

## All the hard mahi pays off

**This week I want to acknowledge the wonderful job everyone has done in terms of responding to the recent community COVID-19 cases in Canterbury.**

Health staff, particularly those in the Emergency Coordination Centre (ECC) and Emergency Operating Centres (EOCs) who came together; Community & Public Health (CPH) who were under huge pressure on the contact tracing front and our primary care practices who managed a massive increase in testing volumes. A special shout out to those who worked at our drive-through Community-based testing centres and managed the massive increased volumes admirably – special thanks too, to the public who heeded the call and came forward to be tested.

Behind the scenes our laboratory teams were pulling out all the stops to ensure results were processed and back

with the public in under 24 hours in most cases. I visited the public health team last week and was able to directly convey our collective appreciation of their work. I was very pleased when, late last week, waste water testing came back with nothing unexpected and with no new cases, we were able to stand down the ECC.

We knew we would eventually get cases here and these past couple of weeks have proved our activation systems are a well-oiled machine! However, there's always room for improvement and we'll be refining systems and continuing to work on our resurgence plans over the coming weeks and months.

### Vaccination rates increasing

It's been said before and I will say it again, our best protection against COVID-19 is vaccination. It takes a community to vaccinate a community – so thanks to everyone who is working so hard in primary care and across all of our vaccination sites, and in the programme office to maintain the momentum and help protect our community from COVID-19.

With no current community transmission, we have a window of opportunity now to really increase our vaccination rates to lift our rate of fully vaccinated eligible people to 90 percent.

#### Canterbury's vaccination rollout, by the numbers:

|                                    |                              |
|------------------------------------|------------------------------|
| First doses - 446,796              | Second doses - 378,892       |
| First doses - 93%                  | Second doses - 78%           |
| First doses to 90% - 0             | Second doses to 90% - 55,709 |
| <b>Eligible Population 482,890</b> |                              |

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Current statistics show Canterbury with 93 percent of the eligible population having received their first dose and 78 percent fully vaccinated. The silver lining of having four recent cases in Canterbury, is that we've seen an increase in vaccinations over the past couple of weeks. It's particularly heartening to see an increase in the numbers of first doses in the East of Christchurch.

Any day is a great day to get vaccinated. The drive-through vaccination centre in Addington will remain open until Christmas, seven days a week, with late nights every week night.

Check [www.VaccinateCanterburyWestCoast.nz](http://www.VaccinateCanterburyWestCoast.nz) for all the details.

Over the weekend almost all of Canterbury was covered with vaccination events including the Māori Indigenous Health Initiative mobile team at Hornby Panthers League Club, Amberley Medical, Philipstown Community Hub and Etu Pasifika at Ashburton College.

The Jabber Waka van (right) will be appearing at a variety of pop-up vaccination events including a Pak'nSave Wainoni community event kicking off this Wednesday 10 November until Saturday 13 November, 1-7pm daily.



## Mandatory staff vaccination – Health Order

It's so important that we're doing all we can as health staff, to be protected and ensure the safety of all who enter our health settings.

The Government Health Order which requires all health staff to be vaccinated in order to keep working in health, has now come into law.

As of next Monday, 15 November, people who work in health settings need to have had their first COVID-19 vaccination. The second vaccination dose must be received before 1 January 2022.

We have a team of health professionals who can address questions and concerns from any staff who are still undecided about becoming vaccinated.

The team is currently located at Christchurch Hospital and very happy to meet up either away from the ward in a confidential setting or they can come to you on the ward if you prefer. Many of our staff have been meeting with the team members to discuss the vaccine.

Connect with the Vaccination Team on **021 949 273** or email [vaccineorder@cdhb.health.nz](mailto:vaccineorder@cdhb.health.nz).

The team can also put you in touch with Infectious Diseases Specialist, Dr Alan Pithie, who is our COVID-19 lead. Everything discussed will be confidential.

## A shout out to the Cancer Society and their team of volunteer drivers

With an increase in COVID-19 testing over the past week or so, our usual pool of drivers who transport swabs from testing sites to our laboratory were really under the pump. The ECC team approached the Cancer Society and their response was overwhelming with many of their volunteers raising their hands to help.

Thanks to their efforts we could reduce the time that people had to wait for results. We had the entire week's shifts covered within a few hours and we greatly appreciated their assistance.



