



Mental health remains top of mind - It's the all-important '+1' in our 5+1 key themes and priorities

Mental health is the '+1' of our five key themes and we're doing exceptionally well when it comes to reducing waiting times, while managing increased demand.

We are performing well above the Ministry's targets with around 96 percent of all adult referrals being seen within 21 days – (target is for 80 percent) and almost 100 percent are seen within 56 days – (target is 95 percent).

It's a remarkable achievement given the context of the increased demands and pressures on our services post-quakes. It reflects the hard work that's going into improving our models of care and collaboration across community services.

Staff have gone to extraordinary efforts to meet the unprecedented demands and impacts on their services as a result of the earthquakes. Despite everything staff have been through, there's a continued and determined focus to ensure that those who require mental health care have access to it.

I also need to acknowledge the increased support from primary care and the NGO sector who have made it possible for services to be sustained. From Brief Intervention Counselling to referral to other community providers or our specialist services, mental health is yet another example where we have needed the whole system to be working for the whole system to work.

The effort to put our community's wellbeing at the top of our priorities will continue, and we aren't forgetting about the little people either. Big changes are underway to improve the way we are working to ensure children and young people have access to the mental health care they need.

Since the quakes the demand on our mental health services has been phenomenal. For example, there has been an almost 70% increase in the number of referrals for young people to the Child and Adolescent Mental Health Service since the earthquakes. We had to be more responsive. The number of contacts for this age group has increased by 68%

in Canterbury compared to 5% in the rest of the country. The demand is ongoing and there seems to be little indication that it will diminish for the foreseeable future. Services have to keep adapting in order to be more accessible, flexible and responsive to the needs of the community.

Over the past six years demand has fluctuated between age groups, males and females, but one constant, and one of our biggest concerns is the impact of the quakes on a group of our community who have become known as the 'quake babies or children': children either born into, or growing up during a period of time when those caring for them are carrying a heavy load when it comes to additional pressure and stress. We know this has had a profound impact on the well-being of many of the youngest members of our community. Mental health teams have seen young people lacking developmental maturity, with high levels of fear and anxiety and with great difficulty coping with normal stresses of life .

Our mental health service works alongside the education sector, teachers and school communities to better equip and enable them to support children and their families who are struggling with their mental health and wellbeing. We are currently working with 109 schools throughout Canterbury.

We continue to work with others upstream to build the resilience of our community. While responding to mental disorders, we will continue to promote health. Mental health refers to the maintenance of successful mental activity. This includes maintaining productive daily activities, enjoying fulfilling relationships with others and maintaining the ability to adapt to change and cope with stresses and difficulties. There's no health without mental health.

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In March we released a final direction of change document for the CAF (Child Adolescent and Family) service, which reiterated the service's commitment to continue to collaborate with all relevant parts of the Canterbury health system, the Ministry of Education and the Ministry of Social Development in delivering and improving jointly-delivered services and programmes.

The changes were designed to complement and support the full range of services provided by the CAF service and are intended to ensure an integrated, flexible, accessible and efficient service delivered sooner and more conveniently to the young people of Canterbury and their families.

The service has undergone significant growth over the past 15 years, which accelerated after the quakes. In recent years, it has become apparent that the individual components of the service developed, somewhat independently of each other, needed to be drawn closer together to ensure smooth clinical and administrative processes and efficient utilisation of resources.

Functional integration of services, which deliver the best possible service for consumers and their family, whanau remains the priority for CAF services.

This is in line with Canterbury DHB priorities:

- » People take greater responsibility for their own health
- » People stay well in their own homes and communities
- » People receive timely and appropriate complex care.

The first stage of implementing the Direction of Change got under way in September, which has involved co-locating staff that are part to the integrated community teams into North (Hillmorton) and south (TPMH campus) locations.

I'm really impressed with the efforts from staff to ensure a seamless transition.

Change always brings challenges but I'm confident this new way of working will result in better care for the patients. Remember the patient is always at the centre of everything we do and we already know that this way of working does work. If we hadn't accelerated these changes in our adult mental

health services immediately post quakes, services would have imploded.

Meanwhile, the changes have come at a very appropriate time with [Mental Health Awareness Week](#) kicking off today.

The theme this year in NZ is: Naturally happy: connect with nature for good mental health & wellbeing.

International theme is: [Dignity in mental health: psychological and mental health first aid for all.](#)

This theme also incorporates the 5 ways of wellbeing – Connect, Give, Take Notice, Keep Learning and Be Active

Specialist Mental Health Services (SMHS) have a number of events planned for the week including a photography competition open to all SMHS patients and staff. There will be two prizes – one will be 'the people's choice' and the second will be judged by a panel.

In addition there will be scavenger and sensory walks, and there's a Non-Government Organisation Expo being held on the Hillmorton site on Wednesday 12 October. This is a chance to explore the services available in our community. The expo begins at midday in meeting rooms 1-4 of the Fergusson Building and will run through until 4:00pm. Consumers and all staff are invited to go along and learn more about the supports and services available in our community.



Planned industrial action by NZ Resident Doctors' Association members

The New Zealand Resident Doctors Association (NZRDA) have notified all DHBs of its planned 48 hour industrial action (total withdrawal of labour) from 7am on Tuesday October 18 to 7am on Thursday October 20.

This action will be significantly disruptive for both patients and staff.

The Canterbury Health System is currently working on contingency plans to minimise the impact of the strike. Those plans include gearing up to postpone elective surgery and outpatient appointments for the duration of the stoppage itself. It will also involve changing the mix of surgery in the days leading up to the planned strike, with fewer complex cases taking place. All surgery and outpatient appointments that have to be postponed will be rescheduled to the earliest available timeslot.

Urgent and emergency care will remain available during the planned industrial action, however, we will be looking to free up as much hospital capacity as possible during the period of the planned strike. Providing safe care remains our top priority.

Have a great week

David

David Meates
CEO Canterbury District Health Board

Facilities Fast Facts

Fast Facts - Burwood

Metro Buses are changing the timetable of the Orange Line bus service to better meet the needs of Burwood Hospital shift workers.

From Monday 17 October, the Orange Line timetable will be aligned with Burwood's shift start and finish times. The first bus of the day will arrive at Burwood Hospital at 6.34 am, and the last trip will depart at 11.13 pm.

The [new timetable](#) is available [here](#).



Fast Facts - Christchurch

Site works on the Acute Services building now include steel painting, installation of fire sprinklers, installation of trays to carry cables, and further concrete pours for the floors of the building.

The car parking and turning circle outside ED is currently being reconfigured, to allow work to take place around the generator building next to the ED steps (photo to right). Thank you for your patience with these works – the project team is working with hospital staff to minimise disruption as much as possible.

The photo below right shows progress on the land remediation next to the Avon River, with the generator building on the left.

On the St Asaph site, the old Sexual Health building is currently being demolished by a machine that dwarfs the building itself (photo bottom right).



Fast Facts - Outpatients

Piling work is continuing on the Outpatients site. Excavation work is about to begin – an estimated 3000 cubic metres of earth will be removed to make way for the foundations of the Outpatients building.



