



## Media focus on suicide What is happening in Canterbury?

Last week there was quite a lot of coverage in the media about the number of suicides in Canterbury since the quakes. Suicide is a complex issue for communities and families to come to terms with. In most cases the causes are a combination of life stressors (any adverse event can be a stressor), combined with personal psychological and biological factors.

While a sensitive subject, I would like to reiterate the fact that we haven't seen any significant increase in suicide numbers for Canterbury over the past five years.

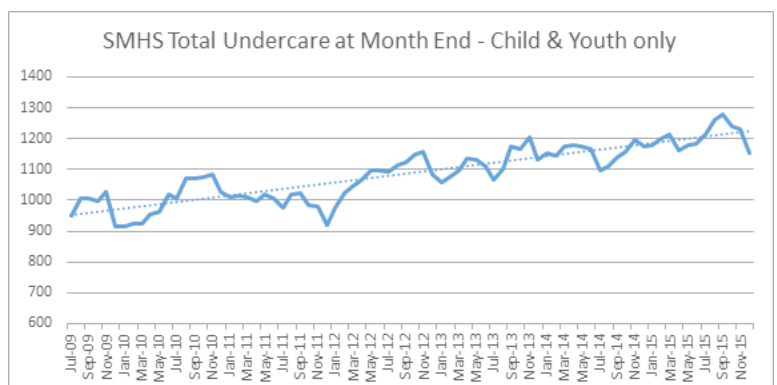
In reviewing suicides that occurred since 2010, it would be unusual if coroner's reports didn't mention the quakes or quake-related stressors in the findings. The quakes and their stressful after-effects have been a huge and ongoing issue in most Cantabrians' lives. This, however, does not mean cause and effect. It would be unwise to link the quakes to any increase in suicides as there's no solid evidence so far to support that conclusion. It does indicate that more research to explore the issues further is perhaps warranted.

What we have seen is a significant increase in the number of children and adults presenting to our Specialist Mental Health Services. This trend didn't occur during the initial aftermath of the quakes but has been steadily increasing from late 2012. This is when the ongoing impacts of living in a broken, dislocated city started to be felt and this is in line with international literature on major disasters. We have had a significant increase in people presenting for depression, many of whom indicate post-quake related stressors being a major factor in the decline of their wellbeing.

We have put significant resource into reconfiguring our services to respond to the demands – both at a primary, secondary and community level. For example our School Based Mental Health Programme now has teams in around 98 schools, the All right?

campaign continues to evolve to meet the needs of our community and our community mental health teams continue to see more people in their homes, at work and in other community locations.

The recently-announced additional Mental Health funding from the Government reinforces the truth of what we're seeing here in Canterbury - a massive increase in demand - and it is good to have that acknowledged.



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## Taking time to re-charge & get protected

If you managed to have a three-day weekend I hope you enjoyed spending time doing things that make you happy, with people who matter to you. If you worked through, thanks for keeping things running smoothly for those who needed treatment and care over the past three days.

A reminder to those of you who have a lot of leave owing, now's the ideal time to plan ahead and think about when you can take a break to re-charge. We have a busy couple of months ahead with services starting to move to Burwood in June and it's never been more important to look after yourself as we start the countdown to winter with the inevitable colds and snuffles – the good news is you can protect yourself from influenza by getting immunised.

You owe it to your family, your patients and yourself – check the [intranet](#) for clinic times. I had mine last week, so in about a weeks' time I know my system will be ready to fight any flu viruses heading my way.

Have a great week

David



**David Meates**  
CEO Canterbury District Health Board



Remember if you're not sleeping well or finding it hard to cope at work our EAP service offers free, confidential counselling to talk about anything that's causing stress in your life – it doesn't have to be work-related.

If you're up for a challenge, check the [wellbeing page](#) on the intranet and try something new.

## It's official, army medics will be helping move patients from The Princess Margaret Hospital to our new facilities at Burwood

For details see the [story](#) on line today. Each of the approximately 140 patients will have an army medic to chaperone them during the move. Patients from the older persons mental health, assessment and rehabilitation wards at The Princess Margaret Hospital will be moved to their new facilities over four days between June 13 and 16.

## New System Level Measures reflect broadening approach

Minister of Health, Hon Dr Jonathan Coleman, has announced four new System Level Measures for the health sector, to be implemented from 1 July 2016.

The Ministry of Health worked closely with the sector to co-develop the new measures.

They are:

- » Ambulatory Sensitive Hospitalisation (ASH) rates per 100,000 for 0–4 year olds (ie. keeping children out of hospital).
- » Acute hospital bed days per capita (ie. using health resources effectively).
- » Patient experience of care (ie. person-centred care).
- » Amenable mortality rates (ie. prevention and early detection).

Two more System Level Measures will be developed during 2016/17:

- » Number of babies who live in a smoke-free household at six weeks post natal (ie. healthy start).
- » Youth access to and utilisation of youth appropriate health services (ie. teens make good choices about their health and wellbeing).

The new measures are part of the System Level Measures Framework. While the Integrated Performance and Incentive Framework (IPIF) focused mainly on primary care, the focus has now been broadened to include the whole health system. This broader focus reflects feedback from the sector and the priorities of the updated New Zealand Health Strategy.

District health boards with primary health organisations and district alliance leadership teams, will drive implementation of the new measures.

For more information [www.health.govt.nz/new-zealand-health-system/system-level-measures-framework](http://www.health.govt.nz/new-zealand-health-system/system-level-measures-framework)



## Aunty Aroha on the airwaves

Tahu Fm listeners were recently treated to pearls of wisdom about the flu vaccination from Aroha Reriti-Crofts, known as Aunty Aroha and Dr Ramon Pink, Canterbury Medical Officer of Health.

The pair teamed up to dispel the myths around the vaccination, particularly for Māori.

‘You can always find an excuse not to do something. Hopefully we’ve negated some of those excuses with our on-air interview,’ says Ramon. Aroha also recorded some spots that are being played on Tahu FM over April / May.

‘I don’t like needles. Getting the vaccination hurts but it is just something I need to do,’ says Aroha.

Here’s some of the other possible excuses not to be vaccinated discussed during the interview and why they don’t stack up.

- » I’m too old to bother about getting the vaccination.  
Older people are more vulnerable. The vaccination is free for people 65 years and over and those with chronic health conditions.
- » I don’t like putting chemicals in my body.  
The vaccination does not have live viruses in it and has an excellent safety record. It can be given to pregnant women.
- » I eat healthy food and keep active so I am looking after myself this way.

These are good things but are not enough to stop you getting the flu. The risk of becoming very unwell with the flu is higher in elderly people, children, and those with serious health problems but even younger healthy people can become very unwell with the flu.

- » I had the vaccination last year.  
Protection from the vaccine gets weaker over time so last year’s vaccination will not keep you safe. The types of flu virus we get this year may be different to what we had last year. The vaccine given here this year will protect against:  
A/California/7/2009 (H1N1)-like virus  
A/Hong Kong/4081/2014 (H3N2)-like virus  
B/Brisbane/60/2008-like virus
- » I am allergic to eggs and therefore the vaccine.  
The vaccination can be given to anyone except those with very severe egg allergy. Talk to your general practice if you are unsure.
- » It’s too expensive.  
There is a small charge to get the flu vaccination from your doctor or a selected pharmacy but it is free for many – people aged 65 years and over, pregnant women and people with chronic health conditions.



Right: L-R, Tahu FM DJ Rocky Roberts, Aroha Reriti-Crofts, known as Aunty Aroha and Dr Ramon Pink, Canterbury Medical Officer of Health.