Volunteer driver Gordon Lindsay heading out to collect swab tests

## Canterbury DHB Assisting Dying Policy and Access Agreement now available

The [End of Life Choice Act 2019](#), which enables assisted dying services to be made available to terminally ill people who meet the criteria, came into effect yesterday.

We have developed a policy and an access agreement for registered people and these are available as controlled documents in the [Policy Library](#) – more on that later in this week's Update.

DHB clinicians will not be providing assisted dying services as part of their DHB role, but they are able to provide parts of the service in a private capacity – as long as they register and receive appropriate training through [SCENZ \(Support and Consultation for End of Life in New Zealand\)](#) which is

the national statutory body responsible for implementing the service.

Health professionals working with patients and whānau are likely to be approached by someone wanting to know about assisted dying. I know you will handle such requests sensitively and tactfully refer them to SCENZ. More information, context and links to the most relevant and useful information that is on the Ministry of Health website can be found on [page 15](#).

## Progress being made on the Hillmorton Campus

If you haven't been to the site lately it's looking a bit different. Our new facilities under construction on campus are really starting to take shape and are on track to open in November 2022.

These new units are being built for services relocating from The Princess Margaret Hospital and will be powered by a new biomass energy centre. The campus will house the Child and Youth Inpatient unit, Mothers and Babies and Eating Disorders Inpatient unit and Mothers and Babies Eating Disorders Outpatients.

A new unit providing mental health rehabilitation inpatient services for longer-term rehabilitation needs will also be available here. These facilities are going to bring the bulk of Canterbury's outstanding mental health services to one site and offer our staff and the people they care for, a modern, bright and comfortable space. See the latest images on [page 9](#).

## Māia Foundation Shine a Light Campaign kicks off today

Canterbury health charity Māia Health Foundation is launching its Shine A Light appeal launching today, with all funds raised going towards a new mental health outpatient facility for children and young people in Canterbury.

Māia has an ambitious target of \$6 million and new facilities for Child and Youth Outpatient services are much needed.

Since January 2018 there's been a 140 percent increase in demand for child and youth mental health services. Last year 4614 new young people were referred to Canterbury District Health Board's Child, Adolescent and Family (CAF) service, on top of the service's existing caseload.

I'm proud to be a Trustee of Māia and are so grateful for all the work they are putting into this campaign. Every donation helps make a difference. If you're able to. Read more about the campaign on [page 18](#) of this week's CEO Update.



An artist's impressions of the new Child, Adolescent and Family community facility to be built on the Southern end of the Hillmorton Campus. *Note: Design may be subject to change, and the service will be gifted a name by Manawhenua prior to opening.*

## New appointment

I am delighted to announce the appointment of Norma Campbell to the position of Executive Director Midwifery and Maternity Services, Canterbury DHB and West Coast DHB.

Norma has been Director of Midwifery since 2017 working closely with midwifery leaders and building strong working relationships nationally and across the Canterbury and West Coast health systems.

She has been a midwife for almost 40 years and spent 17 years with the College of Midwives before joining Canterbury DHB. She has worked in all areas the profession offers and has been a part of many national working groups as the maternity system has been evolving since the 1990s. Norma is a dedicated and passionate leader for Māmā and their pēpē and always keeps them at the centre of the work she is doing. She believes there is an essential need for all midwives to work confidently and autonomously with the support of the District Health Board whether community-based or employed by the DHB.

Norma will join the Office of the Executive Clinical Leads situated in Corporate Office which is comprised of Chief Medical Officer, Executive Director of Allied Health and Executive Director of Nursing.

Norma's appointment was effective from Monday, 1 November and we look forward to welcoming her into the Executive Management Team.



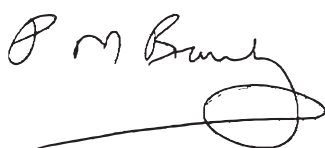
Newly appointed Executive Director Midwifery and Maternity Services, Canterbury and West Coast DHBs, Norma Campbell



If you're heading away for Show Weekend, enjoy the break and stay safe. If you haven't had a conversation with your manager about your Christmas/summer leave, I suggest you make time for it this week, as we count down to the end of the year.

As health is a 24/7 business, I'd like to give a shout out to everyone who will be working this long weekend, so your colleagues can take a break.

Kia pai tō koutou rā



**Peter Bramley, CEO**  
**Canterbury District Health Board**

**This week  
with Peter**

**8 Whiringa-ā-nuku 2021**

Click [here](#) to watch the This week with Peter video

Please email us at [AskPeter@cdhb.health.nz](mailto:AskPeter@cdhb.health.nz) you have any questions for Peter.

