CEO UPDATE

Monday 15 August 2016





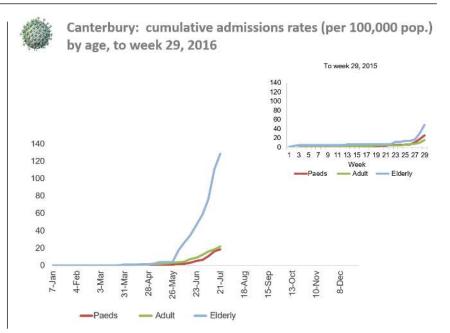
More than our fair share of people with influenza admitted to our hospitals

Last week Canterbury was highlighted as having a higher number of people admitted to hospital with complications of influenza compared with the rest of the country.

Interestingly, we're also tops in the country when it comes to influenza vaccination, with more than 178,000 doses of vaccine being distributed up until the end of July. As you can see from the table, most of the influenzarelated hospital admissions are people aged over 65 years.

So far this winter we have seen 370 people with influenza-related illnesses admitted to hospital compared to 300 at the same time last year. This is at odds with the national trend, where there is very little influenza about, however, it may be a reflection of our ageing population as we have New Zealand's largest group of older people living in Canterbury.

The seasonal increase of people with medical conditions has put increased pressure on teams throughout our health system - on



the acute demand programme, on general practice teams, and it's certainly been felt by our hospital-based medical teams, particularly when so many people need to be cared for in isolation in facilities that are well past their best-before date.

As I said recently for the whole system to work, the whole system has to be working and it's at times like these our system is put to the test. Thanks to everyone who is working so hard to provide quality care to people in our hospitals, their homes and in Aged Residential Care.

It's a daily and weekly feat to ensure there is minimal disruption to the flow of patients who are booked in for elective surgery – it's a credit to everyone, that we have managed so well despite the increased numbers of patients with influenza-related illnesses, respiratory and gastro conditions. What makes this all the more remarkable is that this is achieved against overwhelming challenges.

Last year 33,000 people with various acute conditions were cared for in the community. This is a significant achievement, and without this collaborative whole-of-system care the flow of patients through our hospitals would grind to a halt.

Canterbury has a 30% lower admission (to hospital) rate than the rest of the country, and this is only possible due to the cooperation and collaboration between hospital-based specialists and teams and community-based primary care health

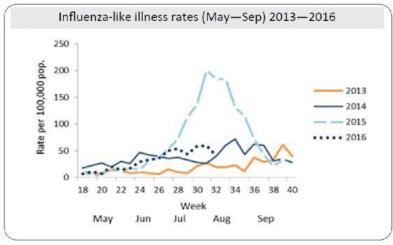
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Above: Canterbury Influenza-like illness rates (May - Sept) 2013 - 2016

professionals, including general practice team colleagues and expert community nursing and allied health teams.

Thank you for the extra effort you have been putting in of late, managing a range of patients with complex needs, and stretching to cover for colleagues who are away.

Extra staff influenza vaccination clinics have been scheduled - details on page six.

Thanks also to everyone who completed the staff Wellbeing survey. We had a record response this year. You can read more about that below.

Staff Wellbeing Survey – thanks, and next steps

A massive thank you to all of you who completed this year's CDHB Staff Wellbeing Survey – the response has been awesome! We're still 'crunching the numbers' but it looks like we have about 1,500 more responses than in the 2014 survey.

And although the survey is officially closed, a link to the survey will remain on the intranet homepage for the rest of this week – it's still not too late to have your say!

The information we've received from the survey will give us a better understanding of where staff are at with their wellbeing, and provide us with insights on how we can do more to support our people.

To help tease out the survey's findings, in October we will be conducting a series of focus groups with staff. These will help us better understand what type of initiatives will be most effective in addressing the issues and opportunities identified in the survey.

The information we get from the survey and the focus groups will be used to develop a comprehensive Staff Wellbeing Strategy, which we begin implementing early in 2017.

FitBit Winners!

Congratulations to Karina Gramstrup, who has joined previous winners Meghan Heaphy, Ainslee Hansen and Gail Houston as a lucky recipient of a FitBit HR Wristband.

Hanmer Springs Pamper Package

The winner of the supreme award, a Hanmer Springs Pamper Package for two people valued at \$349, goes to Sarah Crocker. Congratulations, and enjoy it!



Above: Winner of the supreme award, a Hanmer Springs Pamper Package, Sarah Crocker.



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Gathering to farewell Dr Sue Nightingale

Last week the mental health team held a gathering to say farewell to Dr Sue Nightingale, our chief of psychiatry, as she prepares to take on her exciting new role as Chief Medical Officer for CDHB.