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for life

Don't forget your immunisation milestones

[immuniseforlife.co.nz](http://immuniseforlife.co.nz)



## Facilities Fast Facts

### Fast Facts – Burwood



Spot the difference! The view on the right was taken on Thursday 21 April.

Dan Coward's next staff forums are on Wednesday 27 April at 2 pm in the Burwood Chapel, and on Thursday 28 April at 3 pm in The Princess Margaret Hospital Chapel. Staff are invited along to find out the latest news on migration, orientation and open days.

Staff orientation has been going well, as shown in the [latest migration video clip](#).

We have had great feedback from staff, with lots of constructive comments.

Please note that, because the new buildings are still officially a construction site and have not been handed over to Canterbury DHB, it is not possible to arrange orientation access other than to Ward DG. The orientation team would like to show off some more of the new buildings, but that will have to wait until the open days in late May.

Many thanks to the orientation team for all their hard work – in particular Dinesh Lal, Rachel Marshall and Jane Clarke.

#### A reminder:

Please remember to follow the appropriate procedure for managing furniture that's being left behind in your wards/work areas. Decisions on what furniture and equipment is moving to the new facilities have already been made. If you are unsure, ask your manager or contact Pauline Tootell [pauline.tootell@cdhb.health.nz](mailto:pauline.tootell@cdhb.health.nz)



### Fast Facts Christchurch



The first steel beams were delivered this week to the far north-west corner of the Acute Services building site. A concrete plinth was also poured for the first tower crane to be installed.

At the opposite south-east corner of the hospital site, close to Oxford Terrace, trenching work is underway for a new high voltage electricity cable that runs from the new substation on St Asaph Street.

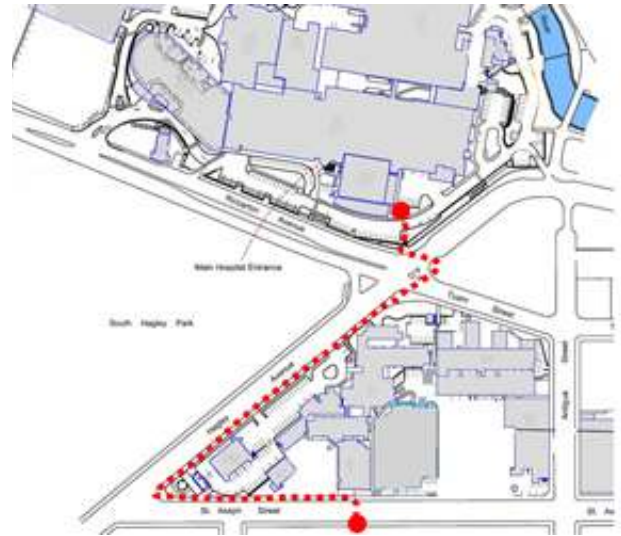
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Demolition of the blue car parking building begins on Tuesday 26 April. Staff at the hospital please note that the walkway between the car parking building and the Labs building will be closed. The new designated safe route for staff to walk back to their cars is via Hagley Ave and St Asaph St (see map). Security will patrol this route after hours and will position themselves around the junction of Hagley Ave and St Asaph St to observe both roads.

### Outpatients news

The Workspaces Group met with the design team this week to take a first look at some workspace layouts based on the staffing numbers provided. The group was able to give feedback on changes needed e.g. additional printer bays and quiet rooms, and a clearer delineation between collaboration spaces and desks. The design team will draw up the requested changes and meet again in a fortnight with the group, at which time the staff of each floor will work with the design team to refine the design of their areas.



## Paediatric surgeon wins prestigious teaching prize



Above: Spencer Beasley

Paediatric Surgeon, Spencer Beasley, has been awarded the Sir Alan Newton Surgical Education Medal, by the Royal Australasian College of Surgeons (RACS).

Nominations for the prestigious teaching prize are called for annually but the medal is only awarded as appropriate. If no applicant meets the criteria in a particular year, the medal is not awarded.

Established in 2013 the Sir Alan Newton Surgical Education Medal was created in memory of the late Sir Alan Newton in order to recognise a distinguished and substantial contribution to surgical education over a prolonged period of time.

Sir Hibbert (Alan) Stephen Newton was an acclaimed thyroid surgeon and dynamic teacher dedicated to raising the standards of surgery and surgical education. He was a RACS foundation Fellow in 1927, Secretary and Treasurer from 1929-1933, Censor in Chief from 1933-1943 and President from 1943-1945.

Spencer says he feels honoured to receive the medal.

"I have been involved in surgical education for nearly 30 years, including at an international level, and have had several leadership roles in education portfolios at the college. I have been lucky enough to have introduced a number of major initiatives, including improving the assessment tools used during surgical training and the Fellowship examination, and setting up better training for examiners and surgical supervisors."

Criteria for awarding the medal include:

- » demonstrated leadership in the College and/or health care organisations related to surgical education
- » significant contributions to the body of knowledge on surgical education
- » role models the professional characteristics of a surgical educator
- » has displayed substantial dedication of time and effort to surgical education over a prolonged period of time.

Paediatric Surgeon, Kiki Maoate, says Spencer is an incredible individual who continues to make significant contributions to surgical education, research and the mentoring of surgeons in Australia, New Zealand and the Pacific Islands. He continues to contribute at all levels of the College activities with dedication and selfless commitment of his time and energy.

"More importantly, Spencer is a very easy person to get on with and deserves to be honoured with this award," he says.

Consultant Haematologist and Chair of the Canterbury Medical Staff Association, Ruth Spearing, says it is great to see Spencer, who has been so dedicated over such a long time to the teaching of surgical skills, being honoured in this way.

Paediatric Surgery RACS Councillor, Tony Sparnon, says Spencer has made a magnificent contribution to surgical education having been a Chair of the Board of Paediatric Surgery, Senior Examiner in Paediatric Surgery, Chair of the Court of Examiners, Chair of the Board of Surgical Education and Training and Chair of Professional Development.





## Bouquets

### Child, Adolescent and Family (CAF) Service, Specialist Mental Health Service

- » Inpatient Service:  
'Wonderful service by staff. I cannot praise the service enough. They gave us our life back.'
- » Youth Inpatient:  
'Wonderful, really good service very pleased.'  
'Wonderful', 'Awesome', 'Great service', 'Really helpful.'
- » CAF Rural:  
'Happy with service', 'No worries', 'Very good and positive experience', 'Very good service/wonderful'.
- » Youth Specialty Service:  
'Happy with service.'

### Specialist Mental Health Crisis Team

Late last year my 21 year old son lost his best friend of 10 years by suicide. He has been experiencing the different stages of grief. The most difficult stage we have come to at the moment is anger and his not knowing how to deal with these feelings. Your Crisis Team has come to our home on a couple of occasions with daily follow up phone calls. My son has always felt better and I have seen the change/improvement in him each time your team has come out. They have shown him kindness, understanding, acknowledging his feelings, listening to the things he had to say, which I could no longer listen to, they were a blessing for me. I don't know where we would be right now if we didn't have the Crisis Team intervention. I can't thank your team enough for their kindness and support.

### Nuclear Medicine, Christchurch Hospital

The staff in Nuclear Medicine made me

feel very comfortable and at ease with my visit. I was very nervous beforehand. Special thank you to Rachel. She was wonderful with my husband and me.

### Ward 17 (General Surgery), Christchurch Hospital

Nurse Aide 'Sue' was superb in caring one on one with my mother, kind and alert. Kudos and credit to her.

