



## Public health working to protect and promote health and wellbeing

**We have a remarkable team at Canterbury DHB and I am in the incredibly fortunate position of being able to see our people in action every day.**

Last Thursday I had the pleasure of accompanying our Prime Minister, the Rt Hon Jacinda Ardern, on a visit to Community and Public Health's offices in Manchester Street.

Community and Public Health has been at the forefront of New Zealand's COVID-19 response. The workload of Health Protection Officers has increased significantly this year. The team, with the support of others at Community and Public Health, has made more than 9000 contact tracing and daily follow-up calls since the pandemic began. This work has helped to stop community transmission in our region.

While the Prime Minister has visited our hospital facilities many times over the past two-and-a-half years, this was her first visit to Community and Public Health and you could tell how much it meant to the team. There was a lot of laughter, some great chats, and a real acknowledgment of the critical role public health plays in keeping our community well.



Prime Minister, the Rt Hon. Jacinda Ardern with the Te Hā - Waitaha Stop Smoking Canterbury team



The Prime Minister with the All Right? team

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As well as our Medical Officers of Health and Health Protection team, Community and Public Health is also home to health promoters, smokefree coaches and analysts who, among other things, prepare submissions on policies and laws that impact upon health. The All Right? wellbeing campaign is also based at Community and Public Health, and the Prime Minister continues to take a real interest in its Sparklers toolkit (a free online wellbeing resource for students in years 1–8, which is now used in schools all over New Zealand). It's great having the Prime Minister's backing for a tool that is helping young people all over the country learn the skills they need to manage worries and feel good.

The Prime Minister's visit coincided with the temporary expansion by Community and Public Health into a neighbouring office. While physical distancing is no longer a requirement for the majority of businesses, it is essential for Community and Public Health which needs to be able to quickly mobilise and expand its capacity if there is another surge in COVID-19 cases.

We can all take pride in how our health system continues to respond to COVID-19. We have incredibly passionate people working right across our region, and the Prime Minister's visit represents a well-deserved recognition of a job well done. While with health there's always more to do, it's important we all give ourselves time to take stock and pat ourselves on the back. I am incredibly proud of our whole team, and I hope you are too. Thanks again to you all for your tireless contributions.



The Prime Minister speaking to Health Protection Officer Debbie Smith, with MPs Hon Poto Williams and Rino Tirikatene looking on



The Prime Minister with Māori Relationship Manager Community and Public Health and Regional Manager West Coast Office Gail McLauchlan



Medical Officers of Health Cheryl Brunton and Ramon Pink with the Prime Minister



The Prime Minister with General Manager Community and Public Health Evon Currie



## Our financial situation

Over the weekend there was considerable coverage of Canterbury DHB's deficit. We are currently working through our draft annual plan process for the 20/21 year, which continues to focus on ensuring that we are best utilising the available health resources to meet the needs of our community. Canterbury DHB continues to balance the impacts of the earthquakes that are reflected in our deficit as capital charge and depreciation – in very simple terms this is the cost of capital and the impact of the damage to many of our facilities. This is an impact that we as a DHB need to continue to absorb.

The 19/20 year budget was estimated to be a \$180m deficit, made up of \$137m in capital charges and depreciation, and \$17m in outsourcing costs related to the delay in the delivery of the Christchurch Hospital Hagley building.

The delays mean that each week, Monday to Friday, the DHB continues to outsource the equivalent of 10 operating theatres in addition to the 20 operating theatres already in use across the DHB's facilities due to our current constrained physical capacity.

We are forecasting an improvement to the budget, with a forecast \$177m deficit for the full 19/20 year. This forecast includes \$116m of capital charge and depreciation (this has reduced due to delays to the Hagley building) and additional costs of service delivery related to COVID-19 that are estimated to be approximately \$14m (Net).

COVID-19 has significantly impacted on the provision of services over the past few months and all DHBs are currently working through how best to catch-up on deferred care.

As a result of COVID-19 we have also re-forecast our expected levels of activity through winter to reflect lower than expected rates of influenza. We continue to focus on matching staffing resource to revised activity and we are

working to ensure that staff are taking annual leave and staying well.

Our depreciation and capital charges continue to have a substantial impact on our future deficits – these are estimated at \$129m for the 20/21 year – as do the continued costs of delays to our occupation of the Hagley building, estimated at a further \$18m for 20/21.

Moving forward we have a clear directive to reduce our deficit and make significant savings and we continue to look at a full range of options to achieve this. We are not looking at 'tinkering around the edges' initiatives; we need to think about new and different ways of working that will help us realise significant savings.