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Fast Facts - Ashburton

What's been happening:

October 2016

- » Canterbury DHB CEO David Meates was on site on October 4, meeting with leadership and touring the facility, old and new.
- » Site works on the new build are progressing well with top soil in the landscaped areas and the kerb and channel in place, with asphalt to follow soon.
- » The fit out of electrical and data wiring is proceeding well and the IT system will be live as of the 20th of October. This will enable other systems to be connected. Good progress is also being made towards cardiac telemetry and security connections.
- » Next week, the installation of the nurse call system will continue, surgical lights will be installed, the medical gases will be commissioned and medical pendants will be fitted.



New shared electronic body measurement record

Key body measurements can now be stored in a single electronic record accessible via Health Connect South.

Anthropometrics (or eGrowth Charts) is a one-stop-shop for key body measurements at all ages from birth to death. It records height, weight, and waist and head circumference measurements, calculates BMI and can also store blood pressure readings. Key features include:

- » eGrowth charts for children
- » easy tracking of weight and BMI for adults
- » adjustment for gestational age
- » height prediction (if parents' heights are provided)
- » z score (standard deviations away from the mean) for height, weight and BMI.

Graphs are plotted against World Health Organization (WHO) Child Growth Standards (<http://www.who.int/childgrowth/en/>).

Anthropometrics was launched in Health Connect South on 30 June. It was developed by Southern DHB and implemented across the region via Health Connect South by the South Island Alliance.

Background

Growth is a fundamental measure of health and wellbeing, especially for children. Serial measurement of weight, height

and head circumference, plotted against relevant ideal growth standards, provides valuable information to assess growth. It can also signal serious health conditions.

The South Island Child Health Service Level Alliance recognised that a South Island-wide electronic body measurement record would improve access to growth records for children moving between DHBs and in secondary care settings.

Southern DHB had begun development of a solution for the management of people with obesity. This solution has been further developed and rolled out across the South Island as Anthropometrics (or eGrowth Charts) via Health Connect South.

For more information, contact South Island Child Health Service Level Alliance Facilitator Jane Haughey on 027 512 6122 or jane.haughey@siapo.health.nz

Training and support

An instruction sheet for using Anthropometrics is available via the Health Connect South help page.

User support is available via your Service Desk using the usual request process.





Bouquets

Park and Ride shuttle drivers and on-site security

This is a huge compliment to your shuttle driver for Park and Ride. Also for the security man on site. On Tues 4 Oct at approx 11am we arrived at the car park site. Having never used it before I didn't know I couldn't use notes and only had \$20. The security man very kindly gave me change and took my car registration details and said that should be fine. After unloading two boys, one in plaster with a broken ankle and a three month old baby we went to get the shuttle. I had a push chair, bag containing everything but the kitchen sink and a walking frame. The driver was fantastic, helped with everything including helping my son on board and nothing was too much trouble (including my screaming bubs). We also had her on the way back and again the service was exceptional. I can't thank her enough for her help, all done with a smile and no fuss. She is a credit to you and I wished to pass on my sincere thanks and tell you what a wonderful service this is.

Neonatal Intensive Care Unit

My son used to be one of your patients in the NICU unit. He was born at 26 weeks and 3 days at Christchurch Women's Hospital. We are from Australia and my partner and I came to Christchurch ...I happened to give birth [while in Christchurch]. We are now back in Australia and my son is now 18 months years and he's now walking and talking and very active! Just wanted to let you know how much we appreciate

everything that the nurses and doctors in the NICU unit did for my son. He's such a smart little man, with a caring and loving personality. My husband and I will forever be grateful for all the hard work of the NICU unit team. Especially to our favourite nurse Alice and many more. Just forgot a lot of names and doctor Mercedes...but we do remember all your faces! May God bless you all and all the hard work you put into saving tiny babies lives.

Hospital staff

As I reflect on my mother's death I write to acknowledge and thank a wide range of hospital personnel who assisted in the small hours of 14 September 2016 which comprised the last eight hours of her life. This includes:

- » The rest home
- » The ambulance service
- » Intensive care nurse/team
- » Surgical team
- » Ward sister and nurse
- » Cleaner
- » The 'sitter'
- » Porters/mortuary

I mention the cleaner who suggested I could have a rest in the day room and a kind lady who stayed with Mum while I had some time out. I was impressed how each person played such a positive role ranging from diagnosis to palliative care. At my request the porters facilitated a viewing and short service on site when the family could also be in attendance

and prior to my mother's transfer to a funeral company. I think my mother (and myself) received the best possible care. With my thanks.

Urology Department

I would like to express my appreciation to all the staff in this department who assisted my operation for cancer of the bladder. The efficiency of this unit and the staff during my initial interview, the operation and after care was exemplary. I send this positive feedback in gratitude for the sensitive care shown by the staff.

Interventional Radiology

Thank you to Cleo RN and his team in interventional radiology who kindly placed a PICC over the weekend.

Sparing our frail elderly man a temporary central line.

The IR team was in doing a nephrostomy insertion and kindly agreed to follow on with the PICC.

The family, patient and ICU team appreciated this immensely.

Ceremony marks ground breaking health research and education initiative

It was gold spades at the ready on Thursday last week for the symbolic start to an innovate future in health care collaboration in Canterbury.

All the partners connected to the new Health Research Education Facility (HREF) participated in a ground breaking ceremony ahead of construction of the new building on the corner of Tuam and St Asaph st (opposite the Christchurch Outpatients building)

CDHB and Ara will be joint tenants in the building, which is being built by Huadu International construction and NewUrban Group – a Chinese/Canterbury business partnership led by former Christchurch Mayor Sir Bob Parker. Guests of honour at the ceremony included Prime Minister John Key and a delegation from China representing the Huadu International.

The HREF is the first private sector building to be constructed in the Health Precinct and will incorporate state-of-the-art, purpose-built facilities designed to house health education, professional development and research activities. The

seven storey building will provide the partner organisations – Canterbury District Health Board, Ara Institute of Canterbury and University of Canterbury – opportunities for collaboration and innovation.

“The trends are indisputable,” says Canterbury DHB CEO David Meates. “We have an ageing population and ageing workforce and we need to find innovative ways to address these issues. Collaborative efforts can lead to novel approaches to processes that will help meet these challenges.”

Mr Meates says the HREF will be a huge asset in terms of building our future workforce. “It’s fantastic to see this project underway. I’m confident it will grow to become Canterbury’s centre of health innovation, research and education, with all the key players in one location, close to the Christchurch Hospital campus, and as a cornerstone facility in the Health Precinct.”



(From Left) Ara Council Chair, Jenn Bestwick, CDHB CEO, David Meates, CDHB Chair Murray Cleverley, Rt Hon John Key Prime Minister, Mr Wang Jianping, Huadu International, and Sir Bob Parker of NewUrban Group participate in a ground breaking ceremony to mark the start of construction of the HREF building.

Advance Care Planning Forum

The inaugural advance care planning national forum is being held in Auckland at the end of November. It will be a fascinating and informative day, and we encourage you to attend.

Advance care planning helps people understand what the future might hold and to say what treatment they would and would not want. With an advance care plan, individuals, their families/whānau and health care teams can plan for future and end-of-life care.

There are two separate events over the two days.