### Terry Creagh Clinic, Specialist Plastics, Christchurch Hospital

Absolutely wonderful. People/ staff/ reception/ doctors. Good jobs guys!

### Ward 18 (Orthopaedics) and Christchurch Women's Hospital

During my short visit I spoke to three members of your staff and they could not have been more helpful or friendlier. You guys (and girls) are fantastic so keep up the good work.

### Ward 11 (Surgical – ear, nose, throat, eye and neck), Christchurch Hospital

All the wonderful staff who work on Ward 11, I just want to say a thank you for all the amazing care you have given me over the years. Especially the wonderful nurse aide Julie. I have never come across somebody who I am so happy to come onto her shift. Thank you for making my hospital stay happier and a smooth journey. Thank you so much Ward 11, for making me feel happy in such a rubbish situation.

### Ward 26 (Oncology), Christchurch Hospital

The nurses on Ward 26 are very lovely.

### Pre-admission, Christchurch Hospital

So nice to have helpful, pleasant people look after my wife.

### Respiratory and pre-surgical, Christchurch Hospital

Just another gold medal. Everyone is

both hardworking and helpful. There seems to be someone on the lookout to help even if you just look a little lost. Thank you once again for the consideration for the anxiety most of us are feeling and the comfort of the clinical services offered.

### Hagley Outpatients, Christchurch Hospital

Thanks for excellent service by Dr F Trowbridge. Empathetic, sensitive, professional and treated me as individual. Thank you...Really impressed.

### Hagley Outpatients, Christchurch Hospital

I was seen by eye surgeon and nurse and found them to be great, very patient and efficient.

### Emergency Department

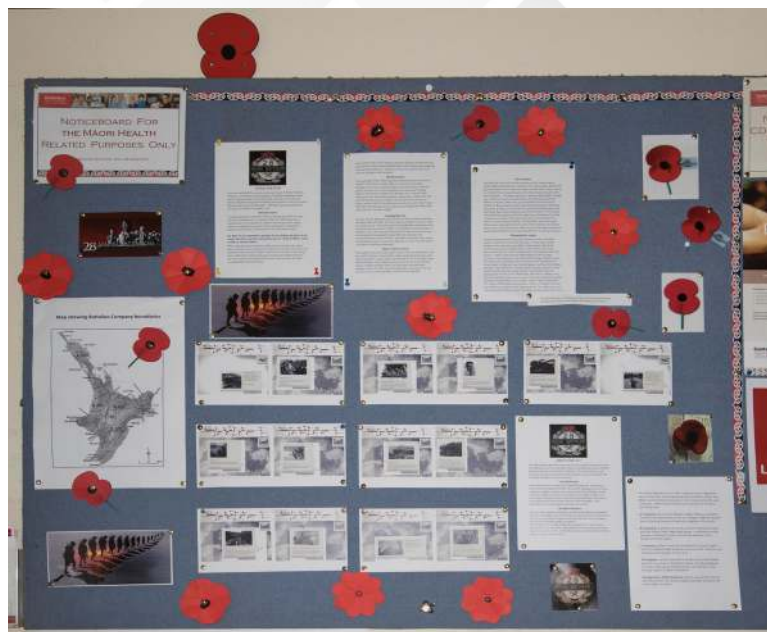
A month ago, I sustained a trimalleolar fracture dislocation which necessitated me seeking help from your department. I apologise for my delay in sending this email, but accessing my computer means negotiating two flights of stairs which is proving difficult. I wanted you to know what wonderful treatment I received from your medical staff in your Emergency Department the night of my injury. Dr Keith and Dr Ian managed my initial care and were both truly superb... I am incredibly grateful to them especially as I think my procedural sedation made them late finishing their shift. Apparently this is going to be a relatively long recovery but once I'm fully mobile again, I look forward to being able to thank Keith and Ian personally. In the meantime, if you get the opportunity, please could you pass on my heartfelt thanks to these two wonderful doctors.

# ANZAC Day – lest we forget

ANZAC Day celebrations took place all over the country yesterday, with people remembering the service of our kiwi soldiers in wars that took them away from home.

The Canterbury DHB Ngā Ratonga Hauora Māori (Māori Health Team) acknowledged the sacrifices made by the [28th Māori Battalion](#) in World War 2 with a display in the stairwell to the Great Escape Café at Christchurch Hospital. The Battalion was part of the 2nd New Zealand Division, the fighting arm of the 2nd New Zealand Expeditionary Force (2NZEF) during the Second World War (1939-45).

Theona Ireton, Kaitiaki Oncology/Surgical Services for the Māori Health Team, says the display recognises and acknowledges what



our soldiers did in war, but also looks at their lives on their return.

“We’ve put up a timeline of the battalion’s movements, when they left New Zealand and the places they went to during their war service. It also has maps showing where each Iwi based company originated from. Things were different when they came home, Māori society was changed forever,” says Theona.

The display features powerful images and has a wealth of information about the battalion including this inspirational quote from the battalion’s commander, Lieutenant-Colonel James Henare, as he dismissed his men.

“Go back to our mountains, go back to our people, go back to our marae. But this is my last command to you all – stand as Māori, stand as Māori, stand as Māori.”

The display will stay up until the end of April. Check the noticeboard regularly for Māori Health news.

## Canterbury Grand Round

Friday, 29 April 2016 – 12.15pm to 1.15pm, with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker one: Dr Mathievathaniy Muthucumaru, Consultant Paediatric Surgeon

“Intra-scrotal mass in a child - surprise finding of a splenic nodule”

The theory of splenic tissue in the scrotum, a reminder that not all solid tumours of the testis are malignant.

Speaker two: Maria Pasene, Pacific Health Manager, Pegasus Health

“Engaging Pasifika People”

Pacific people in New Zealand: How to effectively engage with Pacific patients, their families and communities to ensure we give the best possible health care.

Chair: Bryony Simcock

Video Conference set up in:

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

All staff and students welcome

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

Next Grand Round is on Friday 6 May 2016

Convenor: Dr R L Spearing, [ruth.spearing@cdhb.health.nz](mailto:ruth.spearing@cdhb.health.nz)

**Professor Ron Paterson’s Grand Round now online**

Ombudsman Professor Ron Paterson’s Grand Round held last week is now [online](#).

Title: The Heart of Healthcare: Effective communication with patients and families.

It also features Maggie Meeks speaking about the ‘2016 HealthCare Team Challenge’.



# More Collabor8ing– Clinical coder, turned nomad

The next idea gleaned from the latest Collabor8 intake was more about streamlining processes and saving time in the poorly understood world that is clinical coding.

Gordon Laing is a clinical coder and described how much of his time was spent deciphering notes made by doctors, nurses and physios and checking through lab reports, looking for significant diagnoses or procedures that help determine a relative case weight.

The Ministry of Health uses this information for statistical analysis, is able to monitor disease demographics and create other important datasets, all of which influence funding and resourcing decisions as well as policy. The information provided by clinical coding is also extremely useful to us in identifying trends and patterns that help in planning service delivery.

In reality coders like Gordon spend a great deal of time chasing those notes around, with typically 10-15 minutes spent just finding the files. In the past he'd have taken each file back to his office, risking being called back to the ward urgently in the case of a readmission.

After discussion with his team and trying unsuccessfully to use ward computers, he volunteered to try a laptop and code in situ on the ward.

"Put simply, we took the system to the ward. Suddenly I'm not spending so much time going backwards and forwards to wards, and if there's something unclear or I can't read the notes, the person who made them may be right there to ask.

I estimate I am saving an estimated 161 hours a year, and I'm one of 17 clinical coders at Canterbury DHB alone."