### Expenditure reduction ideas?

New technology, new workflow processes, minimising waste and saving time where it results in reducing expenditure are all areas that provide us with opportunities. We are considering a range of options and are keen to hear any ideas from staff that help reduce expenditure. All ideas will be gratefully received. If you can see how savings can be made in your service by working in new and different ways, feel free to email me directly on [david.meates@cdhb.health.nz](mailto:david.meates@cdhb.health.nz).

### You can help by taking your leave when it's due

One of the biggest financial liabilities we carry is leave. We need to get annual leave balances down as this will improve our situation considerably. If you have more than a year's leave owing, please talk with your manager and make plans to take some leave. Leave will keep accruing so it's important to take a break for your wellbeing and, in doing so, you're helping reduce the DHB's financial liabilities. There's never been a better time to explore New Zealand, with some great deals available – or take the time to have a bit of R&R at home.

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



**David Meates**  
CEO Canterbury District Health Board

If you have a story idea or want to provide feedback on *CEO Update* we would love to hear from you! Please email us at [communications@cdhb.health.nz](mailto:communications@cdhb.health.nz). Please note the deadline for story submissions is midday Thursday.

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



## Bouquets

### **Tamara Brodie, Acute Medical Assessment Unit (AMAU), Christchurch Hospital**

I would like to acknowledge, thank and provide some excellent feedback on Registrar Tamara Brodie. Tamara was looking after my mother whilst on duty in AMAU and her soft and caring nature, her provision of factual information delivered in an exceptionally gentle manner and her professionalism through the entire process was outstanding. Unfortunately despite best efforts my mother died of a brain haemorrhage under Tamara's care; however throughout the process Tamara had everyone's best interest at heart. It was easy to see that Tamara is totally passionate about her job and this comes through in the fantastic nature of care delivered to my mother and to us alike, under such stressful conditions for everyone involved. Tamara's work is truly outstanding and admirable and she should be commended for this. As an employee myself of Canterbury DHB for almost 18 years I know how stressed registrars can get on these late night rosters however Tamara remained totally professional and calm throughout the evening. Thank you Tamara for being so kind and gentle, professional and understanding. You were/are superb.

### **Ward 20, Christchurch Hospital**

I recently spent a fortnight in Ward 20 and can't speak highly enough about the fantastic team of nurses on this ward. As a fiercely independent and private person, having to rely on someone else for personal care was initially extremely daunting. However, the care and empathy of these 'angels in blue' put me at ease in what has been a very stressful and emotionally unsettling time. They also imparted into me a strength and belief in my recovery that I have really needed. Thank you so much.

### **WellFood staff**

I would love to extend my compliments to the catering ladies who come around the wards to take orders and deliver meals. I have been in and out of Christchurch Hospital as a long-term patient for five years and the catering staff have always stood out to my family and I. They are beyond lovely and kind to every single patient, and treat us all individually with such warmth. It truly makes meal times feel less lonely when you are away from family and home comforts. In particular, during the visiting restrictions of COVID-19 it was so wonderful to have the catering staff come around a few times a day – they were so kind and chatty, they make every hospital stay so much better. Thank you so much ladies!

### **Outpatients, Christchurch Hospital**

I received excellent care from the nurse who took my blood pressure etc... She was kind and reassuring. The specialist, Belinda Schouten, was superb. She explained in detail exactly what my condition was, she showed me my X-rays and gave three alternatives for treatment. At no time did I feel rushed, she answered all my questions pertaining to my condition. I left feeling well informed and confident that I understood my condition. Excellent service, and extreme gratitude from this patient (83 years old).

### **Day Surgery, Level one, Christchurch Women's Hospital**

I really appreciate everyone who helped me, including Sarah, Silvia, Aidan, Duncan, Surgeon Pip Davey, Sebastian, Jacqueline, and Laura... I was extremely nervous about this surgery and all these people helped me feel not so nervous.

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

I would like to thank the staff in AMAU, particularly Angela, for the excellent care I have received and the patience they have all shown. Thank you, I have very much appreciated it all.

### Emergency Department, Christchurch Hospital

My husband was in for some issues with his back. His nurses, both named Anna, were awesome.

### Ward 20, Christchurch Hospital

Thank you from the bottom of my heart for taking care of me. I know it may be another day at the office for you but it meant the world to me. Thank you so much.

### Ward 14, Christchurch Hospital

I wish to compliment all the staff who are looking after me. This applies to the registered nurses, student nurses from Ara Institute of Canterbury, the nurse aides, the people who organise the meals and drinks, Ann at the front desk, and the cleaners. Everyone is very friendly and helpful. The meals are amazing. You all are the very best.

