



Celebrating Mana Ake – one year on

Mana Ake, Stronger for tomorrow is the name of the programme designed in Canterbury to support the mental health and wellbeing of children aged five to 12. Last week I attended a celebration at the Design Lab to mark Mana Ake's first birthday.

I felt proud to be part of such a positive resource which is already making such a difference to children, their whānau, teachers and the wider community.

The first kaimahi (workers) started in 15 schools last April, and now Mana Ake is available in all 219 primary and intermediate schools in Canterbury. What makes Mana Ake different from any other resource available, is that it's been designed by the people using it. From the word go we've taken an inclusive co-design process from the ground up, which has included a wide range of people from across the health, education and social sectors. With the richness of so many voices and ideas coming together, Mana Ake has gone from strength to strength over the past year.

It works because it's tailored to meet the needs of children in our community – wherever they are at. It helps address concerns such as anxiety, emotional regulation, school avoidance, self-harm as well as intervening early to promote resilience and self esteem. Mana Ake works alongside teachers and helps free them up to focus on teaching, while wellbeing and other issues are worked on in a variety of ways. Depending on the situation there are a range of support options available ranging from one on one support with a child and their family, to group programmes and class activities.

Mana Ake kaimahi go into schools every day to help, support and build resilience for our school children, equipping them with skills which will help them for the rest of their lives.

One of the aspects of Mana Ake that helps to make it so accessible and user-friendly is the Leading Lights webtool



Health Minister, Hon. Dr David Clark and Minister for Greater Christchurch Regeneration, Hon. Dr Megan Woods at the Design Lab



David Meates speaking at the Mana Ake celebration

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which was developed to support the programme. It is a goldmine for teachers and anyone involved in supporting young people at our primary and intermediate schools. At present it maps out 68 pathways for common issues that have challenged the wellbeing of our young people. Pathways are developed with professionals from across health, education and social service providers locally, and are available to all schools in our region.

Leading Lights has been developed based on the experience of HealthPathways which has been such an important part of the Canterbury Health System. It links all the relevant support services available that can be utilised to support a young person and where to turn if more assistance is needed. Making it easy for everyone to get the information they need in a way that's useful helps make Mana Ake a sustainable and transferable initiative.

Leading Lights proved its worth after the 15 March terror attacks as a hub for information and resources teachers and kaimahi could use to help support children who had been impacted by the events. Mana Ake was originally established to meet the need after the earthquakes in Canterbury, however it's proved its worth as an accessible resource to support tamariki facing a range of challenges in their lives.

What struck me last week was the unanimous, and overwhelming positive feedback from everyone involved. The Minister of Greater Christchurch Regeneration, Dr Megan Woods, and the Minister of Health Dr David Clark were both in attendance, and spoke of the success of the programme. We were treated to entertainment from the talented Burnside Primary School Kapa Haka Group, and in addition to the wonderful speeches on the day, one of the most powerful things for me was hearing the

unfiltered feedback from so many of those involved with the programme.

I encourage you to take a look at [this video](#) which explains why Mana Ake is such a success and proving its worth. These authentic voices of people who are empowered to improve the lives of children and young people through Mana Ake speak volumes.

Further information is also available [here](#) in the Mana Ake year in review booklet.



Burnside Primary School Kapa Haka Group performs



Measles outbreak declared over – thanks to everyone who worked incredibly hard to manage this outbreak

Last week we were able to declare the Canterbury measles outbreak officially over. However, as Medical Officer of Health Dr Ramon Pink has reminded us all "that a case of measles is only ever a plane ride away".

There's a simple moral to this story, and that is to protect yourself and your family by having your measles immunisation if you haven't already done so. There's more information in [this statement](#) issued last week.

MMR (measles mumps and rubella) vaccination is free for those under 50 who haven't had two doses.

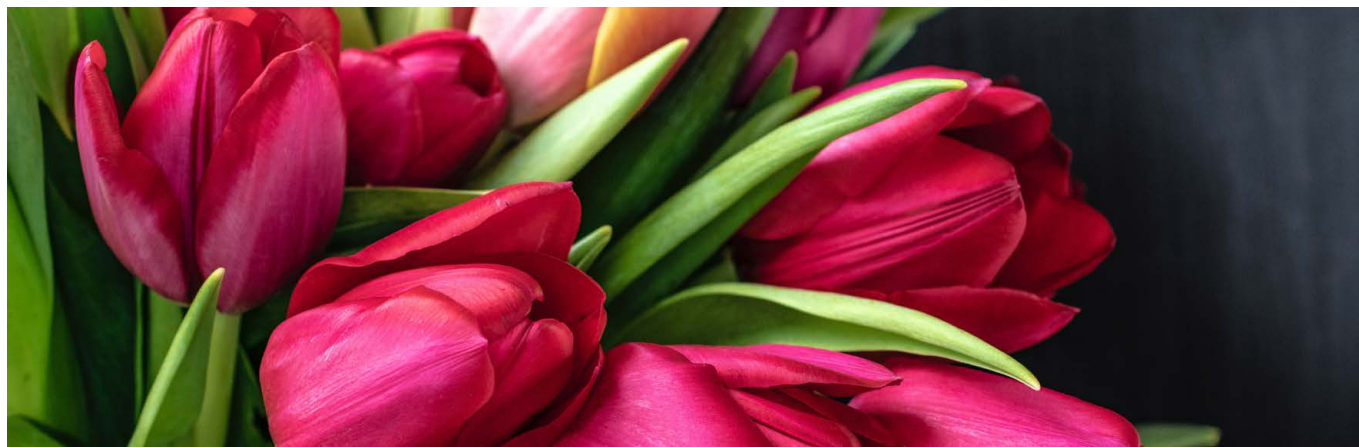
We are still encouraging people, especially children, teenagers and young adults who have never been vaccinated to get immunised. Those who have never been

vaccinated and those who have had one vaccine are also being encouraged to get a second dose.

If you're not sure whether you're protected from measles, check in with your family doctor/general practice team.

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

David Meates
CEO Canterbury District Health Board



Bouquets

Usha, Intravenous (IV) Technician, Ward 28, Christchurch Hospital

Usha the IV Technician on Ward 28 is amazing. I am usually very hard to get blood from or to put a line in. Usha was happy, fast, and almost painless. One in a million.

Emergency Department and Ward 20, Christchurch Hospital

Absolutely awesome nurses, both on the wards and throughout the hospital. Deserve to be recognised for their friendliness and work. Thank you all.

Ward 18, Christchurch Hospital

I was blown away by the level of care that was given to all the patients. Just wanted to say thank you. Big ups to all the team, Doug, Simon, Ruby, Rose, Reena and all the ones I can't remember by name. Thanks.

Bone Marrow Transplant Unit, Christchurch Hospital

We cannot fault the care we have received. Everyone is wonderful.

Emergency Department, Christchurch Hospital

Staff were wonderful, no complaints. Thank you.

Ward 27, Christchurch Hospital

Thank you for the care you gave our mother while she was on the ward recently. Much appreciated.

