVE programme and can try an eight week course. Courses feature different activities each week, with an emphasis on fun and 'having a go.'

All sessions are a mixture of activity and education, with speakers on subjects such as wellbeing, motivation and nutrition. All for a minimal cost of \$3 per session.

If you want to find out more on BE ACTIVE [click here](#).

active
CANTERBURY

Improved care plan templates have arrived

Improved Acute Plan and Advance Care Plan templates will be available from Wednesday 13 July.

What you will see:

- » Plans will be easier to use
- » Reduced length of the Acute Plan template
- » No compulsory fields
- » Autosave function

For Advance Care Plans the process for clinical review and publishing has not changed.

You will see this in Health Connect South if a shared care plan exists for the patient:

The screenshot shows the Health Connect South interface for a patient named Mickey Mouse. The patient's demographics are displayed, including gender (M), date of birth (12/08/1943), ethnicity (NZ European/Pasifika, Cook Island Maori), phone (03 455 0800), mobile (027 123 123), and address (101 Algon Road, Dunedin). The 'Shared Care Plans' section shows a table with the following data:

Status	Plan Name	Created	Last Modified By	Last Modified
FINAL	Acute Plan	08-Jun-2016		28-Jun-2016
DRAFT	Advance Care Plan	28-Jun-2016		28-Jun-2016

Advance Care and Acute Care plans have already significantly improved patient outcomes by recording and sharing the actions that the patient and their health professionals recommend when they are really unwell or towards the end of life.

Acute Care Planning

Acute care planning is a process that helps us safely manage patients with complex health conditions and support patient self-management. An Acute Care Plan is an editable plan that is shared across the members of a patient's care team that supports clinicians to work together.

Advance Care Planning

Advance care planning is a process of thinking about, discussing and writing down a person's wishes about the types of medical care and treatment they want to receive in the future, in particular towards the end of their life or at a time when they are not able to make their own decisions. Advance Care Plans help guide the health care team to provide the care the patient would want if they are ever too unwell to tell us.

For more information, refer to HealthPathways

Alternatively, you can contact:

Acute care planning: info@ccn.health.nz

Advance care planning: jane.goodwin@cdhb.health.nz

Virtual reality comes to Christchurch Hospital

Imagine experiencing any medical procedure, scan or test before having it done for real? A Christchurch man is making this a reality for some of Canterbury's most vulnerable patients.

Peter Dooley, Christchurch Hospital charge MRI technologist, has created 'Brydie Vision' – a virtual reality world that allows children a chance to experience a simulation of a medical procedure before getting to hospital.

Peter says the initial aim was using it for the purpose of helping patients get through having an MRI to help them feel more comfortable with the hospital setting.

"MRI scans are usually noisy, long and can be claustrophobic for patients. It can be really terrifying for some adults but particularly scary for children.

"We waste the equivalent of about four appointments every day – which is more than 1000 appointments a year lost because the patient panics during the scan and we can't proceed.

"Wasting appointments is not something we can afford when the demand for MRI scans has increased 76 percent over the past five years and is only expected to continue to rise."

Peter says Brydie Vision aims to walk the patient through the experience of having an MRI scan so they're familiar with it before they get to the machine.

"It will mean we can identify patients who might panic during the procedure before their real MRI scan and this will allow us to better manage those patients and also reduce waste."

Peter started the project after receiving a \$5000 grant from the Brydie Lauder Trust. Since then the Christchurch Hospital Volunteers have stepped in to purchase two additional units to be used throughout the hospital. Another unit was bought by the E B Milton Charitable Trust for a young patient with a rare skin condition to use at home. He has also teamed up with the University of Canterbury's Human Interface Technology Lab, to do validation research.

"There's a lot of interest in how we can use this technology to benefit both the health system and patients and that's really exciting."

Peter says the potential for the technology is huge and it's already being implemented in other areas of the hospital.

"We are using Brydie Vision in paediatrics for children who we would usually have to sedate during a procedure. The child watches whatever they want in 3D, distracting them from the procedure, which means we don't have to sedate them while they have it done.