Sector forum

The one-and-a-half-day sector forum on 28 and 29 November is for health professionals, consumer advocates and others involved in and promoting advance care planning, or who would like to know more. It explores advance care planning from a number of angles, including how to start the conversation.

The forum includes a plenary address from Will Cairns, who will talk about the history of death and dying through the ages. Will is the state-wide clinical lead for end-of-life care for Queensland.

Forum attendees will also hear stories from consumers, discussions about missed opportunities for advance care planning and how the end of life is approached in different cultures.

Other sessions will cover:

- » acute care and the impact of positivity at the end of life
- » the role of nursing in advance care planning
- » advance care planning and palliative care.

Consumers contribute throughout the programme, sharing their experiences and offering suggestions on how to approach and improve advance care planning in New Zealand.

Public forum

On the evening of the first day, a public forum will be held, from 5pm to 7.30pm on 28 November. The public forum has two parts. The first part is a social hour, with opportunities to take part in advance care planning-related activities. The second part, from 6pm to 7.30pm features presentations from advance care planning experts Will Cairns and Dr Barry Snow.

To register for either event go to www.acpforum2016.com. Both events are sponsored by the Advance Care Planning Cooperative and the Health Quality & Safety Commission, and are run on a non-profit basis.



WHAT MATTERS TO YOU? Advance Care Planning

PUBLIC FORUM: Monday 28 November 2016, Ellerslie Event Centre, Auckland

Even if you are fighting fit, it is never too early to make an advance care plan.

An advance care plan describes what is important to you when you are ill or dying. Having a plan is particularly important if you become too unwell to tell your loved ones and health care team what you want yourself.

At the forum you will learn more about making an advance care plan and go away with all you need to make your own plan.

MC: Actor and comedian **Mark Hadlow**.

Speakers: Will Cairns, statewide clinical lead for care at the end of life, Queensland, Australia.

Dr Barry Snow, director of adult medical services, Auckland District Health Board and Advance Care Planning Cooperative clinical lead.

Ellerslie Event Centre, Level 3, Ellerslie Stand, Guineas Room, 80 Ascot Ave, Auckland.

5.00 – 6.00pm: Social hour; opportunities to take part in advance care planning-related events.

6.00 – 7.30pm: Learn more about advance care planning from our speakers.

Cost: \$23 per person. Includes a soft drink. Other food and drinks available for purchase.

REGISTER NOW: To register go to www.acpforum2016.com and select 'Evening Function Only'.

Advance care planning – let's get talking!



our voice
tō tātou reo | Advance
Care
Planning

Big move for Pegasus, CCN and CCPG staff

Big move for Pegasus, CCN and CCPG staff

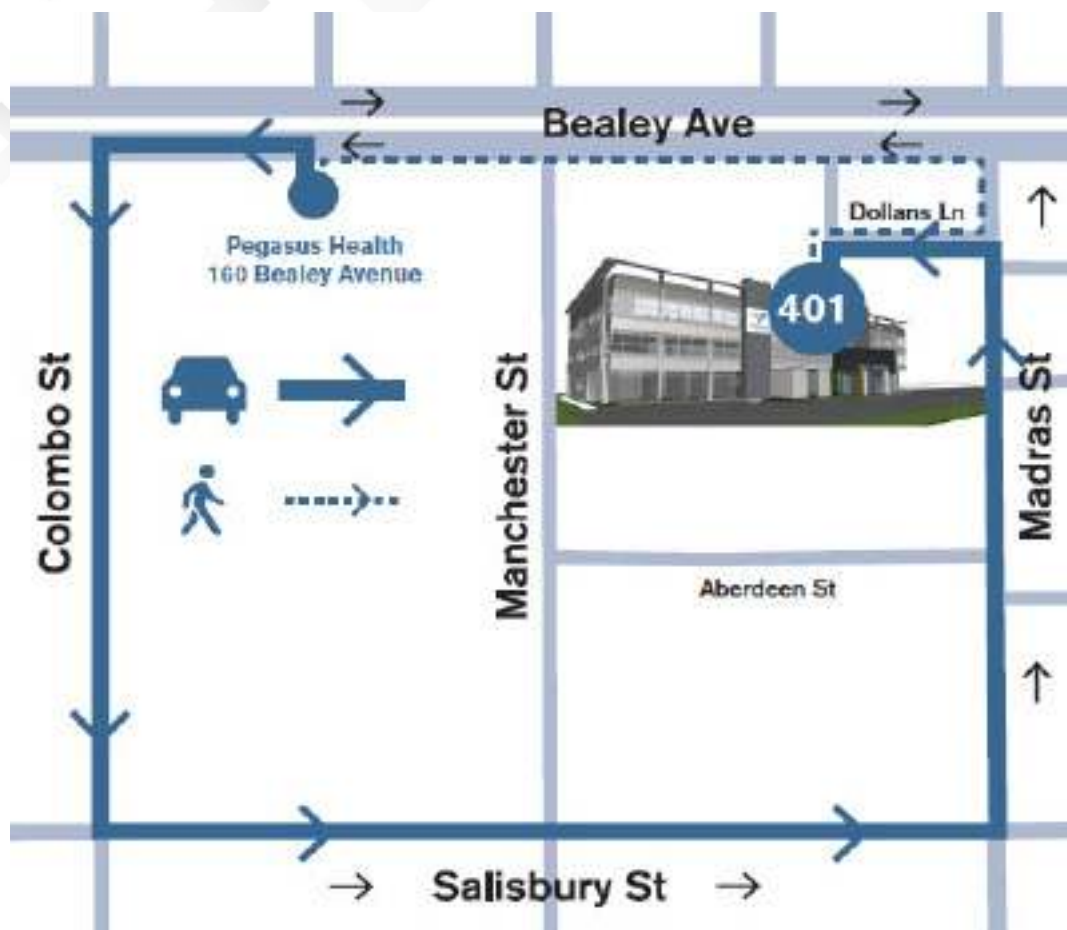
From 14 October staff located at 160 Bealey Avenue will move to a new location, Pegasus House.

The move will take place over two weeks from Monday 14 October so if you are visiting Pegasus, Canterbury Clinical Network or Canterbury Community Pharmacy Group staff who are normally at 160 Bealey Avenue it would pay to check where they are until the move is completed.

The new location is Pegasus House, 401 Madras Street, Christchurch 8013. The main entrance is off Dollans Lane – see map below.

Please note that only the physical location changes, PO Box and phone numbers remain the same.

More information can be found at www.pegasus.health.nz



Canterbury Community Pharmacy Group

Excellent outcome a credit to Radiology team

The CDHB Radiology Service underwent its International Accreditation of New Zealand (IANZ) review on 12-14 September.

The audit covered Christchurch, Burwood, Christchurch Women's and Ashburton hospitals where both hospital and community patient referrals are received.

The IANZ team recognised that the service has been through a considerable amount of change. The expanded services at Burwood opened in June, Canterbury Community Radiology was closed, The Princess Margaret Hospital's imaging support was reconfigured, bone densitometry was added to the scope of imaging and extra high tech imaging equipment was acquired to meet the growing needs of the Canterbury population.

Lead Assessor, Craig Watson, said when so many important developments are occurring in a short time frame quality often takes a back seat.

"However the assessment team overwhelmingly agreed over the three days of the comprehensive assessment that a high level of quality had been maintained to the credit of the entire Radiology Team."