Ward 23, Christchurch Hospital

My wife was in your care... I delivered her a week ago to the front entrance with her 'Zero G' chair which she sleeps in. It gives her a great deal of independence, so it was important to her that it went in with her and was allowed on the ward. There was never a murmur of dissent for which I am extremely thankful. Everyone went above and beyond to make sure that it was there for her. I have nothing but praise for the staff on Ward 23 and I would wish that to be passed on to them. They were supportive, professional, available and above all caring, allowing my wife to make the best of what for her is normally a harrowing time. Thank you very much.

Ward 18, Christchurch Hospital

Excellent service and good people.

Dental Department, Outpatients, Christchurch Hospital

Fantastic dental service, well done.

Outpatients, Christchurch Hospital

I brought an elderly friend to Outpatients to see a doctor. This was our first visit and we were both delighted with the efficiency, generous spirit of the staff and the user-friendly manner in which the building was set out. We would like to say thank you kindly to all the staff and volunteers who aided us.

Emergency Department, Christchurch Hospital

I went into the Emergency Department and the service was absolutely awesome. From the receptionist, nurse and doctor. They always had a smile and were so friendly to approach. I had a few questions about pain relief. Dr Tobias James answered every one of my questions and put my mind at ease. No question felt like a stupid question with him. Top bloke.

Ward 24, Christchurch Hospital

A very big thank you to all the staff on Ward 24. I am very proud of our hospital staff for their professionalism, dedication and compassion to one another and especially their patients. A special thanks to Stroke Nurse Joe, first responder, for his care and attention. My wife and I are greatly appreciative of the care and information we received. Thank you all again.

Big Shout Out

Huge thanks to our Manawa colleagues, Cathy King and team, for their wonderful support and flexibility in supporting the Diabetes Endocrine clinical and administration teams during our time out of the Outpatients Building. Your generosity has been greatly appreciated.

From the Diabetes/
Endocrine Services Team.

#carestartshere



To our dear nursing colleagues in Canterbury

We send to you our best wishes for International Nurses Day 2019. We acknowledge the incredible challenges that you have faced on March 15 and ongoing since then providing emergency, acute and rehabilitative care to those harmed in the senseless attacks. We are incredibly proud of you as nurses for the work you did on this day and beyond. We think of you and celebrate the profession of nursing with you. You made us immensely proud.

Fondest regards,

Nurses from Southern DHB.

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

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

Canterbury DHB is proud to be supporting and taking an active involvement in this year's Techweek

The presence of technology continues to increase in many aspects of our lives and health is no different. Canterbury DHB is currently in a period of digital transformation, bringing to life technology and system solutions that support opportunities to improve the patient journey and enhance our clinical and operational effectiveness.

For details of what's on in Christchurch, and opportunities to hear Stella Ward our Chief Digital Officer speaking, check the [programme](#).





Let's get ready to move

Christchurch Hospital Hagley

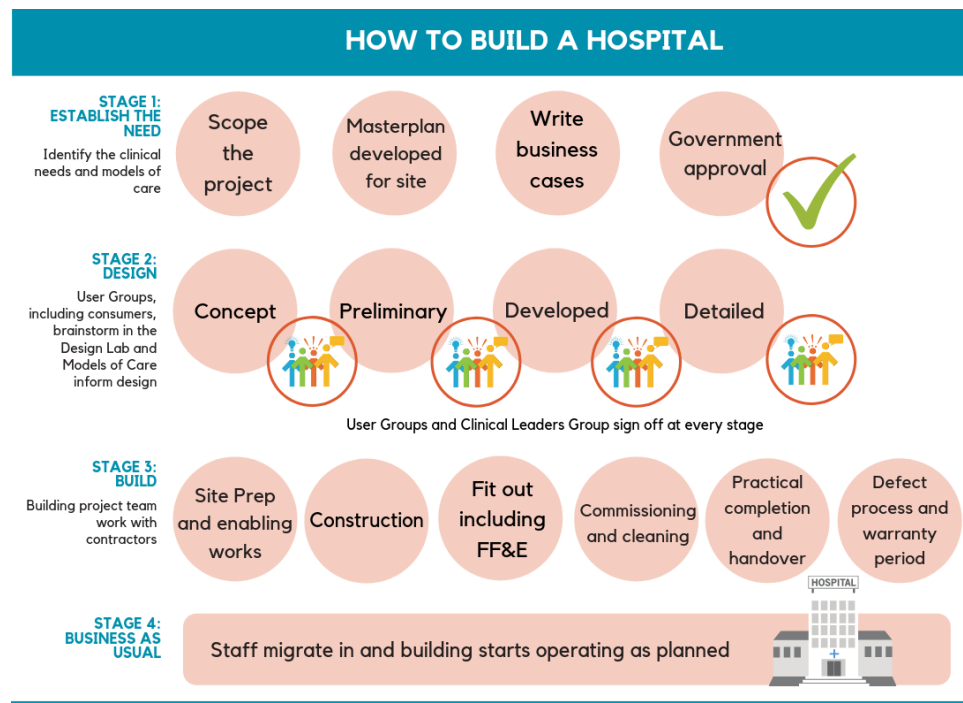
Update No: 4

**27 weeks
to go!**

With the excitement of moving into new facilities, it's sometimes easy to

forget it's taken several years to get to this point. The infographic right shows the different stages of the Christchurch Hospital Hagley project that began 10 years ago. We are currently in Stage 3 of the final construction phase and heading in the commissioning and cleaning, and installing fixtures and fit-out.

There is a [short video](#) on the intranet that explains the build process in more detail, includes information about the principles of the design, and is a good reminder about the huge amount of work that went into the design in the early stages of the process.



Meet the Team

This week we profile some more members of the Hagley Operational Transition team and find out what excites them about Christchurch Hospital Hagley.

Martin Duggan - Associate Clinical Nurse Manager

I am excited about the challenges and opportunities the Hagley building will bring (they have already begun). It is a real pleasure to be able to contribute to ensuring we transition smoothly and to try and provide the team with all they need to give the same standard of excellent care from day one.



Pip Francis - Clinical Manager Radiology

Radiology has outgrown its current space so it will be exciting to have more room and new equipment.



Maggie Meeks - Neonatal Paediatrician

I hope that this will enable my paediatric colleagues to continue to develop their new models of care and develop even closer links with our Intensive Care colleagues.