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

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

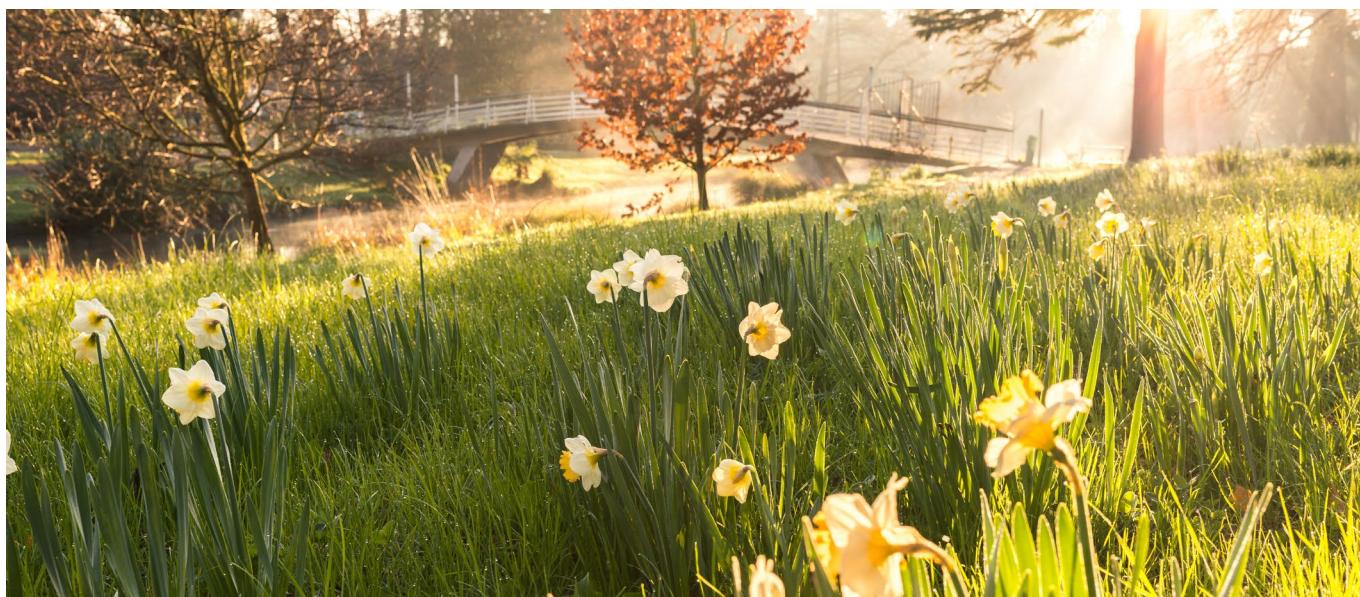
## THREE THINGS CHECKLIST

- ♥ Something I'm grateful for
- ♥ Something I'm going to do to make myself feel good
- ♥ Someone I'm going to get in touch with today

**ALL RIGHT?**

 **Mental Health Foundation**  
mauri tū, mauri ora OF NEW ZEALAND

**GETTING  
THROUGH  
TOGETHER**  
WHĀIA E TĀTOU TE PĀE TĀWHITI



## Bouquets

### Emergency Department (ED), Christchurch Hospital

The whole team looked after me so, so, well and I can't express my gratitude enough. The only names I remember are Darius (paramedic), Christina (doctor), Rachel (nurse), and Anjali (social worker). Rachel, especially, went out of her way for me and makes a great coffee! There were others whose names I can't remember, a doctor and an orthopaedic specialist and another nurse –especially the one who took me for my X-ray, she was so lovely and really made an impact on me. Words can't express my gratitude enough. They were patient and empathetic and actually made me laugh and feel a lot better. I will never forget how much respect and non-judgement they treated me with. This is exactly how doctors, nurses and paramedics should be. You all made an impact on me and I'll carry that with me forever.

### Neonatal Unit, Christchurch Women's Hospital

Amazing! Friendly, helpful staff. Thank you so much!

### Birthing Unit, Christchurch Women's Hospital

The level of care during our stay has been amazing. All the wonderful midwives have been truly caring, helpful and knowledgeable.