"Through using a laptop, and not having to have an office (space is at a premium during the redevelopment), we also save \$342 on power a year – that's just me. If all coders did the same, saving the same amount of time, that'd be an extra \$74,000 a year to spend on something else. At a national level, that could potentially save three-quarters of a million dollars, each year – minus a modest outlay for laptops."

"The biggest challenge is going to be in convincing people that they don't need a static computer and an office to put it in. There's also an unforeseen benefit.

"I used to suffer from chronic back pain, and they say that however good your chair might be, sitting in the same one all the time isn't good for your back. Because I use a variety of chairs during the day and can easily stand up and work if I want to, my back's been a lot better."

"Finally, I am out there working much more closely with the people who create the records, which just has to improve the quality of my work."

This, and last week's story celebrates the fact that ideas, and indeed leadership, don't just come from the top. It's amazing to belong to an organisation that nurtures and enables that.



Above: Gordon Laing presenting his idea.



# Forming strong working relationships key to nursing role

On Friday Ashburton Hospital's Director of Nursing, Jan McClelland will close the door on a long and happy career in the profession she loves and has served in exceptionally for 32 years.

Jan trained at the Christchurch School of Nursing and was based at The Princess Margaret Hospital. Following graduation in 1975, she worked in Ashburton Hospital's Acute Assessment Unit (AAU) for a short time before going overseas.

When she returned Jan spent time in Kaikoura and then moved back to Ashburton in 1984 with her family and joined Ashburton Hospital's Ward 3 team.

She worked in Ward 1 and AAU before being appointed to a new position of Day Duty Manager and Charge Nurse Manager, Community Services in 2001.

"For me this was a highlight of my career. I enjoyed the community focus, as well as working with the Clinical Nurse Specialists and District Nursing," Jan says.

Jan was appointed to the Director of Nursing position six years ago after Heather Gray was seconded and appointed to the Director of Nursing position for Med-Surg at Christchurch Hospital.

"It's been enormously challenging but I've always been surrounded by people with amazing skill and ability. There is such respect for the contribution we all make in Ashburton and we work so well together, it has been nothing but a privilege," Jan says.

The supportive environment at Ashburton Hospital ensures success and she believes forming strong relationships is something that cannot be underestimated in this role.

"It is sad to be going after so long, but I have no regrets. It's timely for me to step aside and I have confidence Ashburton Health Services will remain a leader in Rural Health now and into the future."

As for her future outside of the hospital, it's still a little unclear

but Jan says it certainly isn't retirement, as it's important to keep busy.

Ashburton Health Services Manager, Bernice Marra, said it is with great sadness that we have accepted Jan's resignation.

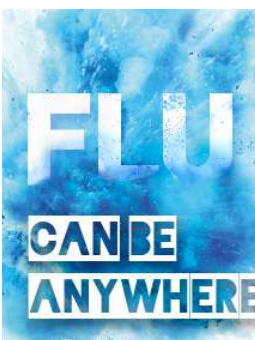
"Jan has provided a wealth of support and knowledge during the 32 years she has worked for Ashburton and Rural Health Service, she has been a strong ambassador for the patients and staff and much valued leader of the nursing workforce."

Jan has been pivotal in supporting Ashburton through significant change over the past two years, providing a calm and supportive voice during times of change. She will be greatly missed for her contribution to the wider Ashburton Health System team.

"I am sure you will join me in wishing Jan the very best for her future and thanking her personally for the support we all have received from her," Bernice says.



Above: Jan McClelland



## Staff influenza vaccination clinics

### Influenza can be anywhere - get immunised

It's time to protect yourself, your whānau, your patients and your community from influenza (flu).

[View the clinic times here.](#)

## A new LINAC on its way for Canterbury

Radiation therapy services are set for a big boost with the installation of a new LINAC treatment machine (LINAC = linear accelerator) progressing well. Building works were completed this week with the machine arriving on Saturday 23 April. It will be released for clinical use mid-September following commissioning by the Oncology Physics team.

Philippa Daly, acting manager of the oncology department, explained that the new LINAC is replacing an older one as part of a planned upgrade.

"The new LINAC is made by Elekta, the same company who supplied our other three LINACs, and improves flexibility by increasing our ability to transfer patients across the machines when one is being serviced. This means a patient's overall treatment course is no longer extended due to LINAC downtime," says Philippa.

"While we are having the new LINAC installed we have managed to ensure that capacity is maintained by moving to a shift system and opening the department for longer. Our staff have been brilliant in adapting to the new hours and making sure that our current patients are not disadvantaged during the upgrade.

"At the same time we have had a new CT scanner installed. Previously some of the radiation therapists have been using the CT scanning facilities at the St George's Cancer Care Centre, often working late to ensure scans were completed without delays. Working across different sites always brings its own challenges and the team has made it work for the patients."

As radiation therapy treatments and technologies evolve, new techniques offer improved treatment outcomes but are often more difficult to plan. The department is therefore also upgrading its planning software, installing the most up to date systems available.

"There is so much going on in the department that will benefit our patients," says Philippa.

"We wouldn't be able to do it so effectively, and without disrupting the service we currently offer if it wasn't for all the hard work and dedication of the entire department: - The oncology physicists who have played a huge role in ensuring the safe installation of the new machines and systems, the radiation therapists who have embraced change so willingly, plus our nurses, booking coordinators, receptionists and doctors.



Above: CT Radiation Therapy's new scanner.



"It's been a huge team effort from a highly professional and committed team that has always put the patients' needs first."

Left: CT Radiation Therapists team.



# The Canterbury Health System Quality Improvement and Innovation Awards are back!

Improvement projects can be submitted in poster format or the standard written submission.

Entrant materials are now available, please visit the [Awards Page](#) at Quality and Patient Safety.

We are accepting Expressions of Interest for written submissions from project teams until 20 May.



## Canterbury Health System Quality Improvement and Innovation Awards 2016

The Awards recognise, reward and publicly acknowledge the excellent quality improvements and innovations taking place within the Canterbury health system.

Entrants are invited to submit EITHER the FULL Written Improvement Project Submission OR an Improvement Poster Submission outlining the quality activity

### Enter your improvement project in 2016

#### Improvement Project Submission

Expression of Interest form due 20 May

Written Project Submission due 22 July

#### Improvement Poster Submission

Expression of Interest form due 26 August

Poster Submission due 30 September

#### Quality Improvement and Innovation Awards

**31 October**

The awards are open to all DHB staff and providers whose services are funded by the DHB. For more information including entrants guides visit the Awards page on <http://cdhbintranet/Corporate/Quality/SitePages/Home.aspx> or email [Amanda.Bielski@cdhb.health.nz](mailto:Amanda.Bielski@cdhb.health.nz)

**Canterbury**  
District Health Board  
Te Pōari Hauora o Waitaha





# Canterbury Health System Quality Improvement and Innovation Awards

## 2015 Award Winners



### **Supreme Award Winner:** **Integrated Service Delivery for a Major Mental Health Service: Adult Service Model of Care**

The Adult Service Plan was instituted by the Specialist Mental Health Service located at Hillmorton Hospital Christchurch. The plan was developed in response to a lack of flexibility in acute community assessments, delays in non-urgent assessments, recurrent problems with internal referrals and delays in patient transitions, overcrowding of the acute inpatient service (resulting in 'sleep-overs' to other units) and inpatient service with a high number of locked beds and high seclusion rates.

The core of the plan envisaged the integration of emergency, routine community and inpatient work into four sector teams with the goal to provide a service without barriers to entry or availability of care. It also focussed on an enhanced crisis resolution service to support alternatives to inpatient treatment and attended to the provision of extended care in hospital and community settings.