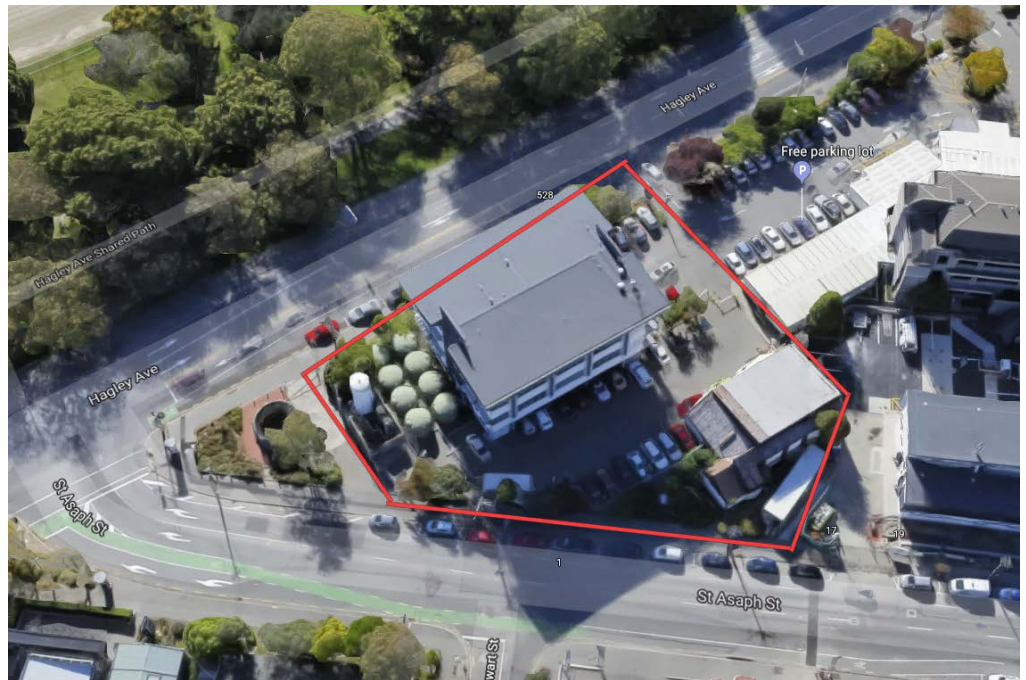


Stay in touch – you can do this through the [Facebook page](#) or email us at letsgetreadytomove@cdhb.health.nz

Facilities Fast Facts

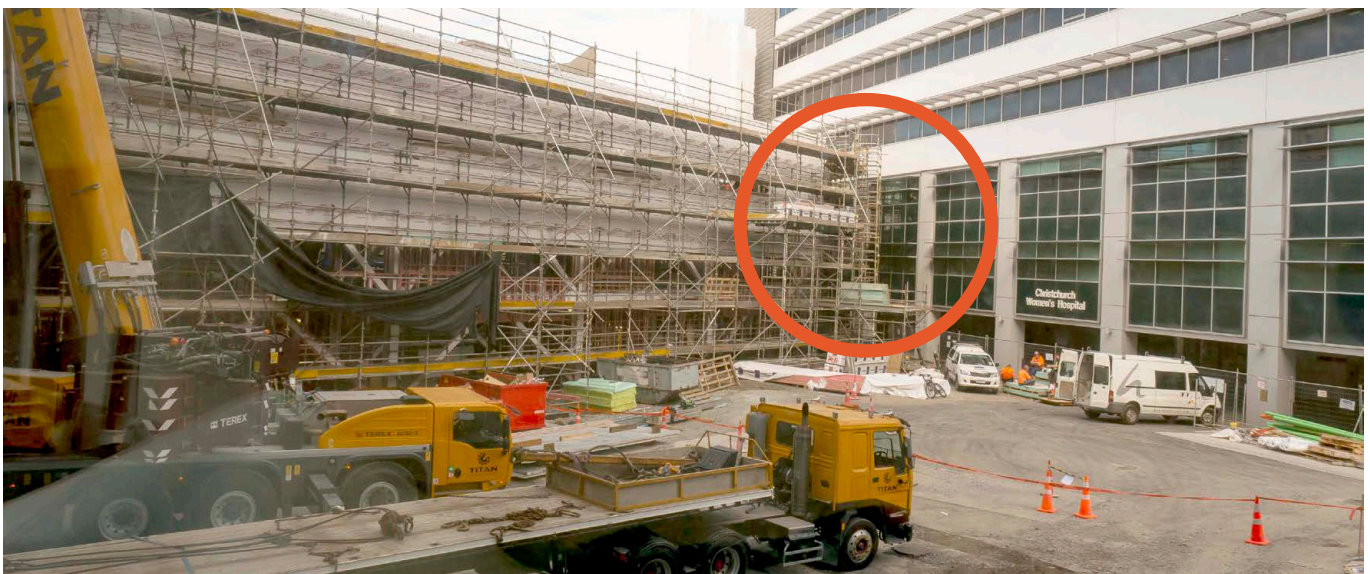
Goodbye to the Diabetes building on Hagley Avenue

Last week fences went up around the Diabetes building on Hagley Avenue ahead of its impending demolition. The building will be “cut and craned” away to minimise disruption. The first task is to strip out the interior, before the demolition machinery arrives. The demolition work will also remove the old squash court building on St Asaph Street. If you are walking between the hospital and the afternoon car park, please take note of any signage in the area and follow the path.



Noise on Saturday 25 May for Christchurch Women's Hospital

With the construction of the Link to the new Christchurch Hospital, Hagley, there will be a period of noise while new two-storey high steel seismic doorframes are fitted. The work, over next weekend, will involve concrete drilling close to Christchurch Women's Hospital. The contractors will do a 'dry fit' of the steel on Friday 24 May to do a dummy run and ensure everything fits. This will involve a crane installing the steel (not drilling or bolting) and then removing it again. The services most affected will be communicated with directly.



The area where the Link bridge joins Christchurch Women's Hospital



Reducing the impact of critical IT incidents through incident management processes and business continuity



As part of our business continuity plans we worked with the [organisation to determine mission critical applications](#). In order to make sure we meet the goal of reliability and stability of our information systems we need to respond if issues arise. Just like the clinical world the best way to prepare for emergencies is to run regular practice drills so when a real major incident happens, we can rely on our knowledge and training, and quickly adjust according to the situation in front of us.

The Information Services Group (ISG) put this into practice on 29 April when, with assistance from the Emergency Planners in the Canterbury DHB Service Continuity team, they ran a startlingly close-to-reality unplanned outage exercise.

In this exercise, aptly named "Exercise Hephaestus" after the god of fire, participants were given a worst-case scenario in which they had to deal with an unexpected shutdown to all IT services in the middle of the night. To make it more real and add to the complexity, they also had to handle fictitious persistent callers and unresponsive providers.

As you may well imagine, the activation of the ISG Incident Response to coordinate communication, response and resolution didn't go without a few glitches. On a more positive side, this exercise highlighted further areas for improvement that have now been captured as actions.

A new exercise is planned in a few weeks' time. Watch this space!

Unplanned IT outages or loss of service, when they occur, have a large impact on Canterbury DHB patients and staff. Due to the unpredictability of a critical incident, the ability to establish a quick and effective response is one of the greatest challenges for ISG.

From the moment an incident is discovered, the timing around information gathering, assessment, response coordination, resolution and communication is of the upmost importance.

Because an IT incident can encompass a wide range of events, such as a network or application failure or the inability to provide support, it is vital that comprehensive incident management processes and business continuity plans are in place:

- › Incident management usually defines the activities of a team to respond to and recover from a specific time-bound incident.
- › Business continuity is more about a plan where risk mitigation measures are implemented in order to ensure we can perform our essential functions after a disruption. For example, in a natural disaster, such as an earthquake or a flood.