### Ward A5, Christchurch Hospital

I cannot thank enough all the nursing staff who looked after me. I will always be indebted to them for their wonderful care. The way they regularly checked on me was amazing, so a big thank you to all the team on that ward.

### Sleep Clinic, Christchurch Hospital

The person I saw at the Sleep Clinic was very thorough and helpful.

### Gynaecology Ward, Christchurch Women's Hospital

I found the service of all the people involved in my care to be a very high standard. I was always well informed, my questions were answered, and I was treated with genuine friendliness and warmth. It was a privilege to meet so many interesting and capable people and enjoy their company. The system here works like clockwork with each area taking responsibility to do their best. I am very grateful with what our health system provided me with. Thank you all very much.

## Big Shout Out

**To: Burwood Hospital Medical Secretary  
Michelle McSorley**

Michelle works on the second-floor workspace area and is secretary to a number of the doctors there. She is unfailingly cheerful, always has a great story to share, and is the 'birthday queen' of the department. She knows everyone's birthdays, buys cards, and gets the whole department to sign them. She decorates our desks for our birthdays and just loves a practical joke. She is adored by all and a real gem!

**From: Older Persons Health Service doctors**

#carestartshere

### Health and Wellbeing team, in the Novotel Christchurch Airport Hotel Managed Isolation and Quarantine Facility (MIQF)

I am writing to express my gratitude and appreciation for the medical support staff on site throughout our stay. I suffer from generalised anxiety disorder, depression, and ADHD, all of which have been exacerbated at various times throughout our stay. I have reached out at the worst times to the nursing team and have been very impressed with their handling of what I have brought to them. Having received medical attention from mental health professionals on a regular basis throughout my life, I felt highly reassured to find that there was such excellent and competent staff available to assist me with emotional regulation during such a difficult time. More specifically, around the third day after we arrived, a person named Danny provided me with an incredibly compassionate level of professional guidance with self-soothing techniques, first over the phone, then going above and beyond by hand-delivering supportive literature shortly after we first spoke –and in his follow-up with me the next day. I am so grateful for his intervention and will take aspects of what he shared with me into life outside of MIQF (literally, will post the reminder signs he printed for me as helpful visual aids during future episodes). I would also like to commend Tracey, who mentioned having a specialty relating to mental health that was clearly reflected in her conversational finesse. I spoke to her around day eight of our stay and was again highly impressed with her ability to connect with the state I was in and provide necessary support during my time of crisis. She was not only a wonderfully kind good listener but came up with actionable solutions (she helpfully arranged for additional fresh air time outside our floor's window for the following day). I am confident that the work of these two individuals was integral to my ability to get through this period safely and am so thankful that they were part of my MIQF experience. I hope that their outstanding work is properly acknowledged and would love if this feedback could be forwarded to them and the rest of their team. My sincerest thanks for equipping us with top-notch on-site medical support, I could not have done it without them.



### ED, Surgical Assessment Review Area (SARA) and Ward 5, Christchurch Hospital

I wanted to reach out to share the experience I had while I was in hospital and share a glimpse of the kind and professional staff who helped me when I needed it the most. Everyone was amazing. All the nurses in ED were so lovely and had a great sense of humour. In SARA, a junior doctor named Julia ... was so patient. She didn't rush me, listened, helped guide the conversation and showed such empathy. When repeated back to us and later to the surgeon, her notes were perfect, she didn't miss anything. My surgeon was absolutely awesome, he explained everything in detail, was super approachable and answered all questions. What really blew me away was him calling me after I had been discharged to check up on me and see if I had any questions. His service was exceptional. All the nurses on Ward 5 were amazing and super kind, however one person who really went the extra mile was Brent. Even though Brent was very busy, his dialogue, humour, honesty and empathy really helped me to understand the procedure, how everything worked, and what my expectations should be post-surgery for recovery. He just helped me feel really at ease and was so kind. Brent is an absolute hero and I was so lucky to have him as my nurse. The anaesthetist and his team were hilarious, made me feel safe and not stressed, and the recovery nurses were super nice. The WellFood lady took the time to run through food options with me. Overall, everything and everyone was amazing. I always felt like a person, not a condition, and that people cared. The thing that meant the most and made the whole experience the best it could be under the circumstances, was the extra time people took, the smiles, and just the small things they did when they were all so busy. Please extend my thanks to everyone.