### **Poster Award Winner:** **Introducing E- Handovers within the Christchurch Campus**

Communication of patient status is an essential element of safe clinical care. Without providing information to the next clinician, the risk of harm to the patient increases. The Plan Do Study Act cycle of quality improvement was used to review and improve our handover processes.

#### **Joint Runner-up**

Development of an Electronic Reporting System: Integration of Audiological Results

Paediatric Outpatient CF Clinic: The Way Forward with Quality Prescribing

#### **People's Choice Award Winner**

Allied Health Promotion and Education in Stroke Management

## Written Improvement Project Category Winners

### **Best value for public health system resources**

**Award Winner:** Integrated Service Delivery for a Major Mental Health Service: Adult Service Model of Care

**Runner-up:** Can the One Minute Sit-to-Stand Replace the Six Minute Walk Test in the Community Pulmonary Rehabilitation Programmes?

### **Improved quality, safety and experience of care**

**Award Winner:** Improving Patient Care and Patient and Staff Safety in a Secure Intellectual Disability Unit: The Assessment Treatment and Rehabilitation Unit Model of Care project Fractures

**Runner-up:** Rationalising Treatment for Anxiety Disorders: Introducing a Transdiagnostic Group Approach

### **Improved health and equity for all populations**

**Award Winner:** Mothers' Milk

**Runner-up:** Canterbury Fruit and Vegetable Co-operative

### **Consumer Council Award:**

Improving Patient Care and Patient and Staff Safety in a Secure Intellectual Disability Unit: The Assessment Treatment and Rehabilitation Unit Model of Care project

**Highly Commended:** The Hauora Village at Te Matatini

For more information email [Amanda.Bielski@cdhb.health.nz](mailto:Amanda.Bielski@cdhb.health.nz)

**Canterbury**  
District Health Board  
Te Poari Hauora o Waitaha

# Canterbury woman takes out national respiratory award

An inspirational Canterbury woman has taken out a national respiratory award.



Christchurch grandmother Pauline Mohi was presented with a Respiratory Achievers Award at the New Zealand Respiratory Awards, held Friday 15 April at Te Papa Wellington.

Pauline has Chronic Obstructive Pulmonary Disease (COPD), a lung condition that causes shortness of breath and coughing.

Community Respiratory Nurse Louise Weatherall says Pauline has been a role model for living a full life despite the respiratory condition ever since she was diagnosed with it 25 years after giving up smoking.

“She not only actively manages her COPD, but also plays an active role in influencing respiratory health programmes in Canterbury, and supporting others with the condition.

When Pauline was diagnosed, she participated in one of our free Community Pulmonary Rehabilitation Programmes. She’s now dedicated herself to supporting others with COPD, Louise says.

In Canterbury, consumers play an important role in the transformation of health services and this award not only recognises Pauline’s commitment to living a full life despite her COPD, but also her impact on respiratory health services in Canterbury.

Pauline is Chair of the Canterbury Community Pulmonary Rehabilitation Consumer Group, a group dedicated to supporting people with respiratory conditions and influencing respiratory health services in Canterbury.

She regularly shares her story at pulmonary rehabilitation programmes and is known to keep in regular contact with programme participants to ensure they feel supported and encouraged to continue.

“You’ll often see Pauline at events with her big bag of information she’s collected from different health services to support others with similar respiratory conditions,” Louise added.

Pauline manages her condition by keeping active through a variety of classes including exercise, tai chi, walking and gym class.

“Lots of normal everyday things are an effort, but it doesn’t mean that you can’t do them and that you shouldn’t do them,” Pauline said.

The Respiratory Awards acknowledge and celebrate New Zealanders with respiratory conditions who achieve great success in their lives despite the challenges.

Read Pauline’s story [here](#) and read more about the other very worthy award recipients on the Asthma and Respiratory Foundation NZ [website](#).

## Pharmacy Department getting behind April Falls Month

The Pharmacy Department at Christchurch Hospital is supporting April Falls Prevention this month with an informative display.



# New regional South Island DHB policy

**The five South Island DHBs, through the South Island Alliance, are working more collaboratively than ever before to achieve better health outcomes for the people of the South Island.**

We are solving problems together and achieving greater integration, which means we are better positioned to respond to the changes faced by the health sector in the coming years.

Through this process we have identified a need for regional guidance on issues relating to the South Island as a whole. Therefore, together, the five DHBs have developed the first Regional South Island District Health Boards Policy.

This Policy outlines the process and requirements for a policy to become regional. Regional policies must be agreed and signed off by all five South Island DHBs through existing approval processes. They are maintained by the South Island Alliance Programme Office and are applicable to all five South Island DHBs.

The Regional South Island District Health Boards' Policy was developed by the South Island Alliance Quality and Safety SLA, in consultation with the five South Island DHB quality managers.

View the policy on the [intranet](#).

## Retirement: Evelyn Scott, Dietitian, South Island Eating Disorders Service



Above: Evelyn Scott

The South Island Eating Disorders Service recently marked the retirement of dietitian Evelyn Scott; a longstanding and highly regarded team member. This was a bitter-sweet occasion, as the team's loss will certainly be Evelyn's and her family's gain. Evelyn has worked with the Eating Disorders team for over 20 years, beginning here in 1995.

Evelyn's career in the field of dietetics began in the North Canterbury Hospital Board (NCHB) in 1969. This was an historic year

in many ways. It was the year man first walked on the moon, and it was the year Evelyn began her career with the North Canterbury Hospital Board as a dietary technician. Early on her supervisors recognised her potential and encouraged her to train as a dietitian. She moved to Dunedin in 1970 to complete the prerequisite training for dietetics at the University of Otago. On her return to NCHB she completed her dietetic internship and the following year began work as a dietitian at The Princess Margaret Hospital (TPMH). By 1977 she was the Dietitian in Charge on the TPMH site. There followed a pause in her career as she started her family, but she returned to work after only a short break (there was no paid parental leave in 1977!). During the next few years she worked as a relieving dietitian at TPMH and in 1985 moved to Timaru where she was a public health dietitian in Community and Public Health for several years.

In 1995 Evelyn moved back to Christchurch, to work in C Ward at TPMH in the Eating Disorders Service and the Mothers and Babies services working across both inpatient and outpatient teams. Evelyn was witness to many changes in people, processes and philosophies during her career but she remained firmly committed to patient centred care throughout. She was also a wise and thoughtful colleague and has positively affected the careers of many New Zealand dietitians; by whom she will be very much missed.

The teams and other colleagues she has worked with throughout her long career paid tribute to Evelyn through various meals and afternoon teas, and it was clear from the many speeches and stories shared that she will be missed, and warmly remembered.



Above: Evelyn is looking forward to spending more time with her family. Pictured here with her daughter and grandson.



## One minute with... Jane Goodwin, Advance Care Planning Facilitator

### What does your job involve?

My job is a mixture of educating health care professionals and consumers about Advance Care Planning (ACP), establishing processes and systems in Canterbury to capture a person's ACP wishes and supporting patients to create their own advance care plans.

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

ACP is something I have been interested in for a long time. I first learnt about it when researching my Master's thesis in 2006-2008. The idea of supporting people to think about, speak about and record their wishes for their future care felt really important and I have been involved in End of Life and Advance Care Planning Initiatives in the Canterbury region ever since.

### What do you like about it?

I love that ACP can make such a difference. People often shy away from conversations about death and dying but they are important and patients are often very grateful to have the opportunity to talk about their wishes. People often talk about how completing an advance care plan can make them feel more in control and prepared for their future. These discussions can also be really important for family and for health care professionals to help them feel confident they are providing the care the person wanted if they become too unwell to tell us themselves.