The two often overlap. For example, ISG would use its business continuity plan if there was an infrastructure failure due to the building they are located in collapsing and would activate its incident management process to communicate and restore services

Although we will never be able to completely remove the risk for unplanned incidents, we can do our best to prepare as well as possible so our customers can expect the fastest possible response to incidents as they occur and an immediate notification so each area or department can activate their back-up plans.

Last week, 13–17 May, was [Business Continuity Awareness Week \(BCAW\)](#).

FIVE WAYS TO WELLBEING



CONNECT

Grab a cuppa, be there,
say 'kia ora!'



KEEP LEARNING

Be curious, try
something new



TAKE NOTICE

Use your senses, savour
the little things



GIVE

Your time, your words,
your aroha



BE ACTIVE

Do what you can, enjoy
what you do

Looking after yourself – Give

Last week we talked about the Five Ways to Wellbeing, and we'll be breaking them all down over the next five weeks.

Let's start with Give, Tukua.

This one's simple! Giving something, whether it's to the wider community, your colleagues, or a simple smile to a stranger can be incredibly rewarding. How good does it feel to have something to offer?! Some of the small things you can do to incorporate giving into your day are listed below. What can you do? What are you already doing?

- › Thank someone
- › Smile at people – they'll probably even smile back!
- › Volunteer your time – it doesn't have to be much
- › Join a community clean-up day – could be a local stream, river, beach or park – or a tree planting project with friends or family
- › Do something nice for a friend, or a stranger
- › Join or start and develop a neighbourhood Time Bank
- › While driving, stop to let a car into the traffic – we all know how good this feels!
- › Offer to mow your neighbour's grass verge.
- › If you have fruit trees take your excess fruit to work with a "help yourself" sign
- › Donate old toys, books, sports equipment or clothes to a local charity
- › Offer to help an older neighbour with their wheelie bins on rubbish/recycling days
- › Give a compliment – acknowledge what someone in your life has done well.

It's that easy, see for yourself – you're probably already doing a lot of it – pupuri i te mahi pai (keep up the good work!).

CONNECT

TALK & LISTEN, BE THERE, FEEL CONNECTED

TAKE NOTICE

REMEMBER THE SIMPLE THINGS THAT GIVE YOU JOY

KEEP LEARNING

EMBRACE NEW EXPERIENCES, SEE OPPORTUNITIES, SURPRISE YOURSELF

GIVE

YOUR TIME, YOUR WORDS, YOUR PRESENCE

BE ACTIVE

DO WHAT YOU CAN, ENJOY WHAT YOU DO, MOVE YOUR MOOD

5 WAYS TO WELLBEING

Connect . Give . Take notice . Keep learning . Be active
Heke tika oranga, he taonga taua iho, he pūkanga ake, eae te arotanga, te manawaroa

Mental Health Foundation
of New Zealand
www.mentalhealth.org.nz

Restorative Care gets up, gets dressed and gets moving into a healthLearn package

In Canterbury, we've been using a Restorative Care framework to improve the patient journey in acute hospital care, rehabilitation and community-based care.

We have been using a Restorative Care approach in Older Persons' Health (at Burwood Hospital) for some time, and it is now part of everyday clinical practice. The restorative model of care has also been successfully piloted in Ward 23 at Christchurch Hospital, and has been spreading across Christchurch and Ashburton Hospitals to ensure that a patient's stay in hospital is no longer than it needs to be.

Restorative Care – get up, get dressed, get moving – strengthens patients' ability to recover quickly from injury or illness and enable them to contribute actively to decisions about their care. This helps patients recover quicker, maintain a normal routine and return home sooner.

Executive Director of Nursing Mary Gordon says she supports Restorative Care because it provides a flexible approach to health care that respects the individual and supports them to obtain and maintain their highest level of function.

"Interventions can be as simple as ensuring hearing and vision devices are used to support communication and encouraging a patient to sit up in a chair for meals"

These interventions, and others like them, are proven to reduce time spent in hospital, and to reduce problems associated with deconditioning and loss of physical and mental function. Research in hospitals where a restorative care approach has been implemented has shown a 37 per cent reduction in falls an 86 per cent reduction in pressure injuries and a reduction of length of stay of up to 1.5 days.

We have now combined Restorative Care with the Māori concept of "haumanutia" – a word that means to revive, rejuvenate and restore to health. Haumanutia is inextricably connected to te whare tapawhā and requires a holistic approach encompassing physical (tinana), mental (hinengaro), spiritual (wairua) and family (whānau) wellbeing. Regaining independence is reclaiming one's own tino rangatiratanga; i.e. control over your life.



The healthLearn package Restorative Care team (from left): Clinical Nurse Specialist, General Medicine, Kerry Winchester; Physiotherapist Gabrielle Donnelly; Nurse Educator Neil Hellewell; Clinical Team Coordinator (CTC) Burwood and Nurse Coordinator Projects Roxanne McKerras

Our philosophy of haumanutia is restorative care that emphasises the importance of whānau in a patient's care, and the basic but vital steps each day of getting up, getting dressed and getting moving as a pathway to overall wellbeing! While these are physical steps in the process, they require whānau support, mental strength and spiritual wellbeing.

Haumanutia is our way of expressing how we aim to strengthen our patients' recovery and independence.

Check out our [NEW healthLearn package](#) so you can support your patients to get up, get dressed and get moving!

Background to Restorative Care

Older adults in hospital spend approximately 83 per cent of their time in bed! Spending this much time in bed has dire consequences such as reduced ability to mobilise and subsequent loss in muscle mass and muscle strength. Loss of mobility also means people are more likely to experience difficulty with bladder and bowel function, loss of skin integrity, reduced circulation, lung function and low mood and increases the likelihood of a longer hospital stay.

The Health of Older People Service Level Alliance (HOPSLA), part of the South Island Alliance, is promoting and supporting health care providers across the South Island to adopt a restorative care approach to the services they provide, both within hospital and in the community.

Loneliness and isolation are pushing healthy elderly into aged care facilities

Loneliness, social isolation and burnt-out carers are pushing physically and mentally well elderly into aged care facilities, a University of Otago, Christchurch, study has found.

The research, led by Canterbury DHB Geriatrician and University of Otago, Christchurch researcher Hamish Jamieson, found negative social factors were often more compelling reasons for elderly to enter care than health issues such as incontinence and falls.

The findings come from surveys of more than 54,000 elderly New Zealanders over a five year period. During that period 11,000 of the 54,000 people surveyed entered care. The average age of those surveyed was 81.

The study, published recently in The Journal of American Medical Directors Association (JAMDA), found:

- › People who said they were lonely (11,000 of 54,000 people) were almost 20 per cent more likely than others to go into a rest home, even when physically well
- › Those living alone (27,000 people) were 43 per cent more likely to enter care
- › Those with stressed carers (16,000) were 28 per cent more likely than others to enter care
- › Those lacking in positive social interactions (5,000) were 22 per cent more likely to enter care. This includes elderly experiencing conflict with friends or family.