### Penny, Jessica and Harriet, Ward 20, Christchurch Hospital

An enormous thank you to Penny, Jessica and Harriet on Ward 20, for their amazing support and care in May this year. I found it tough being an inpatient. Their skill, kindness and compassion made my stay much more bearable. My huge thanks to these amazing nurses and human beings.

### Ward 15, Christchurch Hospital

I have had excellent service, good surgeons and specialists, great nurses. Although I have worked and paid taxes for 45 years, I still see hospital care, such as we have, a privilege and a bonus, plus it has been free. That is wonderful. Thanks lots.

### Ward 24, Christchurch Hospital

I would like to let every staff member know that my mother was treated with love, care and compassion every step of the way. She passed away with dignity and for this I thank you all from the bottom of my heart. You're very special people, doctors, nurses and cleaners. We need you all.

### Bone Marrow Unit, Christchurch Hospital

A compliment to all the nursing staff here. You made my father's treatment during a difficult time so much more bearable. You guys do an amazing job, bringing compassion and humanity to a difficult time in people's lives. Thank you so much – keep up the amazing work.

### Christchurch Women's Hospital

I want to compliment the midwives and nurses working in the Maternity Ward during my stay. I cannot fault the care that myself or my newborn baby received. Not once did I feel as though the staff didn't have time for us or that we were a burden. All the staff I had interactions with were clear and concise when explaining what was happening with me and my care, and always asked me before performing any task such as taking a blood pressure reading. These ladies definitely made my stay a lot more pleasant than I thought it ever could be and deserve to be recognised for their professionalism and approachability. I will forever be thankful to these ladies for my care after birth.

### Julie, Community Dental Service

I must thank you so much for your efficient service! We need more people like you, Julie. Your clinical triage team has contacted me and an appointment for [patient name] made.

### Emergency Department (ED) and Ward 24, Christchurch Hospital

My husband spent time in your ED recently, and your staff they ensured that all possible tests and procedures were carried out. At no time did we ever feel we were a nuisance or that my husband was imagining his symptoms (it turned out he had suffered a stroke), and we were kept fully informed at all times. We are very appreciative of the care we received in ED and in Ward 24 where he spent 10 days.

### Gynaecology Procedure Clinic, Christchurch Women's Hospital

Staff were great. Made me feel comfortable.

## Big Shout Out

### To: Deborah Long and Anne Key

I have just had an appointment at the Eye Clinic and I thought I should send in a couple of compliments for staff. One is Deborah Long, who was having to do all the rebooking of the patients postponed because of COVID-19. The other is Anne Key, who is the main front desk person in Ophthalmology. Both of them just have such lovely ways of speaking and interacting with patients. Juggling patients can't be easy but their approach is just excellent. They are a pleasure to interact with.

### From: Consultant Haematologist Ruth Spearing

#carestartshere





## On Behalf of the Committee

# Central Venous Access Device Governance Group

Central venous access devices (CVADs) are catheters that are inserted into a vein in the arm, neck or chest, ending in a large vein near the heart. CVADs have been used successfully for over 50 years in the acute healthcare and outpatient setting where medium to long-term reliable intravenous (IV) access is required.

Continuous/intermittent, complex IV therapies such as chemotherapy and parenteral nutrition can be delivered directly into the bloodstream, along with obtaining blood samples. In 2019 in Christchurch Hospital, Interventional Radiology (which places most of Canterbury DHB's CVADs) inserted 2038.

As a response to a CVAD-related Root Cause Analysis in 2013, a recommendation was made to form a Canterbury DHB governance group. Anaesthetist Hamish Gray was appointed as chair.

The CVAD Governance Group provides advice and ensures best evidence-based practice in the use of CVADs. This includes aspects of clinical and risk management, auditing and training and education, with responsibility for ensuring training records are maintained and monitored and certification recommendations are met.

Clinical processes involving coordinating or implementing necessary changes to CVAD policies, procedures and products within Canterbury DHB are also covered. The group also advises on appropriate CVADs in the clinical setting collaborating with Infection Prevention and Control and other services.

"Good governance has eight major characteristics: it is participatory, consensus-oriented, accountable, transparent, responsive, effective and efficient, equitable and inclusive. This underpins our work. Our philosophy is to provide safe and effective patient outcomes," says Nurse Consultant Vascular Access Elizabeth Culverwell.