### What are the challenging bits?

The misconceptions that exist around ACP. Many people still believe ACP conversations should be reserved for when a person is actively dying but ACP conversations are for everyone. If we wait sometimes it is too late and the person is no longer able to tell us what is important to them and how they would like to be cared for in their final days. Fit, healthy people can create an Advance Care Plan. It is a living document and can be reviewed and updated as their situation and health changes over their lifetime.

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

Dr Kate Grundy has championed ACP in Canterbury for many years. Her dedication and commitment to seeing ACP become 'business as usual' in our region has given real weight and clinical support to the work I do as an ACP facilitator.

### 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?

CDHB's values of care and respect, integrity and responsibility for outcomes align closely with those of ACP which encourage a person to develop and express their preferences for future care based on their beliefs and values as well as an understanding of their current and likely future health status and the treatment and care options that might be available to them.

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

The Orphan Master's Son, by Adam Johnson.

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

I spent many happy years living and working in Scotland and am always keen to go back on holiday. It would be lovely to be whisked away to spend time with friends and enjoy the beautiful countryside of Edinburgh and the Scottish Borders.

### My ultimate Sunday would involve...

A bit of a sleep in, a run or a bike ride and then time spent catching up with family or friends.

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

Hazelnuts!!!

### My favourite music is...

I'm a fan of Aussie rock - particularly Cold Chisel or Powderfinger.



Above: Jane Goodwin

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

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

# People in Disasters Conference videos now available to view



The People in Disasters Conference was hosted by the Canterbury District Health Board and the Researching the Health Implications of Seismic Events (RHISE) Group in Christchurch in February.

More than 350 people attended, from many backgrounds including emergency services, mental health, social sciences, psychology, engineering, education and government.

Local, national and international groups gathered and interacted at the conference in a collaborative and participatory way to make sure that the many voices were heard. The content included the reporting of academic research and practical lessons from response and recovery work. The perspectives and the methodologies were varied, the sessions had mixed professional groups and community representatives, and the discussions were rich and inspiring.

The conference themes were broadly divided into response, recovery and resilience. Subthemes included disaster risk management, public health, perspectives on health services including psychosocial and mental health services from the community and provider point of view, community-led response initiatives, social and environmental recovery, leadership and organizations, and the experience of specific groups including children, the elderly and the disabled were discussed. A common thread was one of networking and collaboration for 'caring, sharing and learning'.

Read more about the [key messages](#) gained from the conference.

The People in Disasters Conference videos are now live in [CEISMIC](#).

## Gift of music appreciated

Thank you to Jenny Street for the generous donation of two Panasonic music systems to be used in Birthing Rooms at Christchurch Women's Hospital (CWH).

The donation was made possible from the Heart Two Heart Trust and Link Community Trust.

These will be gratefully appreciated by women in labour in the CWH Birthing Suite.



Above: Di Leishman Midwife and Jenny Street.

## Artwork gifted to Child Health

Christchurch artist Rangi Downes with one of his Disney character paintings he's donated to Child Health Outpatients.

Anne Morgan, Child Health Manager, says the hospital is very grateful to receive one of Rangi's latest paintings.

"It's a lovely bright addition to the outpatients' waiting area and I'm sure the children, their parents and staff alike will get a lot of enjoyment from them."



Above: Artist Rangi Downes with the painting he has donated.

## Christchurch Marathon, Sunday 5 June 2016 - Staff update

After last year's Christchurch Marathon, Canterbury DHB is determined to ensure the problems experienced with access to Christchurch Hospital will not happen again.

[The 2016 Christchurch Marathon](#) is scheduled for Sunday 5th June 2016, starting at 7.30 am. The proposed route has changed significantly from the 2015 route to reduce its impact on access to and from Christchurch Hospital for emergency services, staff, patients and visitors.

Substantial work has been undertaken since the 2015 Marathon by the marathon organisers, the City Council's Transport Operations Centre, the Canterbury DHB, Environment Canterbury and others to come up with a revised route and a better traffic management plan.

The marathon route has been carefully designed this year to avoid traffic problems.

The North Hagley Park section of the race ensures that runners stay inside the park perimeter and do not use the roads around the park. That is what caused traffic flow issues last year.

The 30 minute earlier start time will also help reduce traffic congestion.

Access to the hospital is to be maintained at all times.

This includes access for on-call staff, all emergency personnel and general access.

A Major Events Operations Centre (MEOC) is to be set up at Christchurch City Council Civil Offices on the day.

Bruce Hall, Canterbury DHB Emergency Planner, will be at the

centre to manage any hospital access issues.

If needed, emergency access across the marathon route will be facilitated through this centre by phoning 03 3640 640 to be put through to Bruce Hall.

Contingency plans will also be implemented through this centre if required.

### Marathon route

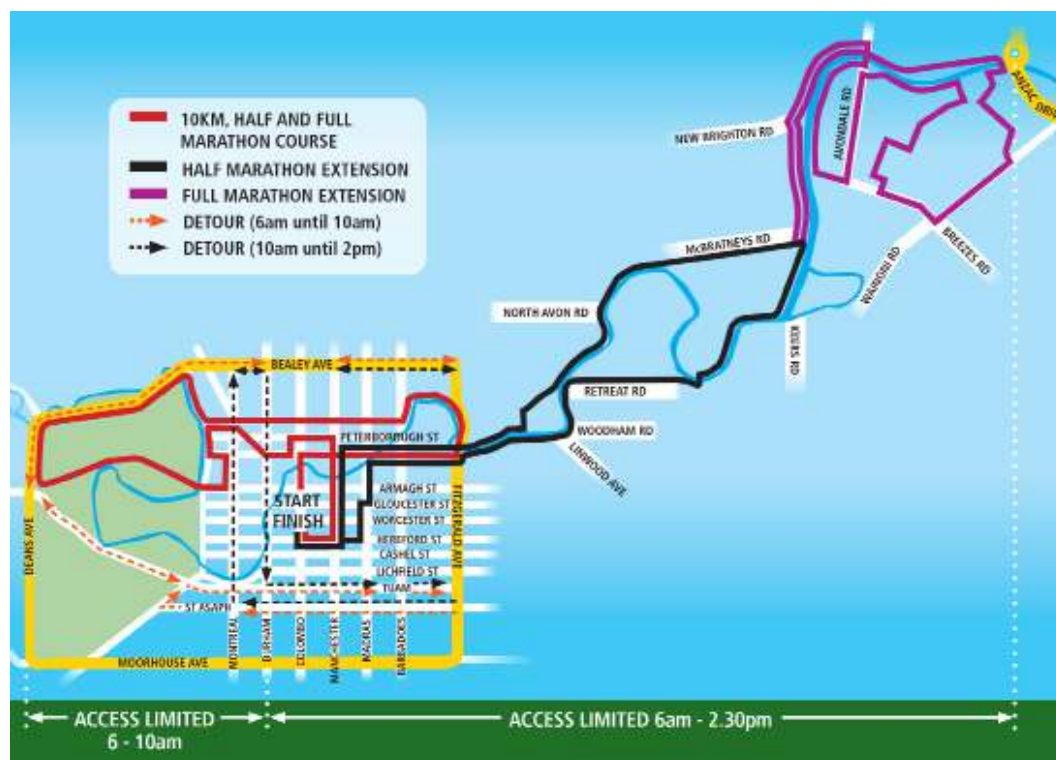
The Marathon will start and finish in Cathedral Square, but will only loop once around North Hagley Park before heading east. This avoids the need for road closures or traffic management on most of the usual hospital access routes.