"I would like to see this technology used throughout the hospital, particularly so every patient can experience the process of having their procedure before they get it done. It changes the meaning of informed consent because patients really will be better informed right from the beginning."



Right: Peter Dooley with 'Brydie Vision'.

Allied Health Awards

There were resounding cheers as a number of staff members came forward to receive their framed certificates last Tuesday afternoon (5 July). The inaugural Allied Health Awards event for the Christchurch Campus was held alongside the mid-year staff update. The awards gave staff the opportunity to nominate each other under eight different categories. They included Graduate of the Year Award, Supervisor of the Year, Leadership Award, Excellence in Teamwork, Quality Improvement Award, Team of the Year, Service Recognition Award and Allied Health Assistant of the Year Award, as well as a Director's Special Award.

The nominations highlighted outstanding quality of service, performance and commitment by staff, making it a positive challenge for the panel to choose. Staff were awarded their certificates by Stella Ward (Executive Director of Allied Health, Scientific and Technical), Pauline Clark (General Manager) and Garth Munro (Director of Allied Health at the Christchurch Campus). Throughout the earlier speakers and award presentations there were generous spot prizes handed out kindly donated by a number of local businesses and service providers, much to the delight of the staff present.

The Awards were presented to the following staff under these categories:

Graduate of the Year Award

For those who have started their professional journey in the last 12 months to be acknowledged for their outstanding contribution to service delivery.

Winners: Bryan Siew, Amelia Van Zoelen, Sarah Widdowson and Emma Daly



Above: From left, Sarah Widdowson and Emma Daly, Bryan Siew, Amelia Van Zoelen.

Team of the Year Award

Recognising an Allied Health team that has stood out in the quality of the care provided over the last 12 months.

Winners: Child Development Service Team and Speech and Language Therapy Team

Highly Commended: Acute Stroke Unit Team and Nutrition and Dietetics



Above: Child Development Service Team



Above: Speech and Language Therapy Team.



Above: Acute Stroke Unit Team.



Above: Nutrition and Dietetics team.

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Supervisor of the Year Award

Recognising an outstanding contributor to the supervisory process. Winner: Catherine Digby



Above: Garth Munro with Catherine Digby.

Allied Health Assistant of the Year Award

Recognising outstanding contribution to service development/quality improvement by an Allied Health Assistant over the last 12 months.

Winners: Carolyn Rose, Karina Gramstrup, Robyn Daly



Above: From left, Garth Munro, Carolyn Rose, Pauline Clark, Karina Gramstrup, Robyn Daly

Quality Improvement Award

Recognising an individual contributing above and beyond to quality improvement

Winner: Tory Crowder

Highly Commended: Gabby Donnelly and Sarah Fitzgerald, Fiona Leighton, Nicole Graham



Above: Gabby Donnelly and Sarah Fitzgerald with Helen Little.

Excellence in Teamwork Award

Recognising a staff member who has excelled in and exemplified the qualities of inclusiveness, initiative and empowerment to achieve their outcomes.

Winners: PJ Michel and Gwyneth Smith

Highly Commended: Inez Palmer and Becky George



Above: PJ Michel and Gwyneth Smith.

Leadership Award

To acknowledge an AH team member who has shown leadership in a particular area or for a particular service/project over the last 12 months.

Winner: Jo Hetherington

Highly Commended: Bianca Munro, Nicci Kerr, Helen Thorne, Caroline Lambert



Above: From left, Helen Thorne, Helen Little, Carolyn Rose, Caroline Lambert

Service Recognition Award

Recognising an individual regardless of profession or setting who has gone above and beyond in the last 12 months.

Winners: Kerry Cragg, Alex Smedley, Julie Grenfell and Keryn Burroughs



Above: Directors Special Award winner Frances Borrie with Garth Munro.

New premises for Te Whare Mahana

Te Whare Mahana, the CDHB whānau / family accommodation facility, is relocating to 483 Selwyn Street from today.