He noted that the major developments appeared to be driven by quality rather than "dragging quality along with it".

The service was commended for using data, capacity monitoring and 'bottom up' thinking to plan bookings and meet demand.

"Canterbury DHB has without a doubt worked through a challenging six years and the Radiology Service is no different," he said.

Technical Experts in attendance over the three days noted the high level of communication and empowerment of all staff to lead projects as key drivers in the DHB's positive assessment.

This was the 11th IANZ review for the service and only the second time the service has not received any corrective action requests (A CAR is a mandatory issue to be addressed). There were a total of 19 recommendations and strong recommendations given and team leaders have already been working towards addressing these recommendations.

Operations Manager, Felicity Woodham, says given the past year with the move into the expanded radiology service at Burwood Hospital, detailed planning for ASB and hosting of the South Island Regional Radiology Systems, this is quite an achievement.

Canterbury Grand Round

Friday, 14 October 2016 – 12.15pm to 1.15pm with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker: Peter Whitcombe, Director, Children's Team and Shane Whitfield, Workforce Lead

"Supporting vulnerable children to thrive, achieve and belong"

Supporting vulnerable children is everybody's responsibility - working together makes it easier, and achieves better outcomes for children. Learn how the Children's Team approach helps children, young people and their families, access the right services at the right time.

Chair: Rick Acland

Video Conference set up in:

- » Burwood Meeting Rooms 2.3a and 2.3b
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton
- » The Princess Margaret Hospital, Riley Lounge
- » Pegasus, 160 Bealey Ave, Not available this week

All staff and students welcome

These talks will be uploaded to the [intranet](#) within approximately two weeks.

Next Grand Round is Friday 21 October 2016.

Convener: Dr R L Spearing

Email: ruth.spearing@cdhb.health.nz

Gene Ruiz takes her next step at UCG



Any misconception about the level of skill and expertise required for aged residential care nursing quickly dissipates after only a few moments chatting with Gene. It's evident that the 10 years working for the Ultimate Care Group (UCG) hasn't jaded her. She is excited to share both her team's past successes as well as the many new initiatives they've been introducing. It is this infectious passion that has made her a role model for many aspiring, young nurses within the company.

Originating from the Philippines, Gene started her New Zealand aged residential care career in 2006. Although she initially thought that aged care would just be a stepping stone, she quickly developed a passion for the specialty.

Gene's father would often tell her to "bloom where you're planted", and this is a phrase that has stuck.

She says that a pinnacle moment in her career was when she was promoted to the Unit Coordinator (which later became the Clinical Services Manager). With a great group of people already working in the team, she could see endless possibilities to develop the systems and processes at the facility.

Her first project was an overhaul of the clinical filing system. Without a robust archiving process, the files were a point of frustration for the team. She had an idea for a more effective system, and was supported by UCG management to give it a go. The project was a huge success and Gene was hooked!

Gene notes that many of the team she worked with in 2007 are still employed by the facility today. She puts this impressive retention rate down to a strong sense of family at Bishop Selwyn. The leadership team have also worked hard to foster a creative environment; with brainstorming sessions at almost every handover.

Every member of the team is invited to contribute ideas in these sessions, and there is a strong belief that there is "no such thing as a silly idea". It's this culture at Bishop Selwyn that has led to numerous ingenious initiatives from team members in both clinical and non-clinical roles. The biggest payoff being the ongoing high quality of care received by the residents of Bishop Selwyn.

Gene fondly remembers an occasion where as a team they came up with a solution for one resident's mystery bruises. They had tried multiple approaches to preventing the bruises, but realised that until they worked out the cause, the bruises were going to keep appearing. One day a caregiver observed the resident walk down the hallway and noticed they were repeatedly knocking their shins against the metal bar of their gutter frame. With the help of the laundry manager (who sourced a strip of foam) they trialled taping foam to the frame to act as a buffer. The initiative worked, and within a couple of weeks the bruised shins had started to heal! Gene encouraged the caregiver to turn their idea in to a quality initiative which was then successfully rolled out across the entire facility.

Gene is a huge advocate for professional development and is often heard encouraging her team to aim high in their career aspirations. She embodies this in her own practice, recently achieving her Expert level in the CDHB professional development programme.

When asked about her experience of the PDRP programme, Gene was quick to point out that it is not a path for the fainthearted! To reach expert level takes more than just gaining knowledge, but requires the registered nurse to contribute the knowledge back to their practice and to the nursing profession. An experience she has found hugely rewarding.

A highlight of the programme was Gene's invitation to participate in 2013 CDHB Gerontology Programme. She was able to complete placements in both the acute and the older person's health setting, a challenging but valuable experience. After realising that she could hold her own as an RN outside of the facility, she gained a new appreciation for the skills she had developed through her years working at Bishop Selwyn.

Gene's tireless effort have been recognised by the Ultimate Care Group with a recent promotion to UCG Clinical Coach. She commenced in her new role on Monday 3 October, and says she is excited to take on the bigger challenges it will bring. As Clinical Coach she will be focusing on the orientation of new Clinical Services Managers and developing a teaching centre on-site at Bishop Selwyn.

She is succeeded as Clinical Services Manager by Michelle Bugayong, as well as Maechie Panuntan, who is taking on the role of RN Team Leader (both pictured below).



Above: Left - Right, Michelle Bugayong, Gene Ruiz and Maechie Panuntan.

Updated Carer's Guide released on International Day of Older Persons

Seniors Minister Maggie Barry has marked the UN's International Day of Older Persons with the release of a newly updated Guide for Carers – He Aratohu mā ngā Kaitiaki.

"The theme of this year's International Day is taking a stand against ageism, something all New Zealanders can do by recognising the important role seniors have in our society and treating them with the respect and dignity they deserve," Ms Barry says.

"Our seniors contribute in so many different ways to their communities, as parents, grandparents, friends, employees, employers, campaigners, artists, volunteers, and, very importantly, as carers.

"Many seniors are unpaid carers who give up their time to help other people live with dignity. It is vital for their own wellbeing they are able to get the support they need to look after themselves and the people who rely on them."

Guide for Carers – He Aratohu mā ngā Kaitiaki has been developed by Carers NZ and many government agencies. First published in 2009, it was last updated in 2013.

"It is an invaluable source of information on the government-funded services and support available for carers of all ages with a range of practical tips, including how to schedule regular breaks, organise relief care, develop a plan for emergencies and connect with other carers."

The new Guide is available for free on the Ministry of Social Development website: www.msd.govt.nz/what-we-can-do/community/carers/ and in hard copy from Work & Income, Citizen's Advice Bureau and Grey Power offices.

For more information on International Day of Older Persons visit www.un.org/en/events/olderpersonsday/

Scheme provides lunches for needy children



The Gastroenterology Department is supporting the "Fill Their Lunchbox" scheme where you buy a delicious lunch which is delivered to Christchurch Hospital and the "makers" then donate a lunch 1 for 1 to low decile schools in Christchurch.

So far the scheme has donated over 11,500 lunches.

If other departments wish to do the same thing the Gastro department reports that it's very simple to organise.

Nurse Susan Smith has been in charge and says the department is having its third delivery tomorrow - usually around 15-20 lunches.