## Big Shout Out

**To: : Security Guard Mahfuz Rahman, Waipapa, Christchurch Hospital**

Mahfuz at the front entrance of Waipapa is keeping us safe. He is actually proactively checking visitors before they enter. As a staff member I really appreciate this and how he is confident enough to actually check everyone. Thank you.

**From: Medical Radiation Technologist Belinda Reiner**

#carestartshere



### Radiology, Christchurch Hospital

Everyone was very nice, very proficient.

### Ward 14, Radiology staff, Christchurch Hospital

I have nothing but praise for the staff who have been involved with my care. Special mention to the Radiology Department, Interventional Radiology and the staff on Ward 14. Thank you all for treating me with kindness and dignity.

### Gastrointestinal Endoscopy Unit, Christchurch Hospital

I had wonderful care from the team, thank you to Hayley Waller, Yanping Wang and Katie Johnstone.

### Wards B5 and A3, and WellFood, Christchurch Hospital

I recently spent three weeks on Wards B5 and A3. This was my first experience in hospital in my 64 years and I can't speak highly enough of the care and service that I received. Your nursing staff were outstanding, and nothing was a problem to them, their genuine concern was apparent, which as a patient was reassuring. The WellFood staff were amazing too. Your new facilities are first-rate and made my stay so much more bearable given no one wants to be in hospital. I would ask you to pass on my thanks to your teams involved in both wards.

### Plastics, Day Surgery, Burwood Hospital

I cannot say enough about the professionalism of all the staff involved. I was treated with kindness and respect.

### Gastroenterology, Christchurch Outpatients

I like the efficiency of the check-in and all the staff I have encountered are lovely.

## Big Shout Out

**To: Occupational Therapy Assistants, Burwood Hospital, Gaye Stevenson and Mitchell Gash**

Gaye and Mitch are amazing at engaging with the patients.

They go above and beyond when it comes to patient-centred care. They are both fantastic assets to the Older Persons Health Service.

**From: Michaela Glanville, Senior Medical Officer, Burwood Hospital**

#carestartshere

**Come down to  
Pak'nSave Wainoni  
174 Wainoni Road,  
Avondale, Christchurch  
Jabber Waka community  
vaccination event  
Protect what we**



**10 - 13 Nov  
1pm-7pm**



## TE HUARAHĪ HOU – A new journey

# Hillmorton facilities build progressing

Six months after laying the foundation on three buildings on the Hillmorton Hospital campus, it is exciting to see the new buildings are beginning to take shape. Built for Specialist Mental Health Services relocating from The Princess Margaret Hospital, the units are on track to open in November 2022.

Building 14 will house the Child and Youth Inpatient unit, Mothers and Babies and Eating Disorders Inpatient unit and Mothers and Babies Eating Disorders Outpatients.

Building 12 will provide inpatient services for extended treatment, similar to the services provided in the existing Seager Unit.

The Energy Centre will support the ground source heat pumps which provide energy to the buildings via heat exchangers.



Building 12 takes shape



An artist's impression of the final Building 12



Building 14



An artist's impression of the final Building 14



The building set to be the Energy Centre on the Hillmorton Campus

# STOP Pressure Injury Month – ‘Help me heal, check my heels’

*Letter to my healthcare team*

Hi,

My name is Zoe; I have to come into hospital soon. My friend Mary was in recently, but she got a nasty pressure injury to her heel.

She had to stay in hospital for a lot longer and her injury was very painful and took ages to heal. She had to use all her sick leave and hasn't been able to get back to work.

I have been told heel pressure injuries are one of the most common types of pressure injuries people in hospital get. Injury could delay my recovery by weeks, months, or become chronic and never heal. Heel assessment and early intervention is where you can really make a difference.

For my visit to hospital I will need some help.

What I will need from you:

1. To keep the pressure off my heels – using pillows or offloading equipment
2. Remind me to move around side to side, often, so the pressure is off my heels
3. Help me to check my heels twice a day
4. If I am complaining of sore heels, please help me check them
5. Stop me digging my heels in to get up the bed by raising my knees or using the bed knee brake function
6. If I'm in a chair make sure I can put my feet flat on the floor, this helps my bottom too!
7. My feet can swell, so its super important my footwear fits me well.

And finally, let me and my family/whānau know what we can do to help.

Thanks heaps,  
Zoe.

## Have you scanned in today?

Everyone, including all DHB staff, should scan in at work every day using the **COVID-19 Tracer App**.