Te Whare Mahana was originally built as a result of a Māori community initiative and is seen as part of the community within the hospital campus. The whare was located behind Hagley Hostel until 2014, when it moved to the YMCA. The new location is very handy to Christchurch Hospital, just past Hagley Community College, close to the corner with Hagley Avenue.

Te Whare Mahana is run by the Canterbury DHB's Ngā Ratonga Hauora Māori (Māori Health team). It's a home away from home for out of



town families supporting a relative. It provides a place for whānau members to re-charge after time spent with their loved ones receiving care from our hospital services.

The new building – an old character home - has four bedrooms, two bathrooms and a kitchen and living room. Whānau staying in the Whare may be asked to share the facility with other whānau.

All linen is supplied. People just need to bring their food and keep the Whare clean and tidy.

The accommodation is not just for Māori, anyone can use it, says Educator, Māori Health, Iranui Stirling.

"Because it's got a Māori name people think it's only for Māori but it's for everyone to use if they need to," Iranui says.

"It's also not just for families of patients at Christchurch Hospital campus. There is no reason why those who have a relative at Burwood or Hillmorton hospitals can't use the facility, and also those travelling from the West Coast or Chatham Islands."

A booking system is currently under development. Information for staff will be available shortly. In the meantime anyone interested in using Te Whare Mahana can phone Monica (Poutiaki o Te Whare Mahana) on 027 467 7514 or ext 88078.



Supporting Māori Health in Canterbury

Te Mana Ora

The June issue of the [Te Mana Ora ePānui](#) celebrates some of the work going on in hauora Māori within our region.

We know there is so much more going on in our communities. If there are stories, kōrero, acknowledgements that you would like to see included please don't hesitate to let us know. Contact Aaron.Hapuku@cdhb.health.nz

Flu can be anywhere – Free influenza vaccine extended to end of August

Health Minister Jonathan Coleman has extended this year's seasonal influenza immunisation programme.

"While we've had great uptake of the influenza vaccine this year, there may be people who haven't got around to getting immunised," says Dr Coleman.

"To help ensure New Zealanders have the protection they need, we are extending the immunisation programme for eligible people until 31 August.

"Ministry of Health surveillance data suggests that influenza rates have not yet peaked this winter. However, if levels start to increase in late winter as they did last year, it's important that people can still access the vaccine.

"To date almost 1.23 million influenza vaccines have been distributed across the country, protecting over a quarter of our population. The vaccine has so far been a good match for the influenza strains in circulation."

The influenza vaccine is free for people aged 65 years and over, pregnant women, people with long term health conditions such as severe asthma, and children under five who have been hospitalised for a respiratory illness. It takes two weeks to provide full protection.

Those who aren't eligible for free immunisation can purchase it from general practices and some pharmacies.

The influenza vaccine for the 2016 season includes two new strains based on recommendations from the World Health Organization:

- » A/California/7/2009 (H1N1) - like virus
- » A/Hong Kong/4801/2014 (H3N2) - like virus (new)
- » B/Brisbane/60/2008 – like virus (new)

For further information go to www.fightflu.co.nz or www.health.govt.nz/influenza or call 0800 IMMUNE (0800 466 863).

Flu can be anywhere – A General Practitioner's view by Dr Phil Schroeder, General Practitioner Rolleston Central Health



Above: Dr Phil Schroeder

Each year as winter approaches general practitioners know that the burden of respiratory viruses also picks up and in particular the annual influenza wave. New Zealand normally follows Northern Hemisphere trends where the leading influenza strain tends to migrate south and become our leading strain as well. The leading strain during the Northern Hemisphere's last winter, in the USA, UK and Europe was H1N1 or swine flu again.

In the past H1N1 has been limited to younger individuals but now it appears to be affecting the over 65 year olds and has caused hospitalisations in this age group more than in previous years.

In Canterbury this winter we are predominantly isolating Influenza A H3N2, which was the main influenza strain prior to the 2009 pandemic. This tends to cause most misery for our oldest and youngest patients. However others particularly prone are those with a severe illness, other chronic disease, especially chronic obstructive airways disease, those with other respiratory disorders and pregnant women.