[See the flyer for more details.](#)



Fill Their Lunchbox – Help Alleviate New Zealand Child Poverty

Our dream is to fuel disadvantaged children and to provide them with an equal opportunity to learn, to succeed, and to break the poverty cycle.

FILLTHEIRLUNCHBOX.CO.NZ



New figures indicate 262,248 school-aged children in New Zealand will be overweight by 2025

- » If current trends continue 262,248 school-aged children in New Zealand will be overweight or obese by 2025.
- » Tuesday 11 October is World Obesity Day and this year's focus is on childhood obesity.
- » 11 October also marks the first day of the South Island's Triple P Health Lifestyle Group training, a Positive Parenting Programme used worldwide.
- » Since the launch of a regional eGrowth Chart in June, key body measurements of over 6000 children have been entered and can now be tracked and plotted against international standards.

New figures from the South Island Alliance of district health boards (DHBs) and the World Obesity Federation suggest that if current trends continue, 262,248 school-aged children (age 5.0 to 17.9 years) in New Zealand will be overweight by 2025. This is an increase of over 40,000 from 2010. In addition, 4001 will have Type 2 diabetes, 27,093 will have hypertension and 37,500 will have fatty liver disease.

Tuesday 11 October is World Obesity Day and this year's focus is on childhood obesity, in support of the WHO Commission's report on Ending Childhood Obesity and our government's recently launched childhood obesity plan and health target, which came into effect on 1 July.

Healthy childhood weight in the South Island

In the South Island, the five DHBs have agreed on a regional approach to address healthy weight in childhood.

Chair of the South Island Clinical Advisory Group for Childhood Healthy Weight, Professor Barry Taylor, says consistent messages are important. "We have agreed on a common set of key resources so the same messages are delivered consistently across the region, and we are improving the delivery of weight management and treatment services to ensure access for every child who needs them."

Under the South Island plan, GPs across the region will be provided with a suite of referral options for children identified as overweight or obese at the B4 School Checks. Among these, for selected cases, will be Triple P Healthy Lifestyles Group, a cost-effective, evidence-based parenting course that focuses on behavioural change, nutrition and physical activity advice for the whole family.

Coinciding with World Obesity Day, 11 October marks the start of Triple P Healthy Lifestyles Group training in the South Island. Twelve people in the South Island will be trained to deliver the Positive Parenting Programme, which has been used all over the world to improve behavioural issues in children and teens. This is the first time Triple P HLG has been used within a health context in New Zealand.

Each South Island DHB has also established a local implementation group to progress regional childhood healthy weight initiatives. One of which was the regional rollout of an eGrowth Chart that enables key body measurements to be tracked electronically and plotted against WHO child growth standards.

"A child's growth rate is a fundamental measure of health and wellbeing," explains Professor Taylor, "but it's no use looking at the data once, it has to be over a period of time. This tool keeps all the information in one place and allows us to make comparisons over time. There is less room for error and saves time – leaving more time for the patient."

To date, key body measurements of over 6000 children in the South Island have been entered.

World Obesity Day information

The second World Obesity Day will take place on 11 October 2016. It has been launched to stimulate and support practical actions that will help people achieve and maintain a healthy weight and will reverse the global obesity crisis.

Website: <http://www.obesityday.worldobesity.org>

Twitter: @worldobesity #WorldObesityDay

Thunderclap: <https://www.thunderclap.it/projects/45064-world-obesity-day>



Photo credit: World Obesity Federation



University of Otago
Research Radar
 Christchurch

Short tour of Māori historical sites near Christchurch Hospital

A Christchurch medical student has produced a digital guided tour of Māori historical sites surrounding the University of Otago, Christchurch and hospital campus.

Sophie McKellar did the 'iHikoi' project as part of the University's Summer Studentship Programme. The 10-week programme allows medical and tertiary science students to experience working as a researcher under the guidance of experienced scientists.

"The University of Otago, Christchurch campus and Christchurch Hospital are located in an area long occupied by Ngāi Tahu and the local sub-tribe Ngāi Tūāhuriri. The purpose of the guided walk was to provide an opportunity to explore historical sites and stories," Sophie says.

Working with the University's Māori /Indigenous Health Institute (MIHI), Sophie developed a detailed guide, map, and video showing the route and significant sites. Beginning at the University of Otago building at 2 Riccarton Ave, the tour (which takes less than an hour to walk) goes into Hagley Park North and the Botanical Gardens before crossing the Avon River at the Boat Shed and returning to the Christchurch Hospital site.

The tour guide discusses rongoa (traditional Māori medicine), the impact on Māori of the purchase of the land in mid-1800, and parallels with the Christchurch earthquakes.

Sophie says she hopes the iHikoi tour gives people a deeper understanding and respect for Ngāi Tahu and Ngāi Tūāhuriri as well as the significance of the environment they live and work in.

Tour brochure and route: <http://www.otago.ac.nz/christchurch/research/mihi/otago492601.html>



Left: Sophie McKellar



working with

Canterbury

District Health Board
 Te Poari Hauora o Waitaha

Christchurch Hospital's new MRI machine blessed and ready to go

Christchurch Hospital's new Magnetic Resonance Imaging machine is now up and running after its official blessing last Thursday.

The new MRI machine is a very welcome addition to Christchurch Hospital's existing hardworking 16 year old scanner.

The commissioning of this machine has taken a high level of detailed planning.

Peter Dooley, Charge Technologist of the MRI Department, who was intricately involved in this planning, says the preparation behind the MRI's delivery has been a major undertaking, involving a significant number of people and departments.

"We all look forward to the significant changes in capacity, which are about to unfold."



EMERGENCY DEPARTMENT

ED Open Day - peek behind the scenes at the Christchurch Hospital ED

On Wednesday 12 October the Emergency Department will be holding its 6th Annual Open Day.

If you work in Canterbury DHB and would like to know more about the Emergency Department, we welcome you to join us and we will show you what we do. You can take a short tour or perhaps work alongside one of our staff for a few hours.

We will have on display the architectural drawings of the new department in the Acute Services Building.

Departmental tours will run at 0900, 1100 and 1300—all you need to do is show your CDHB ID to the reception desk and ask for the Associate Clinical Nurse Manager. If you would like to work alongside a staff member please contact Carol le Beau (Clerical staff), Anne Esson (Nursing) and Scott Pearson (Medical) and we will arrange a time.

We look forward to seeing you then.

The ED team

For more information: Anne.Esson@cdhb.health.nz / Carol.LeBeau@cdhb.health.nz / Scott.Pearson@cdhb.health.nz

One minute with...**Therese Turek, Oncology Outpatient Coordinator**

What does your job involve?

In a nutshell I get to greet and welcome patients when they come into the Outpatients department and queue them into the clinics, directing them to the right place. I am also responsible for booking their follow up appointments, which while it may sound easy, can often turn into a bit of a juggling act, trying to fit them into already overflowing clinics.

I work closely with the clinic and day ward nurses and the doctors and try to troubleshoot where I can to ensure the clinics run smoothly and our patients are in the right place at the right time.

Why did you choose to work in this field?

I especially chose to work in Outpatients as I love working with and for people and I wanted to make a difference. What better way than to be the first point of contact with people coming to our clinic, people who are vulnerable and need a friendly face.