The event was wonderfully hosted by the whānau at Te Korowai Atawhai. Well-wishers attended from various Specialist Mental Health Service (SMHS) teams and speakers included GM, Toni Gutschlag, (SMHS General Manager), Steve Duffy (Clinical Director, AIG) and Anne-Marie Wijnveld (Nurse Consultant). The gathering was very informal and contained several amusing anecdotes and stories.

This is Sue's last week as Chief of Psychiatry. After a period of annual leave Sue will take up her new position of Chief Medical Officer on 19 September. I look forward to welcoming Sue to the executive management team and working with her in her new role.

Have a great week,

Shed

David Meates CEO Canterbury District Health Board



Above: Departing SMHS Chief of Psychiatry Dr Sue Nightingale speaking at her farewell gathering last week.



Above: One of the many humorous moments: Harith Swadi, (CAF Clinical Director) was unable to attend the farewell but fortunately Steve Duffy came equipped with a life-size photo!



Above: SMHS General Manager Toni Gutschlag, one of the speakers at the farewell gathering.

Canterbury Grand Round

There is no grand round on Friday 19 August, next one will be held Friday 26 August.

Facilities Fast Facts

Fast Facts - Burwood

From 22 August, Orange Line buses will stop on the Burwood Hospital site, and 135 buses by request. Over the coming week a new bus shelter will be installed in the car park by the new main hospital entrance. There will also be a seat and a real-time screen to show when the next bus is due. The shelter install is planned for Thursday 18 August, which may result in some temporary disruption to a small area of the car park.

Fast Facts - Christchurch

Last Friday in the early morning, a concrete pour was done for the central core of the western tower of the Acute Services building

Demolition update

The blue car parking building has nearly vanished.



Outpatients

A "ground scrape" of the top 50 cm of the soil on the Outpatients / St Andrews Triangle site is now underway. The land is of historic interest, and no archaeological work has previously been done there. St Andrews Church, opened on the site in 1857 and relocated to Rangi Ruru School in 1987, was one of the first churches to be built in Christchurch. A school was also present on the site between 1858 and 1877. An archaeologist is overseeing the work.

The yellow container walkway along the site's Antigua Street boundary will be for pedestrians only. It is expected to open in around two weeks. Lighting will be installed in the containers. When the walkway opens, cyclists travelling north to the Boatshed bridge and the hospital will be asked to dismount and walk their bikes along the walkway.



Bouquets

Nuclear Medicine Department, L2 Riverside, Christchurch Hospital

I attended an outpatient apt at Nuclear Medicine and wish to pass on a compliment. The reception person (didn't get her name) was friendly, communicated well and was very efficient. Dr Cawood was very respectful, knowledgeable, interested and likewise, communicated very well. I felt well listened to and he answered my queries in a clear and thoughtful manner. He then arranged to have imaging done whilst I was there, saving at least one further visit for me. Justin Sheehan (RN) was likewise friendly and efficient whist taking bloods etc. and the radiologist whose name I also can't recall was equally competent. Overall, I found the care to be outstandingly good and am grateful to all involved.

James Young and the Metro Bus team

Thanks to James and the Metro bus staff for the advisory sessions prior to the move to the corporate office. I have now started to bus to work (and thus used the buses in Christchurch for the first time ever). It's so simple, feels good to do my bit for the environment and parking congestion, and just as quick as driving and walking! If it wasn't for the advisory sessions it would have been "something I must try one day". Great initiative, thanks.

Ward 28 (Nephrology and Neurosurgery), Christchurch Hospital

I am writing this to show admiration to our charge nurse manager Alison Watkins. On the night shift of 27 July the whole hospital was severely short-staffed and the hospital was over its bed capacity. This has affected Ward 28. As staffing was dire she volunteered to do

a night shift. This to me shows genuine concern to patients and responsibility. I look up to her more because of this. What a great leader!

Diabetes Outpatients, Christchurch Hospital

Melissa who works at the store at the Diabetes clinic has literally changed my quality of life for the better through her 110% performance. She has always gone the extra mile for me and extremely informative with new product availability which has led me to ... saying goodbye to finger picking. I can't say thank you enough Melissa.

Medical Day Unit (Immunology), Christchurch Hospital

Absolutely fabulous staff. Very friendly and work very well as a team. I have been coming to this unit for one and a half weeks every day and staff is a pleasure to be with every day. Good standard of care and help.

Intensive Care Unit (North), Christchurch Hospital

I just want to say thank you for the good services, excellent care in the ICU (North). Very, very good service on day shift and night shift. God bless you all.