Hamish says the Ageing Well National Science Challenge-funded study quantifies the significant impact social factors have on people entering rest care facilities.

"While we know this is a problem it is really important to measure the size of the impact and also how big this is compared to other more medical factors."

This study shows the importance of social factors in driving elderly into residential care, including people whose health is good for their age. Previous research found urinary incontinence increased rest home entry by 11 per cent and faecal incontinence by seven per cent

"This compares with loneliness increasing the risk of going into a rest home by almost 20 per cent."

Carer stress is also a common cause of elderly entering rest homes, even when they in relatively good health for their age, Hamish says.



Geriatrician and University of Otago, Christchurch researcher Hamish Jamieson

"Families or whānau often do everything they can to support their loved ones staying at home. However, this constant caring can become exhausting for families which leads to admission into aged care facilities."

New Zealand is one of many countries that have developed health and social policies to provide early intervention and allow older people to live healthily in their own home.

"These strategies often focus on health but this study shows social factors are just as powerful in a person's decision, or the decision of their family or whānau, to make the move into aged residential care."

Data for the study was gathered during Ministry of Health InterRAI assessments done prior to 2015, Hamish says.

These comprehensive assessments are done routinely for elderly people in the community or in aged care facilities to determine what support they may need. The assessments typically take two hours and assess myriad factors such as their health and wellbeing.

Diabetes Christchurch celebrates opening of new building in Christchurch

A celebration was held last Friday to mark the opening of the new premises for Diabetes Christchurch at 21 Carlyle Street, Sydenham.

Kaumatua Henare Edwards carried out a blessing on the new building and Canterbury DHB CEO David Meates cut the ribbon to officially mark the centre open.

The new premises has good parking access and as always there is a kind welcome waiting for those with diabetes, their family/whānau or friends, and health professionals, says Manager Lynne Taylor.

"You are most cordially invited to come and peruse our good range of diabetes pamphlets and information as well as diabetes health and medical products available in our shop or online at: www.diabeteschristchurch.co.nz or just join us for a chat and a cuppa."

The centre is open Monday to Friday, 9am to 4.30pm or phone 03 925 9972.



Canterbury DHB CEO David Meates cuts the ribbon to mark the centre's official opening



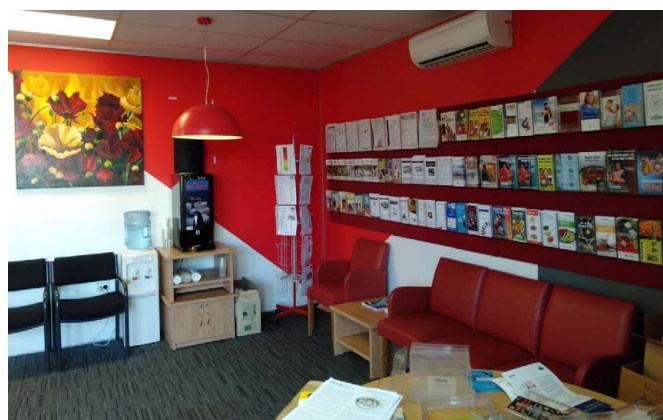
Diabetes Christchurch centre manager Lynne Taylor addresses those attending the opening



Kaumatua Henare Edwards blesses the new building



A modern kitchen area is part of the new building



The information area of the new premises

“Nothing about us, without us”: Acknowledging a symbol of consumer strength and protection

A person who has had their own experience of a serious mental disorder can have a unique understanding of others' mental distress. This 'been there' perspective plays a powerful role in shaping the specialist mental health care that Canterbury DHB provides to thousands of Cantabrians every year.

Working within the Specialist Mental Health Services (SMHS) of the Canterbury DHB, consumer advisors use their personal experience to influence all parts of the service, including the development, delivery and evaluation of services, staff recruitment and training, and fostering a consumer voice within the organisation.

Consumer advisors are role models for the people using mental health services. They are living examples of hope, not only for consumers but their whānau (families) as well. They demonstrate recovery in action.

It is no wonder then that the taiaha was chosen as a fitting representation of the voice of the mental health consumer and the role the consumer advisory team has within SMHS. Most commonly known as a Māori weapon, the taiaha is also a symbol of peace during harmonious times.

On Thursday 9 May, a small celebration to reinstate a taiaha, gifted by former consumer advisor coordinator Dr Murray Cameron, was held on the Hillmorton campus. Presented to the Consumer Council in 2004, the taiaha was blessed in 2007 when it was hung in the Heathcote Building at The Princess Margaret Hospital. Since the earthquakes, it has been in the safe keeping of team members and the Tāua (a Tāua is the Ngai Tahu term for an older wise Maori woman, called a kuia across the rest of New Zealand).

The ceremony recognised the significance of the taiaha, the consumer voice at the SMHS, and the importance of working together in partnership.

Today, it is proudly mounted in the consumer advisory team's office at Hillmorton.

The taiaha was gifted the name “Te taiaha o te reo pono” by Kaumatua Rev. M. Gray in recognition that those who hold it speak honestly and protect the voice of the consumer. Silver plates on the taiaha record the names of these holders; those who have worked from a consumer perspective, as advisors or Consumer Council members, to improve mental health services for all consumers.



Te taiaha o te reo pono

For the consumer advisory team, the taiaha symbolises the power of the consumer voice, and the mission to SMHS to continually strive to improve the care it provides, in particular bicultural services for tangata whaiora.

“It’s a daily reminder of the strength we have and the challenges we face in doing our work,” Consumer Advisor Coordinator John Kavermann says.

Specialist mental health consumer advisors also protect this voice at the national level. For example, Māori Consumer Advisor of SMHS Dean Rangihuna played a key role in the Government Inquiry into Mental Health and Addiction as a member of the Inquiry Panel.

The consumer voice is integral to SMHS, a precious perspective that we will continue to draw on and amplify at every level.

Don't let the flu get you

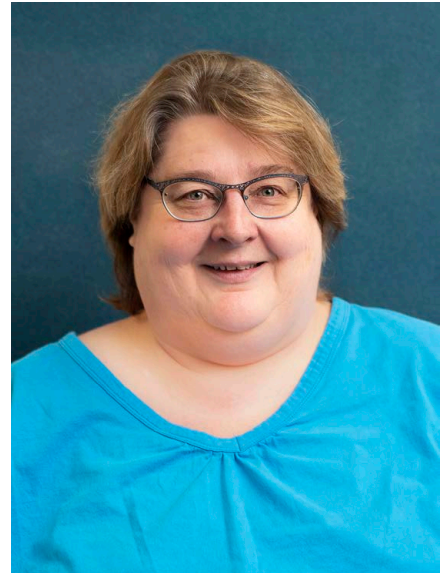
While we may have just declared Canterbury's measles outbreak officially over, the region is definitely not out of the woods when it comes to avoiding serious illness, with flu season just around the corner.

With winter just weeks away now's the time to get your flu vaccine and give yourself the best shot at staying well this flu season.