What do you like about it?

I love the people! The patients are so inspiring and I love that I can make a difference and have a positive impact on them when they are at their most vulnerable and I can also share in their joys as well. For me it is a great privilege to be able to help them and be part of their journey, whatever the outcome. I also love working as part of such a caring team of such diverse people from all sides, be they in administration or medical.

What are the challenging bits?

The challenge for me is keeping up with the workload! There seems to be more and more patients coming into the department – unfortunately – and that means a lot more bookings to be made. It can also be quite a challenge to fit people into clinics at times that suit both themselves and the doctors.

Who inspires you at work and why?

Our patients inspire me. I have so much admiration for them when they come into the clinic with a positive attitude and a smile on their face, especially when you know they must be struggling with the treatment regime.

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?

These are values I live by myself and I carry these through to my role here at CDHB. I want to make a positive difference to those I come into contact with each day, be they patients or colleagues.

The last book I enjoyed was...

On a long haul plane trip so I needed something to get my teeth into - The Girl in the Spider's Web.

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

Tobago – the best beaches with the clearest bluest waters in the world.

My ultimate Sunday would involve...

Kicking back with a nice glass of wine and a selection of delicious continental cheeses.

One food I really like is...

Cheese! What else is there?

My favourite music is...

I like pretty much anything – you will find all from Natalie Imbruglia to Muse, Coldplay to Lily Allen, and Enya to Emma Sharplin in my collection.



Left: Therese Turek

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

Labs e-ordering – stakeholders wanted

Saxon Connor is seeking people who would like to talk to a Business analyst (BA) to describe their requirements for labs e-ordering.

This is a critical piece of work so he needs to hear from as many stakeholders as possible. If you have an interest in designing and contributing to a functional labs e-ordering system or have unique or specialised workflow for e ordering lab requests please make contact with Saxon by email so he can pass your name on.

He particularly wants to hear from people from Emergency Department, Intensive Care Unit anatomical path requestors (especially theatre or gastro), inpatient and outpatient teams, clinical nurse specialists etc. Also administration staff who need to deal with the result- what needs to be built into the orders engine to make your life easier?

Please email @ saxon.connor@cdhb.health.nz if you would be prepared to meet a BA and contribute to this critical piece of work

Get Ready Week

October 10-16 is Get Ready Week, this year's theme is Prepared Kids. We know that when kids are involved in preparing for emergencies and learning about natural hazards, they encourage their families to be more prepared and play a more active role in responding to and recovering from emergencies.

Get Ready Week is held every year to mark the International Day for Natural Disaster Reduction (13 October). It's a chance for all of us to make sure we are prepared for emergencies.

Take some time this week to be more prepared at home and at work:

- » Talk to your kids in an honest, but not scary, way about what might happen in an emergency, what you can do to keep safe, and what your plan is for if you can't get home. The more involved they are, the less scared they will be if an emergency does happen.
- » Make a list of the people who could help you and those who might need your help in an emergency, write their numbers down in case
- » Contact your school or daycare and find out what their emergency plans are. Where will they go if they are evacuated? Who will look after the kids until you get there? Give the school or day care a list of three people who can pick the kids up if you can't get there.
- » Make a list of supplies you might need at home and in your car – have a getaway bag for everyone, with warm clothes, snack food, water, ID, radio, torch and batteries.
- » Visit www.happens.nz to work through an emergency plan with your family

There will be a display of information outside the Emergency Operations Centre on the ground floor of Christchurch Hospital all week, so come and have a look.

To find out more about Get Ready Week, visit civildefence.govt.nz or email David.Collins@cdhb.health.nz

Which story would you rather experience?

Story A

We had a plan – when the earthquake hit I carried out my 'Drop, Cover, Hold' procedure and stayed under my desk during all the shaking. Luckily I was holding onto one of the legs to stop it bouncing away as several of the heavy ceiling tiles fell and left a deep gouge in the desk top. Once the shaking stopped the boss ordered everyone to evacuate the building and meet out in the car park. While recovering our breath and calming down I fired off a quick text message home, "All @ work safe, outside in carpark". A couple of seconds later my wife replied "Safe @ hm with A. but S.in town. A picking up M." (In other words my son was in the city and my daughter had gone to the local school to pick up my neighbours child). I knew at this time my son would be making his way to meet me at work, so not to rush off. While waiting I sat in the car and listened to all the confused reports coming over the radio "Road collapsed at Fitzgerald", (OK avoid that).

"Flooding in Bexley" (wonder what it is like in my area). Once he made contact I was able to send a text to my Sister-in-law in Auckland to let her know we were all OK. After he turned up we started on the three hour drive home, a trip that took only 20 minutes normally. Luckily I had water and some snacks in the car to keep us going. We arrived to find the street was flooded by liquefaction, so had to walk the last bit, wading through the potentially contaminated water. One of the first things I did once home was to change out of my wet clothing and grab some wet-ones and wipe down my legs and feet then wash my hands with the hand sanitizer out of our emergency kit. Using some of our bottled water and a camping stove, a hot drink was the next order of the day – boiling up a bit of extra water so our neighbour could have a cup of tea too. Drinking out of paper cups saved on having to do any washing up. We played a few board games that evening by torch light before an early night, woken regularly by the aftershocks.

The next couple of days were spent eating pot-luck meals of whatever we could find in the fridge then freezer before they all spoilt, leaving our tinned food in the pantry for later. It was quite a party atmosphere as all our neighbours took turns to "host" everyone around their barbeque. Some of our neighbours had built quite fancy 'long-drop' toilets in their gardens but were commenting how cold it was going out there at night. We were still using our toilet in the house – simply by using the plastic tub that we'd purchased previously to fit inside the toilet bowl.

Luckily we never did have to evacuate, so our 'get-away' bags remained untouched.

Story B

We never bothered with a plan, it was always something on the 'To do' list. When the earthquake hit I ran out of the room and got hit on the head by one of the heavy ceiling tiles as it fell. Once the shaking stopped the boss ordered everyone to evacuate the building and meet out in the car park. While recovering our breath and calming down I tried to phone home, but the system was overloaded and the call never got through. I jumped into the car and started for home. The traffic up Fitzgerald Ave was stationary. After two hours travelling 1 km I found out why – the road had collapsed and I had to find another way. It took me another three hours to get home, and that after abandoning the car because the road was so badly flooded. I eventually got home, hungry, thirsty, and cold and wet through, only to find that there was no one there. Everyone had left – After two more worrying hours not knowing what was happening they eventually arrived home, on foot. They had gone back in to town to try and find my son, who, as it turned out had been 10 minutes' walk away from me at work. With no

» Article continues on page 17

» Article continued from page 16

power we had to eat cold baked beans straight out of the tin – which I had to open with a hammer and rusty knife because the electric tin-opener didn't work, washing it down with warm beer.

Fumbling around in the dark wasn't much fun either – the torch on my cell phone quickly drained the battery. That made it especially hard trying to dig a hole in the garden to go to the toilet in.

Because we were eating off dirty plates and cutlery, we all got quite sick over the next couple of days and that didn't help ease the situation at all. One of the aftershocks was so bad we decided to evacuate, and turned up at the Civil Defence Welfare Centre dressed in just our night clothing. One of the other evacuees came up and told me he was my neighbour, but I'd never spoken with him before.