Unite  
against  
**COVID-19**



# Ward 27 on the move!

Ward 27 (General Medicine) currently located on the third floor of Riverside, is moving to the ground floor Parkside on Thursday 18 November.

Taking over the old Acute Medical Assessment Unit (AMAU) site, the ward will be renamed Parkside Ground Medical.

Detailed in the [4 October CEO Update](#), the new location was recently upgraded with enhanced ventilation. Two large fans installed on the outside of the building work to draw great amounts of air from the patient areas, through HEPA filters and safely out into the atmosphere.

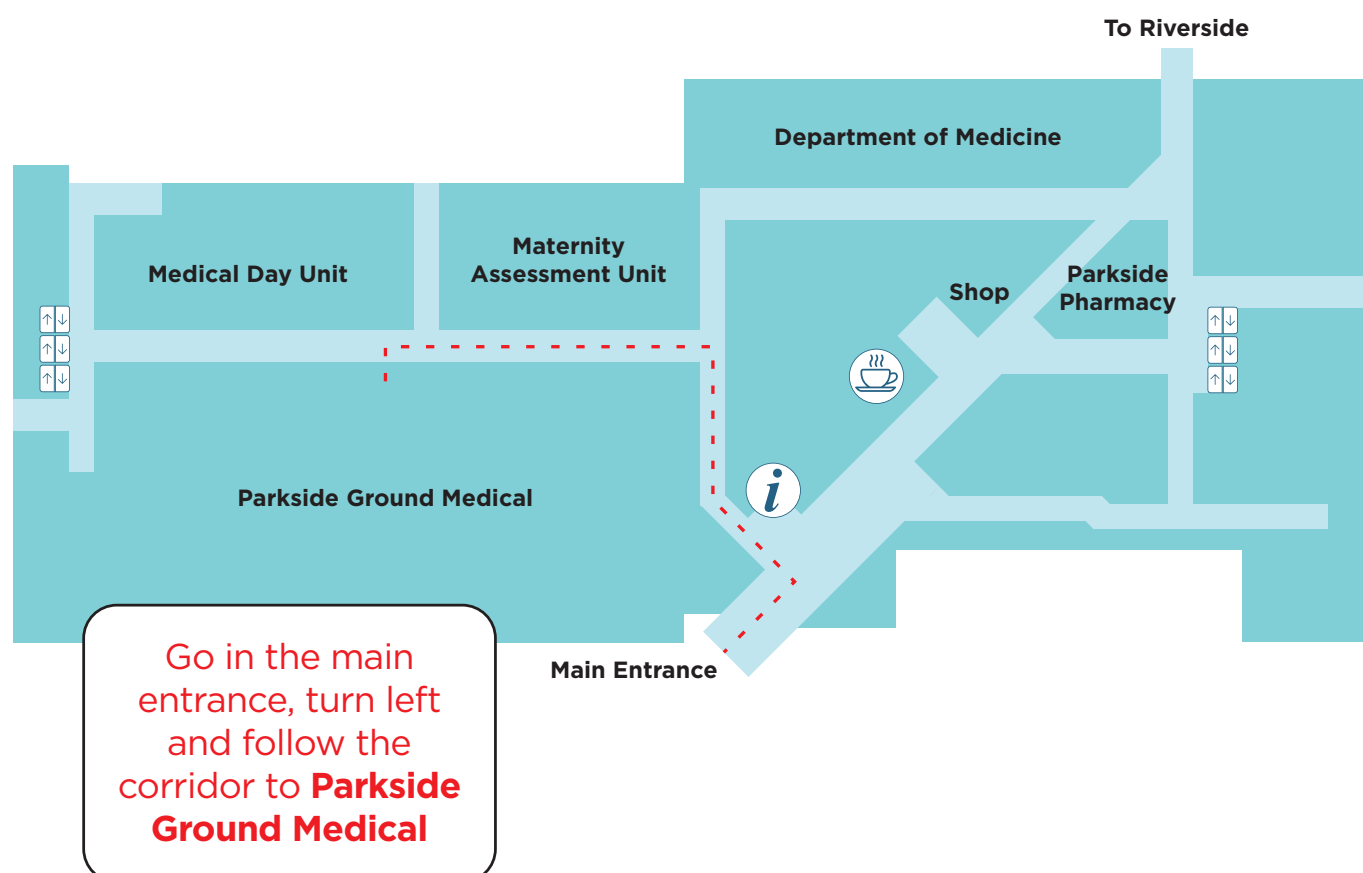
It also allows for three negative pressure rooms which are crucial for the safe treatment of patients with COVID-19. With the re-emergence of COVID-19 in the community, the negative pressure rooms will be ready to use if required prior to 18 November.