There are maps showing that some of the roads in the CBD to the north of Cathedral Square will be closed for a time during the day. Detours will be signed. These maps will be available on the intranet.

If you are working on Sunday 5 June, please check these maps and plan your route to Christchurch Hospital before leaving home, particularly between 6am and 2pm on the day.

The following key roads providing access to the hospital will remain open at all times:

- |                     |                    |
|---------------------|--------------------|
| » Bealey Avenue     | » Riccarton Avenue |
| » Harper Avenue     | » Moorhouse Avenue |
| » Fendalton Road    | » St Asaph Street  |
| » Deans Avenue      | » Tuam Street      |
| » Kilmarnock Street |                    |
| » Riccarton Road    |                    |



Durham Street and Montreal Street are expected to be reopened to traffic by 10 am, but these roads are likely to be busy. It is suggested that you avoid using them until after 2 pm.

Visitors to Christchurch Hospital are also advised to:

- » Avoid the CBD area bounded by Bealey Avenue, Durham Street, Lichfield Street and Fitzgerald Avenue.
- » Allow additional time to travel.
- » Use the Park and Ride service from Deans Ave – it will be unaffected by the marathon.



# Staff Wellbeing Programme: New Term 2 Be Active programme: Staff Wellbeing Workshops 2016 – filling fast



## Be Active

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

Try a variety of activities – meet a bunch of new people.

[Click here](#) for more information.

There is also a programme specifically for those with Diabetes or Pre-Diabetes.

[Click here](#) for more information.

**CDHB Golfers – next game at McLean's Island 15 May at 10.00am**

Anyone welcome. Contact [Jamie.Browne@cdhb.health.nz](mailto:Jamie.Browne@cdhb.health.nz) for more information.

**Wellbeing workshops – places are filling fast so be in quick to secure your place.**

New strengths based workshop – available to Managers / Supervisors. [Click here](#) for more information and [click here](#) to register.

We are also running another series of the very popular Staff Wellbeing Workshops – this is the same workshop offered in

2014 / 2015. [Click here](#) for more information and [click here](#) to register – available to all staff.

**Residential Advisory Service (RAS) – FREE legal advice for EQC/insurance issues**

This service is currently only funded until the end of the year, so contact them now if you'd like FREE independent legal advice.

[Click here](#) for more information.

**Over 30 classes a week across main DHB sites – yoga, Zumba, Pilates, mindfulness**

Updated timetables available on the [Staff Wellbeing Programme intranet page](#).

**Free counselling available to all staff**

Free and confidential counselling is available to all staff – for work or personal issues. [Click here](#) for more information.

**Andy Hearn**

**Staff Wellbeing Coordinator**

**Canterbury and West Coast DHB**

**Phone: 03 337 7394 | Ext: 66394 | Mobile: 027 218 4924**

[andy.hearn@cdhb.health.nz](mailto:andy.hearn@cdhb.health.nz)

## Wellbeing Workshops

ALL STAFF

For All Canterbury District Health Board Staff

To support your wellbeing, the CDHB Staff Wellbeing Programme and MHERC are continuing to run a series of 2.5 hour wellbeing workshops.

You play a crucial role in the delivery of high quality care to the Canterbury community. It is more important than ever to take time to focus on your own wellbeing.

We are running a number of workshops in 2016 encouraging you to put your wellbeing first. Evidence suggests that by doing this, those around you – your family and friends, your colleagues and patients – will also benefit.

**2.5 hours to focus on YOUR wellbeing!**

**Workshop Overview:**

- The importance of wellbeing; psychological and emotional effects
- Learn about stress responses and how to cope with stressful environments
- Understand the science and practice of applications of self-care
- Gain skills and take ownership of tools for increasing your own and others' wellbeing
- Enhance positive relationships and social connections
- Improve your health and wellbeing: 5 Ways to Wellbeing, Staff Wellbeing Programme

**Workshop Details:**

- All workshops run for 2.5 hours, including refreshments
- Facilitated by Alison Ogier-Price MSc Psycho, B.Comm, BA Hons, CAT, MNZAPP
- For dates and to register for a workshop – [click here](#)

**Canterbury District Health Board**  
Te Pōari Hauora o Waiata

**MHERC**  
Mental Health Education & Resource Centre

**For more information contact:**  
Lee Tuki  
[Lee.Tuki@cdhb.health.nz](mailto:Lee.Tuki@cdhb.health.nz)  
027 689 0285  
Andy Hearn  
[Andy.Hearn@cdhb.health.nz](mailto:Andy.Hearn@cdhb.health.nz)  
027 218 4924

[Click here to register](#)

## Strengths Workshops

MANAGERS SUPERVISORS

NEW for 2016 - Strengths Workshops for Managers/Supervisors

In the current Christchurch environment it is more important than ever that we take time to focus on our own wellbeing.

With this in mind the CDHB Staff Wellbeing Programme and MHERC are running a NEW series of 2.5 hour workshops focusing on 'Harnessing our Strengths'.

**On completing the workshop staff will have:**

- A theoretical understanding of the strengths based framework.
- Tools to enable a greater understanding of themselves and others which can help improve personal wellbeing and interactions with others, both at home and in the workplace.

This NEW workshop is designed to extend the foundation of positive mental and emotional health developed in the Wellbeing Workshops run throughout 2014 and 2015. Managers/Supervisors are therefore encouraged to attend a Wellbeing Workshop before attending the NEW Strengths Based workshop (although it is not a requirement to do so).

**Workshop Overview:**

- Increase understanding of character strengths as personal resources
- Identify and measure personal strengths
- Experience strengths-based conversations
- Engage strengths in everyday life
- Recraft tasks to increase wellbeing

**Workshop Details:**

- All workshops run for 2.5 hours, including refreshments
- Facilitated by Alison Ogier-Price MSc Psycho, B.Comm, BA Hons, CAT, MNZAPP
- For dates and to register for a workshop – [click here](#)

**Canterbury District Health Board**  
Te Pōari Hauora o Waiata

**MHERC**  
Mental Health Education & Resource Centre

**For more information contact:**  
Lee Tuki  
[Lee.Tuki@cdhb.health.nz](mailto:Lee.Tuki@cdhb.health.nz)  
027 689 0285  
Andy Hearn  
[Andy.Hearn@cdhb.health.nz](mailto:Andy.Hearn@cdhb.health.nz)  
027 218 4924

[Click here to register](#)

## In brief

### Cancer Society Ball

After raising over \$120,000 at last year's record-breaking event, the Harcourts Cancer Society Ball is back for 2016 and promises to be another dazzling affair. Expect an evening of the finest local wine and food, a stunning list of auction items, great music, fashion and style. This is a chance for Christchurch to get together, light up the winter season, help contribute to an amazing cause and celebrate the changing face of this city.