Plastic Surgery, Christchurch Hospital

I had a skin graft to my hand recently and found my care in all aspects very, very good indeed.

Day of Surgery Admission (DOSA), Operating theatre and Ward 10 (Cardiothoracic and Vascular), Christchurch Hospital

As a staff member I experienced the service for myself. I was truly impressed. Thanks to everyone from DOSA to OP theatre to Ward 10. You are all awesome. My anxieties were allayed.

Special mention to Bryce Curran anaesthetist Theatre 1 and recovery staff. Thank you, I think we are an awesome team.

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

As a patient currently in this ward I wish to comment and praise the high level of care/concern shown to me by the staff. In particular the lady aide Julie who has been assisting me with areas of resolution, has been more than helpful and in fact more than satisfactory in professional ability, caring, etc. Thank you Julie, you are a credit to your profession.

Plastic Surgery and Ward 20 (Oncology), Christchurch Hospital

Another compliment to great standard of care from all concerned in a difficult time for myself. Excellent meals, thank you so much.

Orthopaedic Outpatients Department (OOPD), Christchurch Hospital

Fantastic staff very kind, smiling and happy even though there were only two doctors on and the waiting room was full, your staff outdid themselves with patience and kindness. Thank you very much to all staff in that department.

Ward B1, Burwood Hospital

Many thanks for the wonderful care ... has received during his stay in hospital. It's very nice to see him back on his feet and feeling better, he has enjoyed his stay in B1 because of the caring staff. Take care.

Ward B1, Burwood Hospital

To all the wonderful people on Ward B1 at Burwood. Thanks very much for taking such great care of Dad during his stay.

Clot retrieval service

Christchurch Hospital doctors have successfully been saving lives of stroke patients with major blood clots using a newly developed technique.



Dr John Fink, Canterbury DHB Clinical Director at Christchurch Hospital's Neurology Department, has been leading the new Endovascular Clot Retrieval service which uses a neuroradiology technique.

Above: Dr John Fink

"Basically a neuroradiologist inserts a tiny wire into an artery in the patient's groin under medical imaging. The wire is fed up to where the clot is blocking the blood supply in the brain," Dr Fink says.

"On the end of the wire is a device called a 'stentreiver' which is deployed to trap the clot and remove it, restoring the blood supply."

Endovascular Clot Retrievals are only performed on suitable patients who have had a major acute strokes and managed to access care within 3.5 hours of the clot forming.

"We need to make sure the brain is still relatively alive. Therefore time is of the essence. The longer it takes to get a stroke patient to hospital, the higher the chance of irreversible brain damage.

"Recognising a stroke is key. People need to remember the FAST message and look for 'Face' drooping, 'Arm' weakness, 'Speech' affected and 'Time'. If people recognise these signs we can do something before the brain is dead."

Most acute stroke patients are given a medication intravenously called thrombolysis matalapaine which is designed to dissolve the clot.

"The success rate of the medication is that of around 1 in 3 patients and it is not usually effective on patients with the really big clots," Dr Fink says.

So with the new treatment, the clot dissolving medication is still administered to the patients in the first instance, in case it does work and then the neuroradiologist starts the endovascular clot retrieval procedure."

The first step is an angiogram which administers a dye into the patient's blood system to show the level of damage to areas in the brain.

"This helps us determine whether we should proceed with the stentrieval part of the procedure to remove the clot."

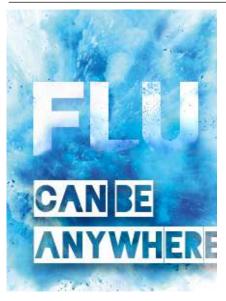
The clot retrieval takes about 60 minutes. To date, four patients presenting to Christchurch Hospital with major acute strokes have been suitable to undergo the procedure.

"The long term benefits are significant. For all of these patients, if they had not had this treatment they would have had much poorer outcomes. Some are likely to have required full time care and would never have been able to work again.

"Instead, all of them walked out of hospital within a week of admission, with minimal side effects instead of what could have been a lifetime of cognitive and physical disability or even death."

It is hoped that about 15 patients a year will be suitable for this treatment in future.

Read about <u>Debbie Satherley's</u> experience, who is one of the four patients to have already benefitted from the service.



Staff influenza vaccinations – last chance!