Recognising this, Ministry of Health funded vaccinations are provided free in General Practice for all chronic illness groups and our over 65 year olds. The vaccination represents our best defence against contracting influenza, or at worst, ensuring it is a less severe illness for those vaccinated. The community provided vaccination is a trivalent vaccination covering the three strains (Influenza type A H3N2, Influenza type A H1N1 and Influenza type B) most likely to show up throughout the surveillance season.

General Practice and some pharmacies in Canterbury have been actively vaccinating both funded and paying patients since March to best prepare our community for the inevitable influenza wave. As well as encouraging hand sanitiser use and masks on infected individuals as they enter general practices, we recognise that winter respiratory viruses render us much busier for about four months of the year. Given that some patients will experience sudden onset of severely debilitating symptoms we

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need to modify our practices for a time to allow for either extended clinics or appointment templates to allow for same day appointments. Our local Canterbury respiratory viral intelligence allows us to warn and inform when our influenza wave begins to rise.

As health professionals we want the best for those under our care and we can best protect our patients by being vaccinated ourselves. Serological studies suggest that when we are infected with an influenza strain that one third of us will probably be unaware we had it at all but will have formed antibodies against that strain. Another third will suffer a mild illness with mild fever, muscle aches and mild but short-lived cough. Then the last third will suffer the full battery of illness with shivers and sweats, productive cough, headaches, muscle aches and fatigue. The cough and fatigue may well render us unable to work for a good two weeks. Although we may well be off sick with the more severe illness, if you suffer a milder form it would be easy to work through and unwittingly infect those under your care. If you haven't had your vaccination yet – no time like the present.

Find out what Flu is doing in Canterbury – check our [website](#).



Above: Dr Schroeder looking over the latest influenza-like illness report for Canterbury.

Canterbury wins New Zealand Inter-professional Healthcare Team Challenge 2016

A team of young Canterbury health graduates representing CDHB has won the national Healthcare Team Challenge (HCTC), held in Auckland recently.

The team, who called themselves “Collaborative Care”, won the overall award for the National HCTC and also won the People's Choice.

The team members are:

Speech Language Therapists, Viv Campbell, and Xanthe O'Carroll, Physiotherapist, Mariette McCormick, Registered Nurse, Abigale Noone, and Doctor, Matthew Chamberlain.

HCTC provides a fun and authentic learning experience for students and newly graduated practitioners to develop their knowledge of the roles of other disciplines, increase understanding of how interprofessional practice contributes to patient care and enhances attitudes and skills in effective teamwork.

Teams are provided with a written case study and work together to develop a management plan for a client/patient with complex needs which reflects best interprofessional practice.

The National HCTC took place on Monday 4th July at the New Zealand Interprofessional Health Conference where teams presented their plans, within a strict five minute time frame, in front of a panel of judges, the other competing DHBs and university teams and a large audience.

The team did a fantastic job and audience members said they were very impressed with them, says Speech Language Therapist, and team mentor, Amy Oughton.

An added surprise and extra pressure on teams in the competition was that each team was given a different 'Extended Question...Twist in the Tale'. They had five minutes to adjust their management plan and then three minutes to present this.

The CDHB team answered the question in the same way they presented the case - within a family meeting, ensuring they were consistent and patient and whanau centred. The judges reiterated how impressed they were with the consistency of patient centred care demonstrated through CDHB's presentation.

“They really stood out,” Amy says.

The Canterbury team's response showed off CDHB's integrated health system and highlighted the benefits and importance of Interprofessional practice.

Team member, Abigayle Noone, a NetP RN from Ward 11, says “the experience has given us the opportunity to build quality relationships and consider each other's perspectives, then seeing how much this directly impacted our performance as a team.”

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Social Work Team Leader, Keryn Burroughs, says the two CDHB teams who competed in the Christchurch event and their mentors put a lot of effort into preparing for the National HCTC competition and the national win reflects this.

“Well done. The HCTC Committee members are extremely proud with your professionalism and commitment.”