How could you turn Story B into Story A? (check out www.happens.nz for ideas). Email your answers to David.Collins@cdhb.health.nz for a chance to win one of five 'What's the Plan, Stan' drink bottles.

Staff Wellbeing Programme: Wellbeing Workshops-October / November: Quit Smoking: Shiftwork and Sleep

Wellbeing Workshops – October and November dates

There are six more workshops for 2016.

- 1 Character Strengths Based Workshops (12 and 27 October and 1 November). Available to Managers / Supervisors. [Click here](#) for more information and [click here](#) to register. Participant comment ... "Thank you for the opportunity to attend. I really appreciate the focus on Wellbeing during this time of significant/constant change."
- 2 Staff Wellbeing Workshops (12 and 27 October and 1 November). This is the same workshop offered in 2014 / 2015. [Click here](#) for more information and [click here](#) to register, available to all staff. Participant comment ... "Thank you for providing the workshop. I enjoyed it very much, and found the research behind some of the arguments for self-care compelling."

Quit Smoking

Would you like to quit smoking? Call a Quit Coach who can help you. [Click here](#) to find out how to contact a Quit Coach who can help you.

Shiftwork and Sleep

Important things to know about Shiftwork and sleep. How can Shiftwork affect my sleep? If I do Shiftwork, am I more likely to be tired while I am awake? How long should a nap be? Where can I find out more? If you would like to know more [click here](#).

Visit the [Staff Wellbeing page](#) for more information.



Canterbury DHB Pressure Injury Survey

Canterbury DHB has on average 70 patients per month admitted with pre-existing pressure injuries, and 24 patients per month that acquire pressure injuries whilst being an inpatient in our facilities. There has been a lot of improvement in our systems and processes and we are now revisiting these to ensure that our current education and policy aligns with practice.

Corporate Quality & Safety and the Pressure Injury Group are running a survey. The purpose of this survey is to gather feedback about what is working well and where we can improve Pressure Injury detection, assessment and prevention.

This survey should only take five minutes to complete and is anonymous.

[Complete the survey.](#)

Recruitment

Booking Facilitator, Interpreter Services

Permanent/Part Time

As our city has become more multi-cultural the demand on the interpreter services at our hospitals has increased. We have an exciting opportunity for an experienced booking clerk/administrator to join the Customer Services Team at Christchurch Hospital.

In this role you will be responsible two days a week for maintaining the day to day requirements for an efficient and effective Interpreter Service for the provision of a patient and family focused Interpreter Service for Canterbury DHB Hospitals and Services. (Provides advice only for Ashburton Hospital). You will also provide high quality professional front desk reception service for the Interpreter Service.

It goes without saying that your customer services skills will shine through, as will your ability to organise and prioritise your workload. Your desire to help those around you and ability to think on your feet will also quickly see you succeed in this role.

Our ideal applicant will preferably be an experienced booking clerk/administrator/receptionist and have the ability to communicate effectively with a wide range of people across the organisation. Experience with a tertiary hospital environment would be an advantage. You will have excellent

keyboard skills and have sound knowledge of Microsoft Office, plus experience with database systems.

If you are a self-motivated individual looking for an administration role with a bit of a difference; and enjoy being part of a team, then this could be the role you have been looking for!

This role is working 16 hours a week, preferably Monday and Tuesday, with exact days and times to be negotiated at interview stage.

To find out more contact Tracey Gulbransen, Recruitment Specialist on (03) 337 7985 or tracey.gulbransen@cdhb.health.nz

Applications are only accepted online, so please press 'apply now'

Location: Christchurch

Closing Date: Monday, 17 October 2016

[Apply Now](#) >

Orange Line timetable changes to meet your needs

Metro is changing the timetable of the Orange Line bus service to better meet the needs of Burwood Hospital shift workers.

Following feedback from the Canterbury DHB, Metro has extended the bus route so that it travels onto the hospital campus at the Burwood Road entrance, and from Monday 17 October, the timetable will be aligned with shift start and finish times.



The first bus of the day will arrive at Burwood Hospital at 6.34am, while the last trip departs at 11.13pm. The changes will take effect on Monday 17 October.

Check out the new Orange Line [timetable here](#).

In brief

Ara Graduate Nursing Study Study in 2017

Applications for study starting in Semester 1 - 2017 are currently open. Please apply using the online application form.

Closing date for applications is Friday, 21 October 2016.

Unfortunately the 2017 timetable has not been released by Ara, but should be available next week.

[Timetable for Ara Graduate Nursing Study in 2017](#) (This is the 2016 timetable)

Applications for Semester 2 - 2017 will open in March 2017

Process:

All applications will be considered after the application deadline.

Applications are forwarded to CNMs to confirm support.

Confirmed applications are forwarded to the relevant Director of Nursing for final approval.

Postgraduate Nursing Study in 2017 - Closing date for Applications for HWNZ funding is 21 October 2016

Applications for HWNZ funding for postgraduate nursing study in 2017 will close on Friday 21 October. If you wish to apply please use the online application form: [Application form for HWNZ Funding - Postgraduate Nursing Education](#)

Further information regarding funding and eligibility is available on the Postgraduate Nursing Education website: [Postgraduate Nursing Education website](#)

Process: All applications will be considered after the closing date. Applications are forwarded to CNMs to confirm support.

Confirmed applications are forwarded to the relevant Director of Nursing for final approval.

Any queries should be directed to Jenny Gardner, Nurse Coordinator, PG Nursing Education on 68679 or jenny.gardner@cdhb.health.nz or to Margaret Bidois, Administrator, PG Nursing Education on 68680 or margaret.bidois@cdhb.health.nz

Designated Senior Nurse PDRP Workshop – 12 and 19 October 2016



Calling all Designated Senior Nurses (NE, CNS, CNM, Nurse Coordinators, NC, ND and DOMs). Are you interested in putting together a Designated Senior Nurse PDRP portfolio but not sure where to start?

If so there are two short Workshops being run on 12 and 19 October from 4-5pm on how to put together your portfolio from a Designated Senior Nurse perspective. Both Workshops will cover the same content.

Bring along your Position Description and a blank performance appraisal form with you.

The Workshop will cover:

- » What evidence is required in a Designated Senior Nurse portfolio;
- » The performance appraisal against the competencies in relation to a senior nurse role – which stream (Policy, Research, Education, Management); and
- » Position description in relationship to your competencies.

Please register your interest with Adriana Humphries Adriana.Humphries@cdhb.health.nz to ensure we have the appropriate sized venue.

Hope to see you there!

Office of the Children's Commissioner update Oct 2016

[In this issue:](#)

- » A message from the new Children's Commissioner
- » Priority areas for the Commissioner
- » Upholding children's rights at the UN
- » Why raising the YJ age matters

- » Join our live online presentation on being child-centred
- » New StatsOnKids page
- » OCC media bites
- » Our recent submissions

[Read here.](#)



In brief



SEXUAL HEALTH SEMINAR

THURSDAY 3 NOVEMBER 2016
FROM 1.00PM - 4.30PM

Community and Public Health
310 Manchester Street, Christchurch

1.00pm - 2.00pm WELCOME
Time to catch up with work we are currently involved in, to share information and new resources, and projects planned for this year.