Parkside Ground Medical will remain business as usual but will also be the primary unit for treating any patients admitted with COVID-19 as their predominant health issue.

The move, coordinated by Charge Nurse Manager Donna Galloway and Nurse Coordinator Projects, Yvonne Williams, is described as a 'lift and shift' with the whole unit relocating.

Pre-move logistics have started to allow the teams to stock, fit-out and become familiar with, the new space. The move on 18 November will begin with the migration of equipment from around 8am, followed by any inpatients from 9am and should be completed by midday.

Patients, whānau and visitors are being kept informed and all signage will be updated in advance of the move.





# Highest result ever for staff hand hygiene across all our services

Congratulations to all our staff for their dedication to hand hygiene and keeping our patients safe with a result of 86 percent (the highest result achieved to date) for all areas in the Canterbury DHB Hand Hygiene Programme.

We have been above the Health Quality Safety Commission (HQSC) target of 80 percent since October 2017. For this latest audit period, the nationally reported areas will show that Canterbury DHB is just above the national average with 88 percent.

The latest Canterbury DHB Hand Hygiene Programme results as at the end of the audit period, July 2021 – October 2021, are 86 percent; this is across all services and 70 areas.

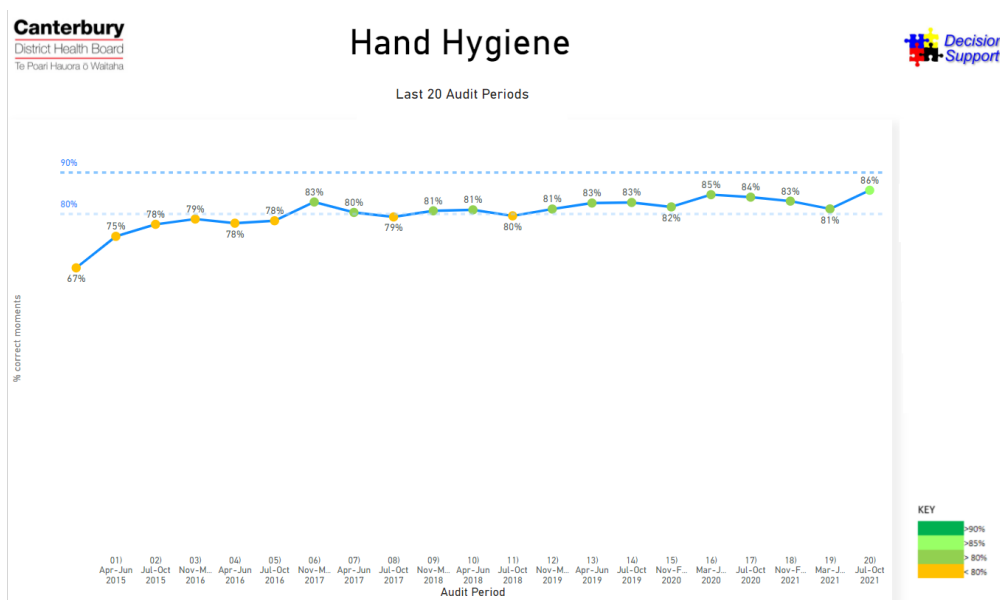
This reflects what our patients are telling us – that staff clean their hands prior to touching them 87 percent of the time.

Canterbury DHB's aim is to achieve greater than 90 percent overall. The goal for moments 2, 3 and 4 (see below) is 100 percent. Results achieved for the last audit period are:

- > Moment 2 before procedure (86 percent),
- > Moment 3 after procedure (92 percent) and
- > Moment 4 after touching patients (91 percent).

Director Quality and Patient Safety, Susan Wood says, it is especially important during this COVID-19 pandemic to see our hand hygiene results continue to improve, while we continue to increase audits across all our patient care areas, including the services in the Christchurch Outpatients building which joined the audit programme on 1 November.

"Whatever your role in health, hand hygiene is still the single most important thing you can do to prevent the spread of infection, 24/7, 365 days a year. During these times of the COVID-19 pandemic this message has never been more important."