Additional clinic scheduled:

- » Wednesday 17 August, 13:30 15:00 at the Endo room (off ward 26), Christchurch Hospital
- » Wednesday 24 August, 12:30 -14:00 at Ward GG meeting room, Burwood Hospital
- » Wednesday 31 August, 13:30 -15:00 at the Endo room (off ward 26), Christchurch Hospital

(Influenza vaccine and general vaccinations)

Christchurch to play host to ANZAED conference



Above: Dr Cynthia Bulik

Christchurch is set to play host to the annual <u>Australia and New Zealand Academy</u> for <u>Eating Disorders (ANZAED) conference</u> this month.

About 200 delegates are expected to attend the two-day conference, which is being held at the Rydges Latimer Hotel on Friday 26-27 August.

Rachel Lawson, ANZAED 2016 conference convenor and clinical lead for the South Island Eating Disorders Unit, says it's been half a decade since the conference has been held in New Zealand.

"I'm really excited to be hosting this in Christchurch. We have excellent speakers lined up including international expert <u>Dr Cynthia Bulik</u>, who is the lead investigator in the world's largest study to identify genetic factors associated with anorexia nervosa, "ANGI", involving the collection of 20,000 genetic samples.

"Cynthia will be revealing some of her key findings for the first time at our conference," Rachel says.

The genetic component of eating disorders is one clinicians are increasingly learning plays a significant role in people's susceptibility to developing the illness.

"We know there are a multitude of risk factors that contribute to someone developing an eating disorder but Cynthia's work is particularly interesting as it's helping us understand just how important genetics are to a person's vulnerability to illness."

Effective treatment for eating disorders is most beneficial when the illness is identified as early as possible.

"If we can recognise someone's genetic risk factors, then perhaps we can put supports in place for a young person before the signs of an eating disorder start to emerge."

Rachel says the conference is also a chance to bring something really positive to Canterbury.

"Particularly for our workforce who have worked incredibly hard over the last five years post-earthquakes, through some very challenging circumstances.

"Given that this is the first time we've held this conference in Christchurch, it's a rare opportunity for our clinicians to gain exposure to international experts, and other colleagues in their profession and share ideas and knowledge."

Have your say on the Health of Older People Strategy

MINISTRY OF HEALTH

MANATU HAUORA

The Ministry of Health's currently consulting on a draft Health of Older People Strategy – and that includes an online forum where people can make their views known.

The document sets out a draft strategy for the health and wellbeing of older people for the next 10 years. Its vision is that older people live well, age well, and have a respectful end of life in age-friendly communities.

The forum is another way for people to provide feedback, besides the traditional formal submissions on the draft strategy.

All forum comments will count towards the consultation outcome.

Health ageing involves people of all ages, and if you know anyone who would be interested in commenting online, please tell them about the forum and how to access it at:

https://discuss.health.govt.nz/health-older-people-strategy

The consultation closes on 7 September.



Pharmacy Awards

Senior Clinical Pharmacy Technician, Sandra Edmondson, was a runner up in the Technician Superstar category at the recently held Pharmacy Awards.



Above: Sandra Edmondson

Sandra says for technicians to work at this level is a first in New Zealand and benefits both patients and the cardiology service as a whole.

The award recognised that she had seen an opportunity to counsel patients on any new medications for post myocardial infarction.

"This led to becoming part of the cardiology rehabilitation team counselling patients and their families"

Because of the award she'd since had the opportunity to speak publicly to the U3A (University of the Third Age) group in Canterbury.

Sandra was also Highly Commended at the Pharmacy Awards for a second project.

A Christchurch Pharmacist was the sole Canterbury winner in the Pharmacy Awards held in Auckland on August 6.

Primary Healthcare Pharmacist, Mark Webster, who founded Stay Well Pharmacy in Shands Road, won the Innovation in delivering Care and Advice award and the Good Sort Pharmacist award. Mark, who is a local karate instructor, is a passionate about the benefit of nutritional supplements and the body's need for vitamins and minerals to support optimal health.

It's great to see pharmacists and their teams get the recognition they deserve for their commitment to professional healthcare, service to patients and contribution to the profession.

The Pharmacy Awards are now in their 30th year and about 370 pharmacy stakeholders from around the country attended the event.

The judges said that the finalists showed a clear understanding of their patients' needs and that they were delivering services to meet these needs in their local communities. The high calibre of entries was consistent across all award categories and selecting winners was no easy task.