Saturday 18 June 2016

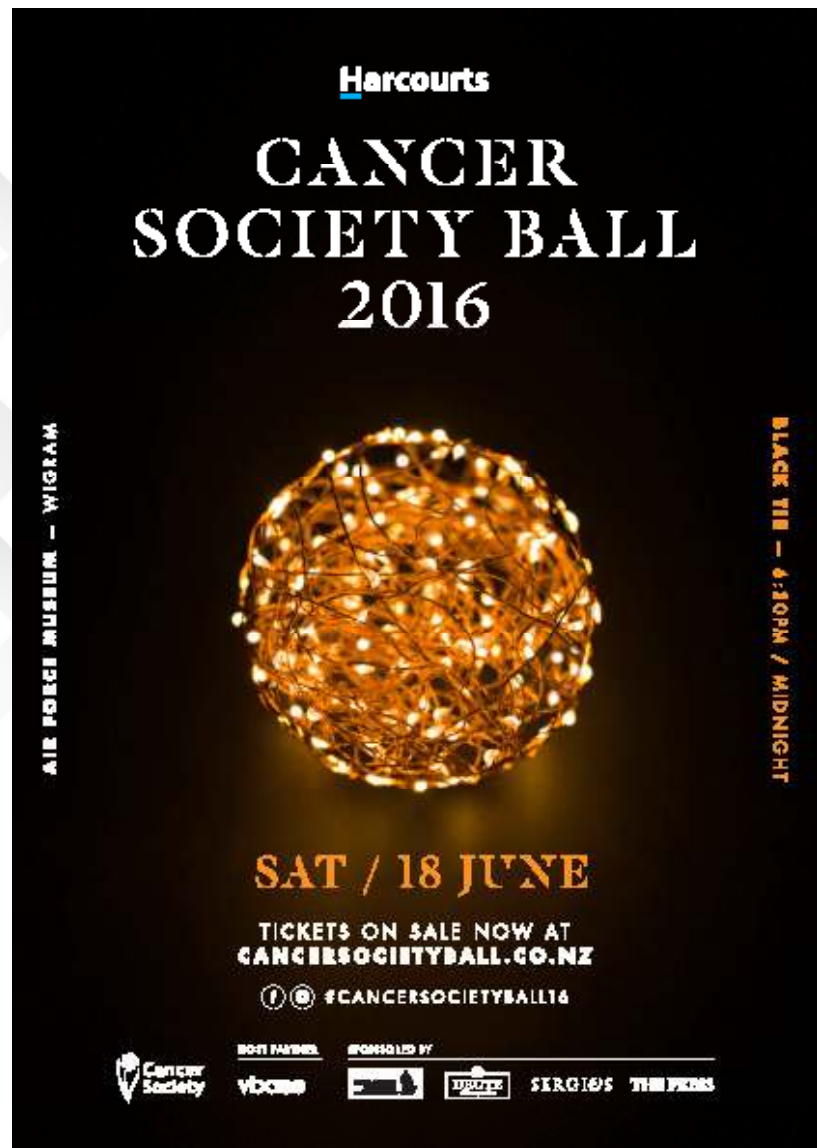
6.30pm - Midnight

Air Force Museum, Wigram

Table of 10 - \$2 250

Tickets on sale now at  
[cancersocietyball.co.nz](http://cancersocietyball.co.nz)

Follow all of the excitement in the lead up to the Ball on Facebook ([fb.com/cancersocietyball](https://fb.com/cancersocietyball)) and Instagram (@cancersocietyball).



### Nurses undertaking Ara (formerly called CPIT) courses in Semester 2, 2016

Applications for funding for nurses undertaking Ara courses in Semester 2, 2016 are now open. Please apply using the on-line application form:

[Ara Funding application form](#)

Applications close on Friday 29 April, 2016

Further information is available from Jenny Gardner on [jenny.gardner@cdhb.health.nz](mailto:jenny.gardner@cdhb.health.nz).

### Registered Nurses undertaking Postgraduate nursing study in Semester 2, 2016

Applications are now open for HWNZ funded places in Semester 2, 2016. The link to the online application form is: [CDHB Online Application Form, Semester 2 2016 - HWNZ funding](#)

The link, and further information, is also available on the Postgraduate Nursing Education website: [Postgraduate Nursing Education](#)

Closing date is Friday 29 April 2016. Any queries should be directed to Margaret Bidois, Administrator, PG Nursing Education on 68680 or [margaret.bidois@cdhb.health.nz](mailto:margaret.bidois@cdhb.health.nz) or to Jenny Gardner, Nurse Coordinator, PG Nursing Education on 68679 or [jenny.gardner@cdhb.health.nz](mailto:jenny.gardner@cdhb.health.nz)





## CANTERBURY HOSPITALS FRIDAY CLINICAL MEETING



The  
COMMONWEALTH  
FUND

Affordable, quality health care. For everyone.

### Harkness Health Care Policy and Practice Fellowship 2016 Report-Back Seminar.

Presented by: **Helen Mason** M.B.A, R.N (2014-15 Fellow)

**Friday 13 May 2016 • 12.15-1.15pm**

Rolleston Lecture Theatre, Ground Floor, University of Otago, Christchurch Campus  
2 Riccarton Ave, Christchurch

The Commonwealth Fund, a U.S.-based foundation, brings promising mid-career professionals- government policymakers, academic researchers, clinical leaders, hospital and insurance managers, and journalists—from New Zealand to spend up to 12 months in the United States as a Harkness Fellow in Health Care Policy and Practice. Fellows are placed with mentors who are leading U.S. experts to study issues relevant to the Fund's mission to support a high performing health care system; cost containment; and other critical issues on the health policy agenda in both the U.S. and New Zealand. The Commonwealth Fund brings together the full class of Fellows—from Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, and the U.K.—throughout the year to participate in a series of high level policy briefings and leadership seminars with U.S. health care leaders.

Join this seminar to hear the project findings and highlights of the Fellowship year from the 2014-15 New Zealand Harkness Fellow, Helen Mason, who is currently Chief Executive of the Bay of Plenty District Health Board. Helen will share her principal findings and conclusions along with some of the highlights of her year as a Harkness Fellow based at the Institute for Healthcare Improvement, Cambridge, Massachusetts.

#### “Improving End-of-Life Care and Advance Care Planning”

The population older than 80 years of age is expected to grow almost 10 percent over the next 40 years for the OECD countries, including the United States and New Zealand. There is strong evidence that patients often do not get the care they want and / or need towards the end-of-life. Given this increasing cohort facing end-of-life, there is a strong imperative to identify options to improve quality towards the end-of-life.

The research objectives were to identify

- the strategic context/policy setting for embedding and supporting advance care planning,
- key success factors to implementation and whether there are existing systems which can be built on to support implementation.

All staff and students welcome

Convenor: Dr RL Spearing (email: [ruth.spearing@cdhb.health.nz](mailto:ruth.spearing@cdhb.health.nz))

Video Conference set up in:

Burwood Meeting Room

Meeting Room, Level 1 PMH

Wakanui Room, Ashburton

Administration Building, Hillmorton



Rongoā Kākāriki  
**GREEN**  
PRESCRIPTION

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



# BE ACTIVE

## Programmes Term 2



### Halswell

Te Hapua: Halswell Centre  
341 Halswell Road  
Tuesday 10:00 - 11:30am  
Starting 10th May 2016

### Belfast

Belfast Community Network Centre  
Sheldon Park, Main North Road  
Wednesday 6:15 - 7:45pm  
Starting 11th May 2016

### Bishopdale

Bishopdale YMCA  
13a Bishopdale Court  
Thursday 1:30 - 3:00pm  
Starting 12th May 2016

### Diabetes

Specific program for those  
with pre, type 1 or type 2 diabetes  
City YMCA  
12 Hereford Street  
Thursday 9.30 - 11.00am  
Starting 12th May 2016

For more information and  
to register please contact:

Dave Jeffrey  
P 03 373 5042

E [dave.jeffrey@sportcanterbury.org.nz](mailto:dave.jeffrey@sportcanterbury.org.nz)  
[www.sportcanterbury.org.nz](http://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, eg 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.



**Canterbury**  
District Health Board  
Te Pōwhiri Hauora o Waitaha



Together supporting on  
**active**  
CANTERBURY