2.00pm - 3.00pm GARDASIL 9 HPV VACCINE
PRESENTER: GLENYS STEVENSON, CANTEBURY IMMUNISATION
Gardasil 9 will be introduced in New Zealand from 1 January 2017, replacing the current Gardasil vaccine. It will be funded for both males and females up to age 26 years. Glenys will give an overview of HPV disease, introduce the new schedule and eligibility, and update on the new vaccine and how it differs from the existing one.

3.00 - 3.30pm AFTERNOON TEA

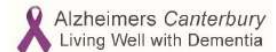
3.30 - 4.30pm SEXUAL HEALTH UPDATE
PRESENTER: DR EDWARD COUGHLIN, CLINICAL DIRECTOR, CHRISTCHURCH SEXUAL HEALTH CENTRE
Edward regularly attends national and international sexual health conferences and will give us an update on current issues in sexual health, including the introduction to New Zealand of PrEP medication to prevent HIV infection. This is planned to be rolled out in 2017. It is used for people who are at high risk of becoming infected with HIV.

4.30pm CLOSING

There is no cost for these seminars and afternoon tea will be provided.
Please let me know if you will be attending.

Diane Shannon, Health Promoter
Community and Public Health
(a division of Canterbury District Health Board)

P 03 378 6755
E diane.shannon@cdhb.health.nz



Community Education Seminar

October
(Morning)

Dementia caring and stress

Dementia can be emotionally, mentally and physically stressful for all concerned. Looking after yourself is very important.

Libby Gawith, Community Psychologist and Ara Institute of Canterbury lecturer, will talk about:

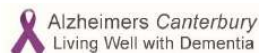
- How to recognise symptoms and sources of your stress
- Caring roles and stress
- Health effects of stress
- Strategies and techniques for managing your stress

There will be time for questions.

Everyone welcome!

Date Tuesday 11th October 2016
Time 10.30am – 12 midday
Venue Alzheimers Canterbury
314 Worcester Street, Linwood
(Between Fitzgerald Ave & Stanmore Rd)

Address: 314 Worcester Street Christchurch Postal Address: PO Box 32074 Christchurch 8147
Phone: 0800 444 776 Email: admin@alzcanly.co.nz



Community Education Seminar

October 2016
(Evening)

BEHAVIOURS AND DEMENTIA

Increase your understanding about why certain behaviours may occur when a person has dementia and helpful ways to respond

Sally McPherson, a nurse specialist from The Princess Margaret Hospital, will discuss behaviours associated with dementia that may challenge others, causes of these behaviours, and appropriate strategies for responding.

There will be time for questions.

Everyone welcome

Date: Wednesday 19 October
Time: 7.30pm – 9.00pm
Venue: Alzheimers Canterbury
314 Worcester Street
Linwood
(Between Fitzgerald Ave & Stanmore Rd)

Address: 314 Worcester Street Christchurch Postal Address: PO Box 32074 Christchurch 8147
Phone: 0800 444 776 Email: admin@alzcanly.co.nz

Restoring the Nurses' Memorial Chapel



Saturday 15th October
1pm - 4pm
Poppy Room
Christchurch RSA
74 Armagh Street, Central City

No on-site parking, but plenty of street parking and a Wilson car park next door. Disabled access.
Find out the hidden stories uncovered during the restoration of the Chapel and learn about the nurses whose deaths are attributed to their service during WW1 while undertaking humanitarian aid.



In brief

Department of Psychological Medicine University of Otago, Christchurch & SMHS, Canterbury District Health Board Clinical Meeting

Tuesday 11 October 2016
12:30 pm – 1:30 pm

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

Title: "Early Intervention in Bipolar Disorder".

Presenter: Professor Lars Vedel Kessing, University of Copenhagen, Faculty of Health and Medical Sciences, RANZCP travelling Professor for 2016

Chair: Professor Richard Porter

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 TPMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at TPMH.
 - » For Hillmorton attendees the venue is the Lincoln Lounge, Admin Building, Hillmorton Hospital
 - » For Burwood Hospital the venue is the Spinal Unit.
- » The dial in address is: Psych Med Grand Round.
- » If you have difficulties dialling in please call 0800 835 363 to be connected.

Maternity Quality and Safety Annual report available

The Maternity Quality and Safety (MQSP) Annual Report 2015/16 is available for viewing on the CDHB intranet and internet.

The report is published each year by Canterbury and West Coast DHBs and submitted to the Ministry of Health. It provides a comprehensive overview of our maternity service activity, clinical performance and quality initiatives undertaken during the year.

<http://www.cdhb.health.nz/Hospitals-Services/maternity-services/Pages/Maternity-Quality-and-Safety-Programme-Annual-Reports.aspx>

Vote NOW on poster submissions for the 2016 Quality Improvement and Innovation Awards

In 2015, for the first time we included a poster category in the Quality Improvement and Innovation Awards, giving the opportunity to recognise and celebrate a broad range of improvements. Some posters have been specifically designed while others have been presented at previous conferences.

Again this year we want you to vote for a People's Choice Award

The posters are displayed on the [Quality and Patient Safety intranet site](#).

To vote

- » Review the posters by clicking on each poster's link.
- » Once you have reviewed all the posters and made your choice click on the survey link below and enter your vote

Voting will close on 14 October 2016.

Vote now, by clicking on the following link surveymonkey.com/r/CDHBPosterAwardsPeopleChoice2016



New name for Christchurch Radiology Group

Christchurch Radiology Group is uniting with its five other regions across New Zealand and the Sunshine Coast and will be known as Pacific Radiology from October 2016.

The change affects all of CRG's branches: After Hours Radiology, Forté, Hagley Radiology, Moorhouse Radiology, Reflect, Riccarton Radiology, Southern Cross, St George's and Wigram.

All booking, radiologist and branch contact information remains the same.

If you have any questions, please feel free to contact Adrienne Hayes, Canterbury Operations Manager, on 03 3743 903.

CHRISTCHURCH PUBLIC LECTURE

2016 Carl Smith MEDAL LECTURE

PROFESSOR
RICHARD GEARRY

Department of Medicine | University of Otago, Christchurch
2016 Winner of the Rowheath Trust Award and Carl Smith Medal



Diet, digestion and disease – learning more about the effect of food on gut health

Monday 31 October at 7:00pm
Rolleston Lecture Theatre
2 Riccarton Avenue
University of Otago, Christchurch
Christchurch Hospital Campus



THE ROWHEATH TRUST AWARD AND CARL SMITH MEDAL IS AN INITIATIVE OF THE ADVANCEMENT CAMPAIGN

University of Otago, Christchurch

POSTGRADUATE



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FOR FURTHER INFORMATION, PLEASE CONTACT:

Programmes Manager
Department of Population Health
University of Otago, Christchurch
P O Box 4345, Christchurch 8140, NZ
Telephone: 64 3 364 3602
Email: publichealth.uoc@otago.ac.nz

Nurses undertaking a HWNZ funded Postgraduate Diploma in Nursing may be eligible to take some Public Health papers as part of that qualification, consult your programme advisor.

otago.ac.nz/publichealth