The CVAD Governance Group is responsible for implementing a number of 'firsts' in New Zealand, such as:

- › A CVAD governance group for a DHB.
- › Credentialing of a Radiology Registered Nurse (RN) led peripherally inserted central catheter (PICC) Insertion team in line with Ministry of Health, Nursing Council and Nursing Organisation of New Zealand guidelines.
- › Introducing SecurAcath (a device that is anchored just below the skin and provides securement of a PICC) to address patient safety. Canterbury DHB was the first health provider in Australasia to trial and introduce this. Based on our results, this has now been adopted by 12 DHBs and across five states in Australia.
- › Introducing an advanced credentialed programme for Radiology RNs to insert chest and upper arm tunnelled CVADs. Canterbury DHB is the first DHB to support and initiate this RN advanced practice in tunnelling catheters.

"Being part of this group is rewarding. We each have something special and unique to offer from our pool of knowledge. Each point of view is valued, and we always seek to base decisions on evidence with consensus. This enables us to continue to achieve outcomes that are in the best interest of our patients and provide staff with ongoing support," Elizabeth says.

Thanks to General Manager of Christchurch Hospital Pauline Clark for supporting the development of this group.

If you have any questions, you can email [elizabeth.culverwell@cdhb.health.nz](mailto:elizabeth.culverwell@cdhb.health.nz) or approach any of the members of the group.



#### Members of the Central Venous Access Device Governance Group

Standing, from left: Paediatric Oncologist and Chair Andrew Dodgshun, Secretary Quality Office Roselys Mark and Nurse Consultant Vascular Access Elizabeth Culverwell.

Sitting, from left: Clinical Nurse Educator General Surgical Janine Jennings, Clinical Nurse Specialist Medical Oncology Bronwyn Perry, Clinical Nurse Specialist Radiology Victoria Whitt and Clinical Manager Radiology Philippa Francis.

Absent: Quality Coordinator Child Health Christchurch Women's Hospital Graeme Webb and Nurse Educator Specialty Services Nurse Maude Robyn Carruth

*all  
right?*

**IT'S  
ALL RIGHT  
TO TAKE A  
BREATH.**



# Looking after yourself

## Financial wellbeing seminar

Feeling financially stressed about COVID-19? You're not the only one.

With a lot of focus on looking after our health and wellbeing, it's important not to neglect one of our largest stressors – financial wellbeing.

As our next Tō Tātou Ora seminar, BNZ is coming along to share what financial wellbeing means (hint, it's not about being rich) and how we can look after our finances but still enjoy our lives and have fun. There'll be an emphasis on how to cope financially throughout the COVID-19 pandemic.

You'll also have the opportunity to set up a free 1:1 financial health check if you come along to our face to face seminar (you don't have to bank with BNZ to take part!).

So, come along to Room 102, Manawa building, corner of Tuam and Antigua streets, at 12 – 1pm on Wednesday 8 July.

We realise not everyone is able to come along to the face-to-face session, so we will also make the slides available online.

### Tō Tātou Ora Wellbeing Seminar Series:

### Financial Wellbeing with BNZ



**Wednesday 8 July**

12.00pm - 1.00pm

Room 102, Manawa Building  
(Corner Tuam and Antigua Streets)

**Canterbury**

District Health Board

Te Poari Hauora o Waitaha



# Infection Prevention and Control Team's big effort in the COVID-19 response

The Infection Prevention and Control (IPC) Service staff are trained specialists with expertise in stopping the spread of infections.

They worked closely with clinical services across Canterbury DHB's facilities and beyond to help them prepare to manage a potential influx of COVID-19 patients.

As early as January, the team developed COVID-19 preparedness/ personal protective equipment (PPE) training resources and started delivering education sessions for staff.

Keeping up with demand became challenging as the international crisis came onto everyone's radar and hundreds of concerned emails and phone calls flooded in, says IPC Nursing Director Sarah Berger. Working with their Professional Development Unit colleagues, the team rapidly made available a healthLearn module on COVID-19, which was shared South Island-wide and to date has been used by over 7800 people nationally, including Ara Institute of Canterbury students.

"Between 22 January and 4 April, 192 COVID-19 education and preparedness sessions were delivered, which included PPE training," says Sarah.

Over 4195 Canterbury DHB staff (across all work groups and divisions) were reached. Additionally, a range of other external groups were trained in collaboration with Community and Public Health (CPH), such as land and air transport agencies, she says.

"There was a lot of fear of the unknown and we were at the forefront of dealing with that. With the knowledge we had, we could



The Infection Prevention and Control Service, 'Masters of Disguise'. Team members, from left, Clinical Nurse Specialists Suzy Rogers, Julie White, Sacha McMillan, Mike O'Callaghan and Registered Nurse Jill Rodricks. Front (kneeling) Infection Prevention and Control Nursing Director Sarah Berger

calm people's fears, we did a lot of reassuring people," says IPC Clinical Nurse Specialist Jill Gerken.