Each year our people are encouraged to get their flu shot early. It takes up to two weeks for the flu vaccine to be effective so having the vaccine now will help protect you when influenza hits our community.

Canterbury Medical Officer of Health Dr Ramon Pink says the best way to stop the spread of influenza is to get vaccinated. If you don't, you could be putting yourself and your whānau at risk.

The annual flu vaccine is free for Canterbury DHB staff. To get your free flu vaccine either attend a clinic or see the authorised vaccinator for your work area. Details of free staff flu vaccination clinics, and a list of authorised vaccinators, can be found on [Max](#) and the [intranet](#).



[Mary Gordon on why you should get your flu shot](#)

Jane Foley: *Flu Fighter*

“It's the best thing you can do to reduce the risk of getting the flu and passing it on to vulnerable people.”



Peddling for peace

Mazharuddin Syed Ahmed is a passionate cyclist.

He is also a survivor of the Linwood mosque attack. On 26 May, he will help lead a memorial cycle ride to promote love, unity and peace.

The 'Peace Train' will take participants on a 10-kilometre ride to several faith-based sites in and around central Christchurch, starting at the El Noor Mosque and ending at the Linwood Mosque.

Mazhar was at the Linwood Mosque on March 15 and says it was a life-changing event. He lost his aunt and a lot of friends. Following the attack, the Ara Architecture tutor was motivated to use cycling to promote inter-faith dialogue

He approached Community and Public Health requesting help with holding a memorial ride. A small, diverse planning committee was established and the idea of a Peace Train Ride, which would visit different places of worship in Central Christchurch, was formed.

The event aims to promote tolerance and acceptance of other's cultures, beliefs and religions and address mental wellbeing.

Canterbury DHB Health Promoter Meg Christie says she hopes it will be a good reminder that there is still a need to come together and celebrate diversity.

Cantabrians are invited to join the all-ages ride. The group hope their idea, which draws on Prime Minister Jacinda Ardern's 'We are One' message, is picked up and replicated by other cities around New Zealand.

The event co-ordinators have been supported by Action Bicycle Club to get the idea off the ground.

The bike ride is on Sunday 26 May, starting at 1.30pm. See [Facebook for more details](#) or email meg.christie@cdhb.health.nz



Canterbury DHB Health Promoter Meg Christie and Mazharuddin Syed Ahmed

Safe sleep space protecting newborns across Canterbury

Last week marked the beginning of a Canterbury DHB-wide quality initiative to provide an alternative safe sleep space in addition to the standard hospital cot for babies.

First Days Pēpi-Pod®s are now available for mothers to use with their newborn in *all* maternity wards and units across Canterbury.

“Having First Days Pēpi-Pod®s reinforces safe sleep practice from the day a baby is born and provides a safe sleep space for a newborn, with this one being closer to mum than the standard hospital cot,” says Charge Midwife Manager Amanda Daniell.

Safe sleep is one of the key modifiable risk factors for reducing the incidence of Sudden Unexpected Death in Infancy (SUDI) and this project forms one part of Canterbury’s wider safe sleep plan to reduce SUDI to 0.1 in every 1,000 births by showing how alternatives can also work and provide that space.

“This is a fabulous initiative for Canterbury enabling safe sleep practice while in hospital, giving mums an alternative to being closer to their baby to soothe and settle safely in bed”, said Maternity Quality and Safety Programme Coordinator Sam Burke.

Larger sized Pēpi-Pod®s are available for whānau to take home with them if they do not have a safe space for their baby to sleep once they are home, or if their baby is exposed to other risks for SUDI. The use of both sized Pēpi-Pod®s helps protect, promote and support breastfeeding (another protector against SUDI) and



Baby Elsie sleeping safely in her First Days Pēpi-Pod®

provides a safer way for babies to sleep close to caregivers without bed sharing.

While the First Days Pēpi-Pod®s are for hospital use only with newborns, the larger Pēpi-Pod®s are available through Christchurch Women’s Hospital, midwifery led units (Lincoln, Rangiora, Kaikōura), Te Puawaitanga ki Ōtautahi Trust and Te Hā – Waitaha for at-risk whānau to keep for free.

Te Puawaitanga ki Ōtautahi Trust have wahakura (woven flax bassinets) available for some clients, as well as running regular wahakura weaving wānanga, which anyone who may want to weave their own can attend.

Health Workforce Development Scholarships awarded

Twenty-one students from a wide variety of health studies received Pegasus Health scholarships last week at a community event held at Tūranga.

Each year Pegasus Health invites students who identify as Māori, Pasifika or from Culturally and Linguistically Diverse (CALD) communities, studying medicine, nursing or allied health to apply for the scholarships.

Vince Barry, CEO of Pegasus Health says “Each year, as we award these scholarships, I am so impressed by the work of the applicants and the challenges some them have overcome to be studying health. Yet again we have a tremendously wide diversity of personal stories behind each success. Pegasus Health is proud to support them in their quests,” says Vince Barry.

Pegasus Health established the Māori scholarships in 2001 and followed up with Pasifika scholarships in 2007. Scholarships for CALD health students became available in 2014.

For a full list of scholarship recipients, see [Pegasus Health's website](#).



Deepti Raturi receiving her scholarship award from Vibhuti Patel, Deputy Chair, Pegasus CALD Health Advisory Group (left) and Jane Cartwright, Independent Advisor, Canterbury Clinical Network (right)



Meihana Ngatai receiving his scholarship award from Karaitiana Tickell, Chair Te Kāhui o Papaki Kā Tai (left) and Peter Townsend, Chair, Pegasus Health Board (right)



Keke Avia receiving her scholarship award from Maria Pasene, Pacific Health Project Manager, Pegasus Health (Left) and Vince Barry, Chief Executive Officer, Pegasus Health (right)

Looking for a better intranet search, then look no further

As part three of the PRISM series in the lead up to the launch of a new Intranet homepage on June 10, this piece is about the enhanced search that will be available and how it will improve over time as more and more staff store their information in PRISM.

Some new features you'll notice (there are screenshots to illustrate the first three) are:

1. To the left of the search box there's a dropdown menu that lets you select where you look, making the search faster. Choose from search "Everything", "CDHB Documents", "Max", "This site" or "People".
2. Once you have entered what you want to search for, use the left hand side navigation to further filter in your search. You can filter by: "Author", by "Document type" such as procedure or policy, "Result type" – email, Powerpoint, Word doc etc., or by "Activity", - Hand Hygiene, Certification, Falls etc.
3. Hover over the link & view a preview image of document. This is going to save you a lot of time that you'd normally spend downloading things you don't need.
 - a) Within preview image, you have the ability to "Edit document" (only if you have permissions), "Follow Document" (ensuring you are notified when a new or updated version of a document becomes available), "Send document" link to another user, "View Library" (see the library where the document is stored).
 - b) You can also open up on full screen & print to pdf.
4. When searching on documents, you will be able to find individual words, even in a pdf. This is an excellent way to find the part of the document that is relevant for your work task. For anything that has loads of pages, this is a far quicker way of finding and reading the specific content you need.