The finalists, winners and highly commended from Canterbury are:

- » Innovation in delivering Care and Advice Winner - Mark Webster, Stay Well Pharmacy
- » Pharmacy Guild Community Pharmacy of the Year Highly Commended - Crisps Healthy Living Pharmacy Highly Commended - St Martins Pharmacy
- » Best Complimentary Healthcare CampaignRunner-up Mark Webster Stay Well Pharmacy
- » Technician Superstar Runner-up - Senior Pharmacy Technician, Christchurch Hospital, Sandra Edmondson
- » Highly Commended Senior Pharmacy Technician, Christchurch Hospital Sandra Edmondson
- » Good Sort Pharmacist Winner - Mark Webster, Stay Well Pharmacy
- » Retail SuperstarsRunner-up Lisa Erdman, Unichem Spitfire Square Pharmacy

Project values patient's time

Valuing patient's time was a key motivator behind Physiotherapy Department administration clerk Lyn Torrance's Collaber8 project.

Lyn says she was finding increasing problems with physios not effectively communicating cancellations or changes to their clinics.

"Sometimes they would write on a piece of paper or tell us very last minute that they need to cancel or move a clinic for various reasons and it just wasn't a very professional system."

As part of her Collaber8 project Lyn created a new system with a new form for staff to complete and submit well in advance of any cancellations.

"It is designed to reduce the number of last minute cancelled clinics. Last minute cancellations would often mean the administration staff would have to spend time phoning all the patients who had already confirmed their clinical appointment and try and reschedule them.

"This can sometimes mean cancelling up to eight patients a clinic, which takes a lot of time and means dealing with patients who may become frustrated with having to change their plans last minute."

The new system means less disruption for everyone and is most importantly better for the patients.



Above: Lyn Torrance

COMMUNICATION AND ACCURACY PMS CLINIC FORM

Adjustment to existing clinics
To block for meetings, appointments, admin

Clinic\name					
	Dates	Open Close (O or C)	All day (£) exclude	Time (part of the day)	Reason: je AL, course, meeting
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

*USE FOR MEETINGS, TEMPORARY CLINIC CLOSURE TIMES

IF CLOSURE OF A CLINIC IS PERMANENT A "PMS CLOSE CLINC" FORM NEEDS TO BE

COMPLETED – See Office for this form

OFFICE USE ONLY	190
Date received	
Date processed	

eCALD® 11th News Edition

This <u>edition</u> announces the extended early bird registration for the coming International Asian and Ethnic Minority Health and Wellbeing Conference – Don't miss this extension. It also brings to you an exciting opportunity to hear from an international speaker at the September Cross Cultural Interest Group seminar. It promotes the Chinese Families Autism Support Group, the Refugee Youth Mental Health forum, the newly published Superu 4th Families and Whanau Status Report and introduces the ActivAsian programme as well the Culture No Excuse for Abuse booklet in multiple languages. Read here.



I'm taking this scooter to Hokitika!

HealthInfo/HealthPathways Co-ordinator, Lara Williams, will be traversing the Southern Alps on a 50cc scooter to raise funds for the Cancer Society - Canterbury / West Coast branch.

On Saturday 10 September the 2016 Tranzalpine Scooter Safari will ride from Christchurch to Hokitika. It will take eight hours to get there, travelling at 50kms per hour.

"It's expected there'll be four seasons in one day," says Lara.

Support teams will be following with trailers and a few changes of clothes. Lara is one of 250 others enduring some hardship in support of those living with cancer. A highlight will be racing (albeit slowly) a few laps at Mike Pero Motorsport Park to warm up.

"Anyone is welcome to pop down for the start or to cheer along the route. Many of the scooter riders will be in costume. There's sure to be an Elvis or a Stormtrooper."

Scooter engines will kick start at 9am.

"Then it's onto a pre-ordered pie at Sheffield Pie Shop, lunch at Arthurs Pass, before rolling onto Hokitika's beachfront about 5pm."

Lara is riding in memory of her Dad, Graeme, cousin, Ann, and friend Sarah. Donations can be made by going to:

scootersafari.co.nz/leaderboard - "Lara does the Tranzalpine"

2016 will be the fifth bi-annual ride. The Scooter Safari started in 2009, when the first Tranzalpine Scooter Safari saw 32 riders make the maiden voyage. Since then the event has snowballed with \$600,000 being raised so far for cancer research and education programmes.



Above: Lara Williams and her scooter.

Think of a name for the new phone project and you could win a new phone!

Last week we talked about the fact Canterbury DHB is moving to Vodafone as our phone provider. We're now looking for a name for the project that will oversee the transition – something catchy, something simple, perhaps something clever...it's up to you.

To make it worth your while, we have a Samsung Galaxy J2 Smartphone up for grabs for the lucky winner.

Send your entries to communications@cdhb.health.nz with the words new phone project in the subject line. Entries close at 5pm on Wednesday 17 August.

The winning name for the project will be decided by the project steering group, and announced in the CEO update on Monday 22 August.