The team collaborated with a number of Canterbury DHB services in COVID-19 preparedness activities. One of the most important groups was Supply and Procurement.

"This close working relationship supported strategic decision-making and the securement of critical stock items in a turbulent international environment especially PPE stock, cleaning and disinfection products and waste management supplies," Sarah says.

Following a Ministry of Health directive, the team undertook COVID-19 preparedness assessments of all aged residential care facilities and a range of disability service facilities across Canterbury. They also responded to outbreaks in residential care facilities.

"We worked closely with Canterbury Health Laboratories who were fantastic, we'd ring them and say we're coming to get 30 swabs and they'd have them ready for us right away," Jill says.

IPC representatives were on the local Technical Advisory Group advising the Emergency Coordination Centre and others worked in close collaboration with CPH and Occupational Health, especially around contact tracing. Experts in the team provided technical advice on the establishment of the Acute Medical Assessment Unit as a COVID-19 Assessment Unit, community-based assessment centres, the staff testing clinic, and managed isolation hotels.

"Some days were emotionally charged and we would go home after the shift tired but unable to sleep. The team used synchronised swimming training (after hours in the Burwood

Hydrotherapy Pool) as a way of improving our team work and cohesion," says Clinical Nurse Specialist Sacha McMillan.

IP&C Personal Assistant/Team Administrator Tracy Meekin says the team did an incredible job of protecting the hospital and the population.

"They got out and educated people. I am exceptionally proud of working with them, what I saw during lockdown was beyond anything I have ever witnessed. Their work saved lives."

Sarah says a positive spinoff of the pandemic is that hand hygiene improved dramatically and there were fewer hospital-acquired infections, especially those caused by a common skin organism *Staphylococcus aureus*.

For the IPC Service, Canterbury DHB's values (Care and respect for others, Integrity in all we do and Responsibility for outcomes) mean staying on top of latest research and best practice, supporting teams across Canterbury DHB to find workable solutions to complex challenges and working together as a community of practice to keep unwanted infections at bay.

"It's what drives us," they say.

"Our message is, 'We've got your back! The IPC Service is here to help. And after all this is over, we are looking forward to taking a nice long holiday,'" Sarah says.

## Knitting turns into team building

If you go by the Christchurch Hospital Physiotherapy office at break time you may notice a group of physiotherapists huddled around their knitting needles.

Up to eight mainly young adults are being taught by knitter extraordinaire and Clinical Specialist Physiotherapist Lee Townsend and other expert knitters.

"It all started when one of our hand therapists Linda O'Neill, retired after 35 years work at Canterbury DHB in November last year and I suggested as a joke we knit a peggy square blanket for her retirement," Lee says.

"People liked the idea but not that many could knit, so those of us that could taught others how and we had a great blanket to give to her. I thought it would be good to continue and suggested to those who enjoyed it, that

maybe they should knit a beanie. So this is what happens now in our little office at morning tea and lunch breaks.

"The student knitters have progressed well and are now up to doing cabling and have knitted head warmers and slippers."

Lee says the knitting has been a fantastic team-building exercise in the Physiotherapy department.

"For me it's the satisfaction of teaching them something new and making something that is useful. Also, the chat that happens at the same time, the banter!"

Those who take part are enjoying learning new skills and say that at night they now sit and knit rather than scrolling through their phones.



Physiotherapist Henry Barron, who was the first to complete a beanie



Physiotherapist Michelle Thompson wearing the hat she knitted



Physiotherapists learning to knit

# Challenge aims to position Christchurch as New Zealand's Centre of Health Innovation

Ōtautahi Christchurch aims to become the home of health tech innovation in New Zealand with the [HealthTech Supernode Challenge](#), opening today.

Canterbury DHB's Chief Digital Officer Stella Ward encourages all DHB and Canterbury Health System staff to put their thinking caps on and come up with technology solutions to real healthcare problems.

- › **Aged Care** – how can we use tech to ensure that older people receive quality care that enables them to enjoy their lives to the fullest?
- › **Rural Care** – how can we deliver comprehensive and sustainable health services to rural communities?
- › And there's an **Open** category – pitch your best ideas – any technology solution to any healthcare problem – anywhere!

With a total prize pool across multiple categories valued at over \$340,000, there are plenty of reasons to enter the HealthTech Supernode Challenge. This includes entry into a virtual pre-accelerator programme, the potential for startup investment, a Canterbury DHB validation contract, an opportunity to develop their product directly within Ryman Healthcare's innovation team, and a rare invitation to a further startup incubator programme.