Filters

Select Refiners below to filter by:

Document Type
All
Procedures

Result type
PDF
Word

Author
Gillian Wyatt
Rebecca Moreton
Colette Meehan
Donna Hammond
LindaH9
SHOW MORE

Modified date
One Year Ago
Today
All

Search Scope

Search tip - if you are searching for a phrase, wrap the phrase in " characters to ensure the search is accurate

patient transfers

Everything CDHB Documents Max People

Relevance

Document preview

Patient Transfers

Contents

Purpose	1
Scope	1
Associated documents	1
Documentation	1
Guidelines for escorting a patient	2
Ward 6	3

Purpose
To standardise the practice of transferring patients from Admitting Unit to Wards 1, 6 or Radiology. To enable it occur in a safe and timely manner with effective co-ordination and communication between the teams.

Scope
PAGE 1 OF 4

Changed by Amanda Evans on 8/25/2016 11:19 AM

EDIT FOLLOW SEND VIEW LIBRARY FIND IN LIBRARY

Helpful actions

Full screen

5. It can also group words in a search if you use double inverted commas so that it finds "social media" instead of all documents with the words 'social' or 'media'. Using the word 'or' between search terms can also help you find what you need faster.

Each document also comes with 'refiners', such as the document's creator, where the source file is stored, format type etc. These work a little like online shopping which allows you to filter by gender, clothing type, size, colour etc. If you refine your search using the refiner option and more precise search terms, what you need will appear higher up the search list.

What can you do? Make sure your documents are saved properly by filling in fields in the properties. Do you name your documents in a way that describes what they are (so you or someone else can find them later)? Do you really need those old documents or old versions that will clutter up your search?

Not long now!

Patients an inspiration for trail competition

Burwood Outpatient Physiotherapist Paul Timothy is off to Portugal in June to represent New Zealand at the 2019 International Association of Ultrarunners Trail World Championships.

Paul will line up alongside eight other New Zealand representatives to tackle the annual event, which is regarded as the premier event of world trail running. Set in Miranda, Portugal, the 44-kilometre course traverses off-road terrain and climbs to 2100 metres.

Paul says he has been training seven days a week and is well prepared.

"My training programme includes running an average of 130 kilometres a week. It's a demanding schedule but necessary to build the endurance and fortitude needed."

He is looking forward to the opportunity to challenge his limits.

"I get a lot of inspiration from the patients I treat at Burwood Hospital, by observing the resilience and determination they show when rehabilitating from serious impairments."

Trail running also provides an amazing platform to explore the outdoors and experience some amazing landscapes in New Zealand's backcountry, he says.

The 36-year-old father of two juggles full-time work and parental duties alongside his intensive training programme. He also finds time to give back to the community as acting treasurer of the Sumner Running Club.

Paul earned his spot on the New Zealand team with a spate of exceptional performances on the Oceania Trail Championship for the 2018/2019 season. His achievements include the 2018 Canterbury Marathon title and numerous 50km trail race victories.

A quiz night is being held to help Paul on his self-funded journey, on Sunday 19 May from 5.30 pm at the Elmwood Trading Co, Strowan. Up to six people per team, \$10 each.

To enter a team and join in on the fun email: tiffany.banks@cdhb.health.nz



Paul Timothy training for the 2019 International Association of Ultrarunners Trail World Championships in Portugal

Thank you for your excellent care

Dennis Parker is back on his bike and winning gold medals again after treatment to remove tumours from his tonsils and neck.

He has reached out to Canterbury DHB to thank those involved in his care.

"To my medical support team – your interventions, support and advice has been awesome," he says.

Dennis was diagnosed after his hairdresser noticed a lump on the right side of his neck. When it was still there after a month he had it checked and tests at the end of March last year showed he had cancer in his tonsils with an additional tumour in his neck.

A keen cyclist who won his age category in Le Race the week before his diagnosis, Dennis had surgery in June last year to remove the tumours.

It was a shock to get the diagnosis but the care he received from all those involved in his treatment was excellent, Dennis says.

"The hospital was very good. I found the surgeons very empathetic. Everything was explained carefully to me. And the anaesthetists took my mind off things by talking with me about cycling. I really thank them for that. The nurses and everyone did a fantastic job."

After the operation he initially couldn't eat, drink, speak or swallow, but three weeks later began to carefully work on re-building his health and fitness by doing 45-minute walks every second day. After six weeks he was back on the bike training.

In April Dennis competed in the 2019 New Zealand Age Group M7 Road Cycling National Championships and won his 65–69 year olds race, regaining his New Zealand title from a previous year.

"This is a result that for most of last year I would not have thought possible."

Dennis says it's been a challenging time, not just physically and emotionally, but in dealing with the reality of cancer and the post-operative recovery process. The right side of his neck and shoulder is still numb from nerve damage but he feels about 90 per cent back to normal.

"Maybe more like 100 per cent when cycling."

He has been able to restart his governance and management support business working in the not-for-profit sector, now with an additional support interest: health, cancer and recovery.

"Thank you for very much for being an important part of my diagnosis and recovery. I am very grateful."



Dennis Parker on the podium after winning the 65–69 year old category in the 2019 New Zealand Age Group M7 Road Cycling National Championships in April – just 10 months after his cancer surgery



Dennis sprints to a win at the finish line

Cosy blankets being enjoyed thanks to donation

Patients in Ashburton Hospital's rehabilitation ward are enjoying the cosiness and cheerfulness of colourful crocheted blankets thanks to a generous donation of time and talent.

Veteran of Lowcliffe Women's Institute (WI) and regular visitor to the hospital Olive Philpott delivered six crocheted knee blankets and a large wool blanket to Ashburton Hospital's rehabilitation ward (Ward 2) recently.

Olive, aged 93, helps with Meals on Wheels, visits patients and does flower arrangements. It was when she was in hospital herself that she noticed the need for wool blankets for patients, especially smaller ones to place across their knees.

Olive made blankets for the ward by combining her own crocheting, with knitting done by Elma Hobson, the late Ena Taylor and fellow members of the WI.

Patients love the cosy colourful blankets and they are being well used.

Thank you Olive!



Ashburton Hospital Ward Two patient Colleen Patton-Todd enjoys one of the donated blankets. To her right is Allied Health Assistant Raewyn Harborne. Rear left, Mid Canterbury Federation of Women's Institute President Mavis Wilkins and right, blanket creator Olive Philpott. Photo courtesy of the Ashburton Courier

Christchurch Neonatal Unit well represented at international conference

The Council of International Neonatal Nurses conference – COINN 2019: Enriched Families-Enhanced Care – was held in Auckland at the beginning of May. The right to hold this conference was the result of a committed effort by the New Zealand Association of Neonatal Nurses (NZANN) committee members over many years.

The Christchurch Neonatal Unit was well represented at this international conference.

Neonatal Intensive Care Unit (NICU) Clinical Nurse Specialist and educator Gina Beecroft presented on her work in Samoa, which involves the delivery of the POINTS programme to neonatal nurses. (POINTS refers to six modules of care, addressing Pain control; optimal Oxygenation; Infection control; Nutrition interventions; Temperature control and Supportive care.)