The challenge highlights the importance and benefits for the patient of working together in an inter-disciplinary team and understanding how different professions contribute.

A big thank you to the HCTC Committee who worked hard to ensure that the HCTC event was a success.

“Watch this space as next year will be even bigger at the Grand Round with more teams. Now that we have the trophy we don't want to give it back!”

The winning team were presented with a wooden shield which will be engraved and displayed at Christchurch Hospital.

For more information on the conference visit www.nziphc2016.co.nz



Above: Left to right: Abigayle Noone, Viv Campbell, Xanthe O'Carroll, Matt Chamberlain, Mariette McCormick.

Recruitment Registry Coordinator (Spinal Services)

Permanent/Part Time

The NZ Spinal Cord Action Plan has identified the development of a national spinal registry as a top priority. To ensure the development and implementation of this national registry, the Registry Coordinator will co-manage this responsibility with a counterpart, located in the other spinal service at CMDHB, working under the direction of the national governance group.

You'll collect data that will be used to analyse and optimise the outcomes of NZ patients with spinal cord injury. Top priorities will include ensuring the data is complete, accurate, protected, and appropriately utilised. Ensure compliance with all requirements of the MOH and RHSCIR i.e. privacy and consenting.

You will be self-directed with excellent time management and organisation skills, be computer literate, and able to function collaboratively and autonomously. A thorough knowledge of health systems will be an advantage.

As this is a new role, you are someone who embraces change and is welcoming of new innovations and responsibilities as they evolve.

We're looking for someone with a health qualification and clinical knowledge and/or experience in spinal cord impairment. We will welcome applications from healthcare professionals with relevant New Zealand health care registration (Nursing, Allied Health etc.)

Enquiries should be directed to Heather Ewing, Recruitment Specialist, email: heather.ewing@cdhb.health.nz

Applications are only accepted online so please click the "Apply Now" button below to send us your CV and covering letter today!

National Certificate in Adult Literacy and Numeracy Education

April saw Educators and assessors came together to celebrate completing the National Certificate in Adult Literacy and Numeracy Education (NCALNE) Vocational/Workplace (NZQA Level 5, 40 credits).

CDHB staff Christine McDonald (PDU Administrator), Craig Stewart (Orderly Educator/Assessor), Dinesh Lal and Rachel Marshall (Nurse Educators) completed the Certificate via distance learning with the support of the Careerforce NCALNE (Voc) Educator Hub. Careerforce Literacy and Numeracy Advisor, Cushla Wilson facilitated the Educator Hub workshops and supported the group of eight trainees in the Christchurch Hub. Other hubs are working in Wellington and Auckland.

The purpose of the Adult Literacy and Numeracy Education qualification is to raise the abilities of workplace-based adult educators to enable them to further develop the literacy and numeracy skills of the staff taking part in workplace training programmes.

The CDHB is currently supporting the New Zealand Certificate in Health and Wellbeing (Level 3: Health Assistance), New Zealand Certificate in Health and Wellbeing (Level 3: Orderlies) and the New Zealand Certificate in Cleaning and Caretaking. In the future we will also be supporting the New Zealand Certificate in Health and Wellbeing (Level 3; Dental Assistance).

Many of the trainees taking part in workplace training programmes left school at an early age and don't have any

form of qualification. Statistics show that overall 25 percent of the health and wellbeing workforce, supported by Careerforce, hold no qualification – compared with the 14% of New Zealand's overall workforce.

Dinesh Lal, Nurse Educator, said that the training has been really valuable. "I have better knowledge around what some of the learning needs of the individuals might be. Now I think 'how can we vary our training to meet more of those needs instead of meeting just a select few?' It's given me a whole lot of different activities to incorporate into the teaching I do.

Having low level literacy doesn't need to be a barrier to success at work for these individuals. New teaching methods and tools are available, for people who support this group of trainees, to help them with their understanding and confidence.

This new approach to training is creating a greater level of interaction between the clinical and the support workers for Craig Stewart, Orderlies Trainer/Assessor at CDHB. Craig noticed that his trainees were communicating more with the clinical staff. "They seem to be more interested in their role. They are walking ten feet tall and are proud of themselves. The majority of them have really come out of themselves and want to communicate more about what they're doing."