Birthday wishes for two special Waikari patients

A very special celebration was held at Waikari Hospital recently as two long term patients – both nonagenarians, celebrated their birthday on the same day.

Pat Delaney was born 20 July 1919, at the end of WWI and Len Woods was born two years later, 20 July 1921.

Friends, family and staff gathered to celebrate the 97 year old's and 95 year old's double birthday and the lounge at Waikari Hospital was filled with laughter and reminiscence for the two men.

A birthday cake had been baked at the hospital and a second cake was brought in by Pat's relatives, so there was plenty to go around. The hospital kitchen had put on a spread and guests also brought party food.

Diversional Therapist, Sue Gunn, organised the party and as the lounge filled with guests, kept the youngest entertained making animals out of balloons.



Above: Pat Delaney (Left) Margaret Ginders and Len Woods at the double celebration.

Pat Delaney was born near Motueka and spent much of his life farming. In the early years he grew tobacco when it was still a legal crop to grow to sell. He married Margaret Ginders many years ago (second wife after being widowed) and until seven months ago, the two lived in Hawarden. Pat became a long term patient at the end of last year and loves singing old songs.

Len Woods was born in England and after surviving many mishaps during WWII, emigrated to New Zealand where he had a business as a French Polisher. He became a long term patient 12 months ago and although vision impaired, still enjoys his TV and is particularly fond of the hospital cat, Tigger.

Thanks to the North Canterbury News and Amanda Bowes for this article and photo.



The NZNO 10th National Gerontology Section Conference will be held for the first time in Christchurch this year!

The theme for this conference reflects on the past, the present and future ... Recognising achievements, overcoming challenges and implementing innovative new ideas to promote gerontology nursing successfully into the future with skill and compassion. The ageing population faces increasing clinical complexities and the conference programme contains a great mix of presentations inspiring delegates to meet the challenges with confidence.

Keynote speakers include

- » Dr Michal Boyd Gerontology Nurse Practitioner and a Senior Lecturer with the School of Nursing and the Department of Geriatric Medicine at the University of Auckland
- » Catherine Cook Senior Lecturer in the School of Nursing at Massey University
- » Trina Cox Social Worker Age Concern Canterbury

Further information and registration or email joanne@conferenceteam.co.nz

Moved workplaces? Update your details on the intranet phonebook

Have you moved recently to a new work location and no one can find you? Stop hiding and update your details on the intranet phonebook!

It's easy as one, two, three...here's how:

1. Go to CDHB phonebook on the intranet homepage under Workday Essentials.

SCOPE Up-To-Date

Workday Essentials

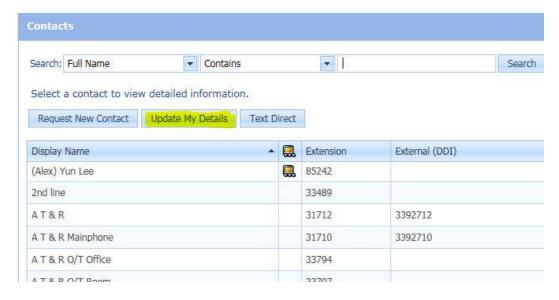
Essential information and applications regularly used by staff.

Car Parking Information (for staff)

CDHB Phonebook

CDHB Policies and Documentation

2. Select update my details.



3. Update your location, for example if you have recently moved to the new offices at 32 Oxford Terrace let's keep it consistent and use the following address: Corporate Office, 32 Oxford Terrace, Christchurch 8011.





New Zealand's meeting place for digital health

HiNZ Conference Programme - <u>view now</u>

HiNZ Conference - 31 October to 3 November 2016 - SKYCITY Auckland

Four concurrent conferences - register once and attend any session

200+ speakers - HiNZ & NZNIC (NZ Nursing Informatics Conference) programme released

SFT (Successes & Failures in Telehealth) and GT (Global Telehealth) programme will be released this week

Eight international keynotes

Register before 26 August to get the cheapest registration rates. One day, two day and three day passes available. HiNZ members get a \$300 discount on their conference registration.

View the registration options here.

Before registering you need agreement from your manager (as there are associated costs and other implications).

Call for clinicians' innovative health IT ideas (Media Release)

Health Minister Jonathan Coleman is calling on clinicians to submit innovative ideas on healthcare.

"Clinicians have an insider's view of where innovation can be applied to improve healthcare services," says Dr Coleman.

"Each year the Clinicians' Challenge encourages health professionals to find ways technology can solve problems they face in their day to day practice, as well as making a difference to the health of New Zealanders.