The nationwide challenge, sponsored by ChristchurchNZ, is open to anyone with a healthtech innovation or idea – from students and startups to researchers, and healthcare professionals. The aim of the Challenge is to identify and generate commercially viable solutions that address real healthcare problems focusing on the Aged Care and Rural Care sectors. There is also an Open Category to ensure no innovation is left uncovered.

The HealthTech Supernode Challenge is delivered by the Ministry of Awesome and the University of Canterbury's Centre for Entrepreneurship with support from ChristchurchNZ, KiwiNet, and Ryman Healthcare.



Joanna Norris CEO ChristchurchNZ said there is no city better placed than Christchurch, to host the Challenge.

"Ōtautahi Christchurch is home to Te Papa Hauora, a world-class Health Precinct which integrates research and innovation with education and community wellbeing, pair this with the talent coming out of the tertiaries and a thriving tech ecosystem and we've got the perfect testbed to challenge the status quo and find new ways to address the biggest health issues facing the globe.

I have no doubt we'll see some very competitive submissions coming through with the potential to drive the city's economic recovery and create new high-value jobs."

Applications close on 16 August 2020, with finalists announced 19 August. Anyone in New Zealand can apply on [www.healthtechchallenge.co.nz](http://www.healthtechchallenge.co.nz).



# Hagley update

## Sticking to the plan

While we wait for handover of Christchurch Hospital Hagley, work continues behind the scenes to get things done to ensure a quick and seamless migration.

With ready access to trolleys and space in Intensive Care at Hagley, staff from other areas are now making the most of the lull to prepare their own resources. Last week, Anaesthesiology staff, under the guidance of Team Leaders Doug Williams and Andy Smith, prepared their trolleys. With more than 80 trolleys, it was a big job that took around six staff a number of days to complete. Each drawer required dividers and labels cut to size for each of the inserts.

Recovery teams have completed their prototypes, and the Emergency Department will be getting theirs under way this week. Intensive Care will also review some of theirs that were set up specifically for COVID-19, making sure they're ready to roll (literally) when the time comes to move.

This work up front will ensure the trolleys are easily and quickly stocked when dates are confirmed and the word is given to proceed, putting services ahead of the game for migration.

## Nope, no date

Despite commentary and speculation from multiple media outlets, a date for the handover and subsequent migration to Christchurch Hospital Hagley has not yet been confirmed. Work is continuing in the building by contractors and the Ministry of Health to complete passive fire and remediation works.

## No entry

Whilst work continues, familiarisation tours to the building have been put on hold. Hagley Operational Team members are working through the minutiae of their areas migration plans including identifying those tasks, like the trollies, that can be done ahead of time.

## Hikina on hold

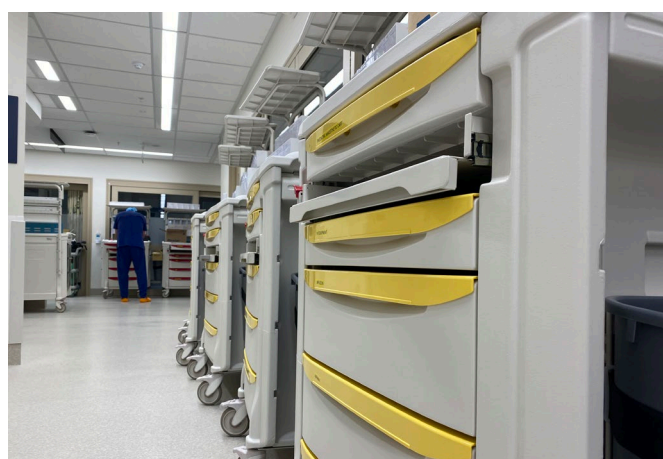
Until we get a confirmed handover date, the regular Hikina to Hagley updates will be on hold. Once we do get a date, the weekly updates, posters and notifications will begin once again with renewed vigour. Until that time, we'll provide informative updates as and when we need to.



Team Leader Doug Williams gets down to business labelling trolleys



The trolley drawers have a variety of inserts, each requiring labels



The team spent two days labelling a variety of trolleys for their areas

# One minute with... Sarah Metcalf, Clinical Director, Infectious Diseases

## What does your job involve?

Assessing patients and assisting with the diagnosis and management of a huge variety of infections, and other patients with fevers, across all inpatient specialties in Christchurch Hospital. We interact with most services and see all sorts of infections from common to incredibly rare. Many of these patients end up on our home intravenous antibiotic service and get followed up in our outpatient clinics and it's satisfying to follow them through to wellness. I also have a busy outpatient service looking after patients with conditions such as chronic hepatitis B or C, HIV, rheumatic fever, tuberculosis and other uncommon infections. In addition to direct patient care I'm involved in a lot of HealthPathways work and help develop antimicrobial guidelines and undertake audit work to help guide improvements in how we use antimicrobials.