For more information about how you can complete the National Certificate in Adult Literacy and Numeracy Education (Vocational/Workplace). (NZQA Level 5, 40 credits), contact Careerforce: www.careerforce.org.nz.



Left to right:
Dinesh Lal,
Christine
McDonald, Craig
Stewart, Rachel
Marshall.

One minute with... Rob Hallinan, Clinical Manager, Radiation Therapy, Oncology and Palliative Care, Christchurch Hospital



Above: Rob Hallinan

What does your job involve?

I currently manage the radiation therapy service at Christchurch Hospital but will be moving into a service manager role at the end of July looking after cardiology, gastroenterology, endocrinology and diabetes.

Why did you choose to work in this field?

The unique blend of patient contact and working with some very cool medical equipment. It's a great balance.

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?

In the words of the radiation therapists: Striving to provide excellence in all we do for our patients and Canterbury DHB in a safe environment.... whilst having fun!

The last book I read was...

The Glass Place, by Amitav Ghosh. A fascinating read about ancient Burma, India and Malaya.

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

Paddling a canoe in the Canadian Rockies.

My ultimate Sunday would involve...

Another day off on Monday!

One food I really dislike is...

Licorice.

My favourite music is...

Too hard to choose but I love a good lyric: "Barefoot girl sitting on the hood of a Dodge drinking warm beer in the soft summer rain", Bruce Springsteen: Jungleland.

What do you like about it?

The gratitude our patients show for the work we do.

What are the challenging bits?

Highly skilled practitioners are only as good as the systems, processes and culture that support the work they do. Sometimes we don't get those things right with serious consequences.

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

The radiation therapy team. They continually go above and beyond to make what is a daunting experience, manageable and even enjoyable for our patients. They also go the extra mile in looking out for each other.

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

Canterbury Collaborative Simulation Interest Group (CCSIG)

Date: 24 August. 2016

Time: 1300-1700hrs

Venue: Clinical Skills Unit, 5th Floor, Riverside, Christchurch Hospital

Registration fee: No charge

Draft Programme: This will be an interactive afternoon, please dress comfortably.

- » "Around the world in 4 International sim challenges" - Brendan Wood, Senior Lecturer/Military Programme Leader Paramedicine. Auckland University of Technology
- » The Hartwell Simulator – Dan Hartwell, Simulation Lead, Anaesthetics, Christchurch Hospital
- » Virtual Simulation – James Hayes, Senior Medical Imaging Lecturer. Ara institute of Canterbury

To register contact email Professional.Development.Unit@cdhb.health.nz

Community Energy Action (CEA) News

Volunteer at the Curtain Bank and WIN!

The Curtain Bank relies on volunteers to help measure, sort, de-hook, and fold curtains, so they can get them out of the donation bin and into the homes of those who need them faster. This winter they have a large amount of donated curtains and they need help!

Volunteer for seven hours at the Curtain Bank and go in the draw to win one of nine \$100 Pak'n'save vouchers. Three winners will be drawn on the first of each month until spring. Your seven hours can be completed over a number of days, and the more hours you volunteer, the more chances you have to win.

They are open Monday to Friday 9am – 4.30pm.
Call Barbara for more information on 03 3747225



Tip of the month

Are you using your heat pump correctly?

Make sure the mode is set to heat, often symbolised by a little sun, and the fan speed is set to auto.

Health experts recommend that living areas should be between 18-21 degrees, and sleeping areas between 16-18 degrees. In a well-insulated house, it can be more energy efficient to leave your heat pump on, rather than switching it on and off.

New Subsidies

From 1 June – 31 August, Community Energy Action is offering 50% subsidised insulation for landlords with properties built before 2000, whose tenants either have a community services card, OR consider themselves to be low income, and have a health condition which is affected by the cold. Please note that this does not include social housing. Conditions apply.

For households that do not meet this criteria, they are still offering 25% off for a limited time.