"Effective use of information and technology solutions can also enable patients to be more involved in their own healthcare, and can ensure clinicians have access to a fuller range of information, helping to improve patient care."

Last year's winner in the active project category, the oDocs Eye Care initiative, was a world-first innovation that can be used on a smartphone to diagnose people with sight-threatening conditions. It has now been successfully released commercially and makes basic ophthalmology services accessible and affordable to people living in remote areas.

This year's Clinicians' Challenge has two categories – for a new idea yet to be developed, and an innovative system or solution already in place that's having a positive impact on patient care.

The winner in each category will receive a grant of \$8,000. The results will be announced at the 2016 Health Informatics New Zealand (HiNZ) conference on 2 November.

The Clinicians' Challenge is a joint initiative by the Ministry of Health and HiNZ. Entries can be submitted at hinz.org.nz until 12 September 2016.

The challenge has two categories: New Idea or Active Project/ Development. Read the judging criteria and enter by 12 September!

Read more here.

<u>Enter</u> the 2016 Clinicians Challenge. Entries close 12 September 2016.

One minute with... Peter Mulligan, Internal Auditor, Risk & Assurance Group

What does your job involve?

I am one of a small team that provides an independent, objective, assurance and advisory service designed to support and improve Canterbury DHB's operations. We help CDHB accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, internal control, and governance processes. Much of my time is spent engaging with a wide cross-section of people within and also outside CDHB. This enables me to gain a variety of perspectives on how well processes and systems are working, how well connected they are and to identify options to enhance our organisational capabilities to ultimately deliver better services to patients and the community.

Why did you choose to work in this field?

I value roles that contribute to the greater good and those that promote practical use of professional standards in operational practice and governance. The Risk and Assurance field provided an opportunity for me to transition from a function-specific role in information technology audit and risk to a more holistic role at an enterprise level and apply my skills for the benefit of a broader audience.

What do you like about it?

The variety that each assignment presents. I don't enjoy repetitive tasks so I appreciate the flexibility the role provides and the opportunity to engage with a wider range of people and keep my thinking refreshed. I am also encouraged when results of our work are accepted by the business and translated into practical improvements in service delivery.

What are the challenging bits?

Gaining acceptance of contentious findings in a way that does not imply a failure by anyone, but rather presents a worthwhile suggestion to strengthen capability and make working more rewarding for all concerned. Eliciting responses from our busy clients to meet our reporting timeframes can sometimes be an issue.

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

I think to highlight one person or group would be unfair. I work with many admirable people at all levels of CDHB and its alliancing partners. I appreciate all those who display dedication and determination to do their best in their roles (often in challenging professional or personal circumstances) and those who willingly share their knowledge and wisdom to help others progress and achieve.

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?

First and foremost the importance of people and their needs.

Secondly that we all have something to contribute. Thirdly the importance of honesty, fairness and a willingness to continuously improve ways of working to ensure desired outcomes are achieved. The values also reinforce the audit profession's integrity, ethics and competency principles.

The last book I read was...

A Gift of Wings, by Richard Bach.

If I could be anywhere in the world right now it would be... In New Zealand or orbiting earth in the International Space

In New Zealand or orbiting earth in the International Space Station.

My ultimate Sunday would involve...

Relaxing amongst family and friends, preferably outdoors in good weather and concluding with evening dinner together.

One food I really dislike is...

Butter beans...I had them for years in university hostels and never want to see another one.

My favourite music is...

Not specific to any one genre but rather an eclectic mix, matched at any particular time to my circumstance and surroundings. I am young enough to enjoy rock, country, the blues, easy listening, dance and instrumental, old enough to appreciate classical but too old for hip-hop/rap and alternative music, although I do acknowledge the skills involved!



Above: Peter Mulligan

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

In brief

South Island Alliance newsletter

The latest issue of the South Island Alliance newsletter is available here.

In this issue:

- » The dementia education project
- » Health Connect South launched
- » The seamless SI Safety 1st team
- » A snapshot of our health workforce
- » New ACP resource released
- » Joining forces for healthy weight in childhood
- » The new restorative care guides
- » Staff profile: Kath Goodyear, Workforce Development Hub

PDRP New Assessor Training

We are holding a PDRP (Professional Development Recognition Programme) New Assessor Training session on 9 - 10 November 2016.

This is a two day course which is facilitated by the Open Polytechnic. We are now calling for nominations for new assessors for PDRP.

New assessors need to be nominated by their peers and supported by their Line Managers. For information on becoming a new assessor and supporting forms to complete, please refer to our PDRP Intranet site.