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

I undertook an Infectious Diseases run as a registrar and loved the work and was inspired by the two consultants Steve Chambers and Alan Pithie who I worked with at the time.

## What do you like about it?

I love the problem-solving nature of the work, as you often have to be a bit of a detective. I also love the wide variety of work – there's never a dull day and there's always a topic you need to read about or research to help decide on the best management. There aren't protocols for a lot of our

work as there are too many variations and many infections we see are too uncommon for randomised trial-style evidence. I also get to work with an amazing team of people in our little department.

## What are the challenging bits?

Bacteria I've never heard of before (thanks, Team Micro) and knowing whether a bacteria cultured in a sample is significant or not. Also influencing patients to prioritise their healthcare and wellness. A lot of our patients don't prioritise their health or have low health literacy and working with them to ensure they are taking their treatment, which may be lifelong, and enabling them to attend their appointments or engage with us can be really challenging. But it is satisfying, when the extra effort pays off.

## Who inspires you?

People who lead by example, people who are empathetic and people who think creatively and strategically.

## 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?

They're the cornerstones of how I always try to practice and work.

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

I'm a strong supporter of the performing arts locally and sponsor organisations such as the Court Theatre and Christchurch Symphony Orchestra.



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

Standing at the top of Mt Hutt on a bluebird day.

## What do you do on a typical Sunday?

Lazy start, cooked breakfast, get stuck into my garden, go for a walk and read some of my book.

## What's your favourite food?

Too many to choose from, but I don't get through too many days without chocolate.

## And your favourite music?

I have wide ranging taste in music including classical orchestral, jazz, blues, pop and rock. I like discovering new music.

## Share your top winter wellbeing tips to be in with a chance to win!



Wellbeing Health and Safety and Something *For You* want to hear your wellbeing stories and give you the chance to win a Porters Ski Season Pass for 2020!

We're in the thick of winter now, so it's a good time to think about how we can look after ourselves at this time of year.

To have the chance to win the season pass, tell us in 150 words or fewer how you are going to look after your wellbeing this winter – include a photo for a bonus entry! Email your story to [somethingforyou@cdhb.health.nz](mailto:somethingforyou@cdhb.health.nz) by Sunday 5 July. Winners will be contacted and announced on Wednesday 8 July.

Here are some ideas for what you should be trying to do at this time of year, to look after your wellbeing:

- › Make the effort to get out for exercise and fresh air even though it's cold
- › Change your food intake to make sure you're getting lots of nutrients out of your meals
- › Catch up with friends and family
- › Keep your fruit and fluid intake up
- › Remember to cover your mouth when you cough or sneeze (with your elbow or a tissue)
- › Wash your hands regularly and utilise the hand sanitiser around our Canterbury DHB sites.

Check out the [Something For You page](#) for other winter deals!



## WIN A 2020 PORTERS SEASON PASS





# Try going Dry this July

Dry July is a fundraiser that challenges you to go alcohol-free and raise funds for New Zealanders affected by cancer.

The funds raised through Dry July will help cancer patients, their families and carers in practical, tangible ways. The aim is to improve the comfort, care and wellbeing of people affected by cancer.

Funds raised for Dry July in 2020 will benefit Look Good Feel Better, Bowel Cancer NZ and Prostate Cancer Foundation NZ. This year the campaign gives you the option to challenge yourself to 31 days dry or have a Dry(ish) July and choose 21 or 14 days dry.

As it's great to have the support of friends, family or workmates during your Dry July you can also sign up as part of team.

Having a Dry July has great health benefits. Each year participants report sleeping better, having more energy and productivity. Other benefits can include a clearer head, weight loss and healthier skin. So, you're not only helping others, you're helping yourself. It's a win-win!



**I'm going Dry this July to raise funds for people affected by cancer.**

**To make a donation, visit [dryjuly.co.nz](http://dryjuly.co.nz)**

## How it works

- › sign up to the challenge at [www.dryjuly.co.nz](http://www.dryjuly.co.nz)
- › go alcohol-free in July
- › ask friends and family to sponsor you
- › help people affected by cancer.