Contact CEA for more information, refer a client, or to book a free, no obligation insulation assessment.

Repair Well

This programme is run with support from New Zealand Red Cross, and provides additional energy efficiency measures during earthquake repairs of vulnerable homeowners. These measures include but are not limited to wall, ceiling and floor insulation, extractor fans, enclosed curtain tracks are more.

Who is eligible?

The programme is for homeowners who cannot afford these upgrades themselves and who

- » Have a chronic health condition OR
- » Are over 65 OR
- » Have children who are under 18

This is the final year of our three year programme, although funding is available it is limited. Please refer any clients who may meet the criteria and are expecting to have earthquake repairs started before the end of 2016 to see if they are eligible.

Energy Advice Service

As always, CEA are offering their free, independent energy advice service to all clients. Over the phone or by email, they can provide personalised advice specific to the client's home and circumstances.

CEA advice service covers, but is not limited to –

- » Energy efficiency
- » High power bills
- » Condensation
- » Keeping warm
- » Product advice such as heat pumps

For more information on Community Energy Action's services, visit their [website](#), or [contact them directly](#).



PDRP Workshop

We still have a few spaces available for the Professional Development Recognition Programme (PDRP) Workshop on Wednesday 3 August 2016.

Are you interested in putting together a PDRP portfolio?

This is a day intended for staff who have familiarised themselves with the PDRP documents. Staff attending will be given a greater understanding of the evidence requirements for the Proficient and Expert/Accomplished levels and speak with a panel of applicants and assessors at the end of the day.

If you are interested in attending this PDRP Workshop, please contact the PDRP office on (ext 68835) or email Adriana.Humphries@cdhb.health.nz

In brief



Above: Some of the recent donated gifts to the neonatal intensive care unit and the Children's wards.

CDHB Research Committee - Call For Nominations

The Canterbury DHB Research Committee is a Standing Committee within the Canterbury District Health Board, reporting to the Clinical Board. The Committee develops policy, provides governance and advises the Clinical Board and Executive Management Team on matters related to clinical research activities within the Canterbury DHB.

The Committee is now seeking one member of staff active in research to represent clinical research on the committee. Members of the committee must be willing and able to attend monthly meetings. Confirmation of places on the Committee will be ratified by the Clinical Board.

The Research Committee Terms of Reference, meeting dates and membership list are available from the Canterbury DHB research office: cdhb.researchoffice@otago.ac.nz

Nominations can be made by any member of the Canterbury DHB research community and should be forwarded to Emily Oughton by Monday 25 July 2016. Email: Emily.oughton@otago.ac.nz Applicants are invited to submit a brief resume of their research activity, and a short paragraph outlining how they could contribute to the Committee.

Volunteers wanted for gut health study

Do you enjoy eating GOLD kiwifruit? Plant & Food Research require volunteers for a clinical study looking at the effects of SunGold kiwifruit on gut health and feelings of well being. This is a 16 week study which involves eating GOLD kiwifruit and Metamucil® along with your normal diet.

Volunteers need to be:

- » Suffering from Constipation (fewer than 3 bowel motions per week) or Irritable bowel syndrome which is associated with constipation.
- » Aged 18 to 65 years old
- » Have a BMI (Body Mass Index) of 19 to 35 kg/m²
- » Have no evidence of chronic disease or no previous gastrointestinal surgery
- » Have no known allergy to kiwifruit

You will be required to visit 40 Stewart Street, Central Christchurch for periods of up to 30 minutes on 7 occasions. Clinics will run in the mornings between 7.00am and 12.00pm.

You will be reimbursed \$320 in vouchers for your participation in this study

To find out more about the study contact: Sarah Eady on (03) 325 9671 or 027 476 6137. Email: sarah.eady@plantandfood.co.nz

Community Education Seminar

Dementia and Communication

When talking with a person with dementia it can be difficult to understand them and to make yourself understood.

Katrina Aitken, Speech Language Therapist with Older Persons Mental Health Services will explain how dementia can affect communication, and discuss some practical strategies for making communication easier.

There will be time for questions.