We look forward to receiving nominations from interested parties.

Alzheimers Canterbury Community Education Seminar - September 2016

Advance Care Planning presented by Jane Goodwin, Advance Care Planning Facilitator

Advance Care Planning (ACP) is a way to help you think about, talk about and share your thoughts and wishes for future health care and your last days of life.

Find out more about what ACP is, how it works and why it's a good idea to consider before you become seriously ill or are unable to make decisions for yourself. There will be time for questions.

Everyone welcome

Date: Tuesday 6 September 2016

Time: 10.30am - 12 noon

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

T 03 379 2590

Email - admin@alzcanty.co.nz

Website - www.alzcanty.co.nz

Making life better for all people affected by dementia

Kia piki te ora mo ngā tāngata mate pōrewarewa



St John Shuttle Bookings between Christchurch and Burwood Hospitals

From 1 August 2016 the process for booking the St John Shuttle for patient transportation has changed.

Bookings will now be made through the Shuttle Coordinator on the booking request forms which have been sent to the wards.

The booking request forms should be faxed to 80850, and should be faxed through as soon as the transfer date is known. Don't wait until the day of transfer to notify the coordinator.

Early notification will allow for a more efficient service and minimise disruption to patients and staff.

For patients transferring from Burwood to Christchurch Hospital for planned procedures or outpatient appointments, please fax the form as early as possible, as there are limited wheelchair spaces available.

Nurses, please note: your patients booked on the service must be ready to leave the wards with the orderly 20 minutes before the shuttle is due to depart.

At Christchurch Hospital, the Shuttle Coordinator will book the orderly.

At Burwood Hospital the ward staff book the orderly.

Any queries, please contact Sandra Lawrie, St John Shuttle Coordinator on 027 202 7715.



In brief



PDRP Resource Person Training

The next PDRP (Professional Development Recognition Programme) Resource Person training session will be held on 15 September 2016.

Becoming a Resource Person

PDRP Resource People are integral to the success of the PDRP and are valued highly. They form the backbone of the Professional Development and Recognition Programme and are located throughout the organisation. Their role is to be sources of information for nurses applying for the PDRP. PDRP Resource Staff are trained to answer questions relating to the programme, and to be available to applicants for portfolio coaching and/or recommendations.

PDRP Resource Staff are nominated by their Line Managers and will regularly attend education sessions and updates. They are not assessors.

A PDRP Resource Person will have completed the following:

- » Have successfully completed their own PDRP submission;
- » Received approval from their Nursing Line Manager to be a Resource Person; and
- » Signed up to attend a PDRP Resource Person training day.

If you are interested in attending this session, please contact the PDRP Office on (ext 68835) or email

Adriana. Humphries@cdhb.health.nz

















Department of Psychological Medicine, University of Otago, Christchurch & SMHS, Canterbury DHB Clinical Meeting

Tuesday 16 August 2016, 12:30 pm - 1:30 pm

Venue: Beaven Lecture Theatre, 7th Floor, School of Medicine Building

Title: "Navigating our World: sensorimotor function in Mental Health"

Abstract: Physiotherapists in Mental Health have long observed and treated movement disorders among people with Psychiatric conditions.

Recent assessment, observation and application of additional neurobiological techniques used in other non-psychiatric clinical areas has highlighted the prevalence of sensorimotor and involuntary movement dysfunctions among consumers in SMHS. Treatments using specific integrative techniques and strategies for these dysfunctions have resulted in positive outcomes for both physical and mental health.

Physiotherapy staff will be presenting case studies as well as some of the recent research in neuro-psycho-biology supporting these approaches.

Presenters: Ruth Troughton, Meris Brandram-Adams, Maree Stewart

Special notes:

- » These meetings will be held on a weekly basis (except during school holidays).
- » A light lunch will be served at the School of Medicine venue from 12 noon.
- » Psychiatrists can claim CME for attending these meetings.
- » The sessions will be broadcast to the following sites:
- » For PMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at PMH.
- » For Hillmorton attendees the venue is the Lincoln Lounge, Admin Building, Hillmorton Hospital
- » The dial in address is: Psych Med Grand Round. If you have difficulties dialling in please call 0800 835 363 to be connected.

University of Otago, Christchurch

HEALTH RESEARCH OPEN DAY

Explore the laboratories, Simulation Centre and Brain Research Institute

Meet our talented researchers and hear about the latest health research advances

Find out about postgraduate health research and study opportunities

Sunday 18 September | 1pm to 5pm University of Otago, Christchurch building 2 Riccarton Ave, on Christchurch Hospital campus

otago.ac.nz/chch-openday