Concerned about your drinking? Try out the easy interactive tools at [www.alcohol.org.nz/help-advice/is-your-drinking-ok](http://www.alcohol.org.nz/help-advice/is-your-drinking-ok) to work out how much you are drinking and whether it is affecting your health.

Talk to a  
counsellor,  
any time.

NEED TO TALK?

**1737**

free call or text  
any time

# Nominations invited for the 2020 Minister of Health Volunteer Awards

Last week we celebrated National Volunteer Week and our hundreds of volunteers across the organisation helping us each and every day of the year.

They're a very special group and now is the opportunity for individuals and teams to be recognised for their outstanding dedication to supporting health and disability services.

Nominations for the 2020 Minister of Health Volunteer Awards are now open. Awards will be presented for outstanding achievement in Health Care Provider Service, Community or NGO Health Service, Māori Health Service, Pacific Health Service, Youth Health Volunteer and Long Service. There is also an overall Health Volunteer of the Year.

Nominations close on 17 July 2020. The awards will be presented in a series of regional presentations in late July or early August.

For more information, including the nomination form, visit the [Ministry of Health website here](#).

Let's celebrate and pay tribute to those individuals and teams of volunteers who make a difference to New Zealanders' health.

## calling for nominations

for the 2020 Minister of Health

## volunteer awards

Health volunteers make extraordinary contributions, to an extraordinary number of people, in an extraordinary number of ways.

These awards celebrate health volunteers from all walks of life and give New Zealanders the opportunity to recognise and celebrate the inspirational commitment of health volunteers.

**Nominations  
now open**

Closing 5 pm Friday 17 July 2020

**Nominate  
someone today**  
[health.govt.nz/volunteerawards](https://health.govt.nz/volunteerawards)



## DISTANCE NOT DISTANT

TINANA TAWHITI, WHAKAARO TATA



# Celebrating Fresh Thinking: UC Professorial Lecture Series

Celebrate the contribution to academe made by Professor Mukundan Ramakrishnan and Professor Andreas Willig in the first presentation in the UC Professorial Lecture Series for 2020.

**Date:** Thursday 2 July

**Time:** 4.30–6 pm

**Location:** E14 – Engineering Core, University of Canterbury (UC) Ilam Campus

**RSVP:** Deborah Wekking, Personal Assistant to DVC(Research) [deborah.wekking@canterbury.ac.nz](mailto:deborah.wekking@canterbury.ac.nz)

## Presentation details

### “Digital Pathology Research in the NZ Context”

Presented by Professor Mukundan Ramakrishnan, Department of Computer Science & Software Engineering

In the rapidly growing field of digital pathology, several new image analysis and machine learning algorithms are currently being developed for automated extraction and quantification of tissue biomarkers used in pathological evaluations. The application of digital technology in pathology has the potential to transform care of breast cancer patients through improved pathology workflow, early and accurate disease diagnosis and enhanced disease management. However, despite numerous benefits digital pathology offers for routine diagnosis, its uptake in clinical practice in New Zealand has been slow. The UC research group (Computer Graphics and Medical Image Analysis group, Department of Computer Science and Software Engineering) has established strong research collaborations with anatomical pathologists specialising in breast cancer and is at the forefront of research and development in this field in New Zealand. This lecture gives an overview of the projects undertaken by the group

in the past few years, some of the key accomplishments, and the current state of research. This lecture also looks at the challenges in the adoption of digital pathology implementation in clinical practice and discusses how some of the emerging technologies could be used in future for the transition of digital pathology from 2D to 3D tissue specimen analysis.

### “Past and Upcoming Research in Wireless Networking”

Presented by Professor Andreas Willig, Department of Computer Science & Software Engineering

In the first part of this talk Andreas will focus on wireless body sensor networks (WBSNs), a technology in which a group of sensors is attached to the human body to collect vital signals. These sensors communicate wirelessly amongst each other, using standardized technologies like the IEEE 802.15.4 personal area network. It is of critical importance that this communication is reliable, but unfortunately WBSNs can easily experience interference from other technologies (like WiFi) or from other WBNs using the same technology. We will discuss results on the impact of interference and some ways to manage it.

The second part of this talk is more futuristic. In recent years, drones or unmanned aerial vehicles (UAVs) have found numerous applications, e.g. in delivery of goods, aerial photography, asset inspection and other fields. So far, most of these applications have relied on single drones. There is now growing interest in going beyond this and to consider applications of collaborating swarms or formations of drones. We look into some of the communications/networking and coordination challenges that need to be solved to support networks of hundreds/thousands/tens of thousands of drones.

all  
right?

IT'S  
ALL RIGHT  
TO TALK  
IT OUT.