Everyone welcome!

Date: Tuesday 2 August, 10.30am – 12 noon

Venue: Alzheimers Canterbury, 314 Worcester Street, Linwood (Between Fitzgerald Ave & Stanmore Rd)

For more information: 03 379 2590 / admin@alzcanty.co.nz / www.alzcanty.co.nz

Chlorwhite is being replaced as a clinical disinfectant

Product update and ordering information

The use of Chlorwhite disinfectant will shortly be phased out – you may recall earlier communications about leakage due to faulty caps, and this product also has a relatively short shelf-life.

Bags and cable ties have already been supplied for containers that show signs of having leaked, or are distorted due to the product off-gassing. Talk to your Health and Safety rep if you need more.

There is however some residual stock across a number of DHB sites. A decision has been made to continue to use existing supplies until the end of July, so that there is less for the supplier to uplift.

The replacement product is called Presept which is in tablet form. Tablets are to be used to make a solution for disinfecting surfaces and equipment, once local supplies of Chlorwhite have been used or uplifted. As a dry product, Presept has a much longer shelf life and because you make it up as you need it, the concentration of the active ingredient doesn't change due to evaporation.

The Oracle order numbers for the new product are in the first of the two tables that follow. Squeeze bottles are needed for mixing the product to the correct concentration, so you will need to include some of these in your initial order.

If Chlorwhite is on your Oracle favourites list, if you try to order it after the uplift date of 1 August, you will be prompted to order Presept instead.

Click [here](#) for usage advice from infection prevention and control.



Above: One bottle as supplied new, and two showing leakage.

Key Messages from the CCN Alliance Leadership Team

Click [here](#) to read this month's Key Messages from the Alliance Leadership Team (ALT), including:

- » A new Strategic Disability Action Plan for Canterbury
- » Activity and priorities for mental health, including a congratulations to Canterbury's mental health workforce
- » Consideration for a wellness strategy incorporating the entire Canterbury health system workforce
- » The next steps for local alignment with the recently released national Pharmacy Action Plan

Notice for Registered Nurses considering applying for HWNZ funding for postgraduate study in 2017

All registered nurses who are considering applying for HWNZ postgraduate nursing education funding for 2017 when applications open in September should be aware that one of the eligibility requirements for funding is successful completion of PDRP (senior nurses exempt).

If you are intending to apply for funding and you are not currently on the PDRP programme, you will need to submit your portfolio as soon as possible to allow time for assessment. All funding applications will be checked against the PDRP database and applications from nurses who are not on the programme will not progress until PDRP has been successfully completed.

Funding applications will open in September and close in October. The exact dates and online application link will be advertised in the CEO update, by global email, and on the CDHB website after 1 September 2016.

Rongoā Kākāriki
GREEN
PRESCRIPTION

Canterbury
District Health Board
Te Pōari Hauora o Waitaha

sport
canterbury

BE ACTIVE



Be Active is an eight week programme for people wanting to establish or restart their activity, and have fun along the way.

CDHB Be Active
Specific program for CDHB staff
City YMCA
12 Hereford Street
Tuesday 3:15 – 4:15pm
Starting Tuesday 2nd August

For more information and to register please contact:

Anna Wilson
P 03 373 5045
E anna.wilson@sportcanterbury.org.nz
www.sportcanterbury.org.nz

Suitable for all ages (18+) and levels of ability. Join us each week to try a range of low-impact activities, e.g. circuit, badminton, Tai Chi and Zumba. Discuss ways of maintaining a healthy lifestyle, and enjoy the support of others in the group. Cost is \$3 per session.



To register online scan here or go to this link.
<http://bit.ly/1qYxuQq>



Together supporting an
active
CANTERBURY

NAME THE CRANES COMPETITION

Help name the two cranes that are being used to build the new
ACUTE SERVICES BUILDING



Entries open to all children and young people aged 16 and under who have a parent on staff, who are inpatients, or who attend outpatient clinics, at Christchurch Hospital. See your Charge Nurse Manager or download an entry form from cdhb.health.nz/itsallhappening