Nurse Schol Obery presented a poster on behalf of herself and Milk Bank Manager Anthea Franks titled, "The Milk

of Human Kindness: Pasteurised Milk Banking in NZ". The human milk bank in the Christchurch Neonatal Unit opened in February 2014 and was the first hospital-based milk bank in New Zealand.

NICU Developmental Physiotherapist Tiffany Hamilton also presented a poster describing her work developing a NICU journal for families of babies in NICU. "Traditional NICU journals record information; ours provides psychological support and comfort with a strong 'feel good' factor."



Neonatal Nurse Manager, Debbie O'Donoghue with her award for 30 years service to Neonatal Care

Neonatal Nurse Manager Debbie O'Donoghue presented her nursing research focusing on the experiences of fathers in the neonatal unit. The highlight for the team members who attended the conference was to see Debbie presented with an award from COINN for her services and

contribution over 30 years to Neonatal Care. Debbie is a COINN board member and has recently completed her Masters with her research focusing on fathers of babies in NICU.

Hand hygiene month, May campaign 2019 – Look out for our colourful Gold Auditors

You may have noticed our Canterbury DHB Gold Auditors wearing colourful T-shirts during May, kindly sponsored by Schulke NZ (suppliers of our recently introduced Microshield Angel Clear – Alcohol Based hand Gel (ABHR) product).

The T-shirts have been designed by the Hand Hygiene Governance Group (HHGG) working party, comprising members from the Infection Prevention and Control, Quality and Communications teams, to feature and promote the 'Five Moments of Hand Hygiene'. Each individual moment is displayed on a different coloured T-shirt. Moment number on the front, with the moment detail on the back.

This colourful fashion statement will be a visual aid to support the hand hygiene programme locally while at the same time empowering our patients to have a conversation invited by our message: "It's okay to ask me to clean my hands".



'The Five Moments' (for HH1) and five members of the Canterbury DHB Hand Hygiene Governance Group.

From left, Quality Facilitator Medical Surgery Claire Baker, Senior Medical Officer (SMO) Infectious Disease and General Medicine Heather Isenman, SMO Surgical Ross Roberts, Consumer representative Pauline Mohi, and Professional Development Unit Nurse Manager Janette Dallas



One minute with... Katy Taylor, Mortuary Technician

What does your job involve?

Our department is responsible for the storage, release and documentation of all Christchurch, Ashburton and Burwood hospital deaths. A dual responsibility is our work we undertake on behalf of the Ministry of Justice, under direction from the coroner. My job involves aiding/assisting the pathologist during the post-mortem process with the end goal of establishing cause of death in cases of sudden/unexpected/violent deaths. Referrals to our unit depending on the need, come from the other four South island DHBs. We also have a paediatric post-mortem service that we offer.

Why did you choose to work in this field?

I've always been hugely interested in anatomy and the amazing machine that is the human body. This job allows me to participate in the post-mortem process – the removal and examination of every organ in the body and identify how each system is working in relation to the other. I consider it a huge privilege.

What do you like about it?

Our days can be so variable. I enjoy gathering all the information and answering the questions raised during death. Every case has a lesson to teach and we as technicians never stop learning.

What are the challenging bits?

A negative post-mortem is one in which, despite our best efforts, cause of death cannot be ascertained. This can be challenging for both the pathologist and technician who feel a strong sense of obligation to provide answers for our grieving families. As part of our investigations, we are privy to information of a person's final few hours. The job definitely humbles you and allows you to appreciate, at a deeper level, the fragility of life.

Who inspires you?

I am a huge advocate for death education and advance care planning and I'm lucky that there are so many positive pioneering women doing amazing work in this very industry. Dr Kathryn Mannix, Caitlin Doughty, Katrina Spade, Carla Valentine, all women who passionately advocate awareness, innovation and the idea of dying well in our current death-phobic culture.

What do Canterbury DHB's values mean to you in your role?

Personal pride and integrity in every aspect of our service for the people of Christchurch. The high level of care received at Canterbury DHB does not stop when your heart does. It's our privilege to look after you for the short time you remain in our care.

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

I'm all about the gram (Instagram) baby! Worldwide access to technical experts and fellow industry comrades, and all at your fingertips. Social media platforms have revolutionised the study of medicine and science.

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

On an all-expenses paid cruise ship through the Greek Islands... a girl can dream!

What do you do on a typical Sunday...

Two kids keep me pretty busy! I'm a bit of a gym bunny and I love to bake. Any extra time over and above that, I love my sleep.

One food I really like is...

Cinnamon doughnuts are my kryptonite.

My favourite music is...

Anything that gets me charging at the gym. I'm all about the power anthems.



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

Canterbury Grand Round

Friday 24 May 2019 – 12.15pm to 1.15pm with lunch from 11.50am

Venue: Rolleston Lecture Theatre

Speaker 1: Anja Werno, Labs “Rapid Influenza Test”

Speaker 2: Craig Hutchings, Facilities Establishment Manager

“Metropolitan Sports Facility: Coming Soon”

Construction of the Metropolitan Sports Facility is underway. What opportunities does one of the largest sport, health and aquatic facilities in the southern hemisphere mean for the health sector? Through innovation and collaboration the facility can truly be a place that has a positive impact on the health and wellbeing of the community. This presentation will provide information to get you thinking about how to harness the facility and services to achieve better health outcomes.

Chair: Geoff Shaw

It is requested out of politeness to the speaker(s), that people do not leave half way through the Grand Rounds. All staff and students welcome.

This talk will be uploaded to the staff [intranet](#) within approximately two weeks.

Video conference set up in:

- › Burwood Meeting Room 2.6
- › Wakanui Room, Ashburton
- › Administration Building, Hillmorton
- › The Princess Margaret Hospital, Riley Lounge

Next is – Friday 31 May 2019

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



In the latest issue of the Health Quality & Safety Commission's E-digest you can read the story of a carer and his experience of communication with health professionals; gain insights into the kaupapa Māori approach to patient safety; and learn more about the Orthopaedic surgery implementation manual. Read more [here](#).



Noho ora pai ana I te korokeke
Living well with Dementia

Community Education Seminar

Evening - May 2019

Dementia and Communication

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

Katrina McGarr, a Speech Language Therapist working at the University of Canterbury, (and previously with Older Persons Mental Health Services) will explain how dementia can affect communication and discuss some practical strategies for making communication easier. There will be time for questions.

Please ensure you register as space is limited!

Date: Tuesday 28th May

Time: 7.00 – 8.30pm

Venue: Dementia Canterbury Seminar Room,
3/49 Sir William Pickering Drive, Burnside.
(off Roydvale Avenue – some Dementia Canterbury
parking is available on site, but please allow plenty of time
for parking)

Address: 3/49 Sir William Pickering Drive, Burnside, Christchurch **Postal Address:** PO Box 20567, Christchurch 8543
Ph: 03 379 2590 or 0800 444 776 **Email:** admin@dementiacanterbury.org.nz **Website:** www.dementiacanterbury.org.nz