**Check out the Hand hygiene dashboard with data updated daily on Prism. Go to 'Seeing our system', then click on 'Clinical Observations'.**

You can filter the data in these ways:

- > For each of the five moments:
    - » Before and after a procedure,
    - » before and after contact with patient,
    - » after contact with patient environment.
  - > Per locality: Canterbury DHB, division, ward, and trends per speciality, and clinics
  - > Trends for health care workers, such as Medical, Nursing/ Midwifery, Allied Health, healthcare assistants etc
  - > Hand Hygiene performed before and after glove use.
1. You can also see results from the patient experience questionnaires on Prism, see 'Patient Experience Dashboard' – in 'Seeing our Systems', 'Clinical Observations'.
  2. Did staff use hand sanitiser or wash their hands before they touched or examined you?
  3. If unable to walk unattended to the hand basin, when you needed to clean your hands, were you provided with a suitable alternative?

# Intellectual property (IP) workshop – looking for ‘hidden IP’

Part of the job of Canterbury DHB's Medical Physics and Bioengineering (MPBE) team is to partner with clinicians and patients, working together to co-develop customised equipment and software.

The aim of these product design collaborations is to provide practical, cost-effective engineering solutions to problems identified by clinical teams, says Clinical Innovation Director - Via Innovations Helen Lunt.

“Sometimes, the ideas that emerge from this ‘clinician plus engineer’ co-design process are so new and innovative, that they might benefit from intellectual property (IP) protection, on behalf of Canterbury DHB.”

An IP Strategy workshop for MPBE staff was held a month ago and was sponsored by Via Innovations, a business unit within Canterbury DHB. The workshop was led by Simon Rowell, an IP expert from Hamilton.

“He helped Canterbury DHB attendees look at several real-world examples of innovations from a fresh Intellectual property perspective, including asking them if they could work out where there might be ‘hidden IP’ in healthcare products,” Helen says.

A lot of potential IP features were identified within their own MPBE product designs. For example, the colour combinations in a 3-D printed gadget which aimed to make it easier for patients to use, showed innovative design thinking.



Medical Physics and Bioengineering team members attending the recent workshop on intellectual property

The MPBE team left the workshop with a fresh perspective on how to identify ‘hidden’ IP.

If you have an idea that you think MPBE may be able to help with, contact Team Leader Bioengineering, [Michael Sheedy](#).

If you have an innovative idea that you want to discuss with the Via Innovations team, contact Innovation Director, [Anya Hornsey](#).

all  
right?

IT'S  
ALL RIGHT  
TO NEED  
A HUG.



## Deans Ave pipe work update

Water pipes are being replaced along Deans Ave and one of the entrances to Canterbury DHB's Deans Ave Park and Ride is now blocked.

Large 'No entry' traffic management signs are placed across the closed entrance. The other access will remain open for entry and exit.

The water pipe renewal project will be carried out in stages and is expected to be completed by the end of March next year. Old water supply mains along Deans Ave, from Lester Lane to Bartlett St, are being replaced to future-proof the water network for the area.

Within the next two weeks, work will begin on the pipe installation in front of the car park.

## Festival of lights celebrated

Our recruitment team had a great time last week celebrating Diwali, known as 'The Festival of Lights'. Diwali is a joyful five-day festival and signifies the triumph of light over darkness, good over evil and the renewal of life.

The festival is celebrated by Indian communities around the world and food is a very important aspect of Diwali. The team finished its Indian inspired lunch with plenty of laughs and full tummies.



Some of the DHB's Recruitment team celebrated Diwali last week with a shared lunch. From left: Jo Clementson, Jenny Bailey, Daniel Bonnett, Tracey Sutherland, Steph Keene, Nila Gopal, Ritika Uniyal (event organiser), Kim Sletcher and Chenay Roux. Absent: Shannon Le Roux, Libby Brazier and Lisa Gray



The group enjoyed a selection of home-made treats



# Canterbury DHB Assisted Dying Policy and Access Agreement now available

The End of Life Choice Act, which offers assisted dying services to terminally ill people who meet the criteria, came into effect yesterday, Sunday 7 November.

Canterbury DHB has developed a policy and an access agreement.

For your reference, here are the links to the documents:

[Assisted Dying Policy](#) – controlled document number 2408769

[Access Agreement – End of Life Choice Act 2019](#) – controlled document number 2408838

## For context

The Ministry of Health is responsible for implementing the [End of Life Choice Act 2019](#) (the Act). This includes making any regulations, developing policy, and providing guidance to the health sector.

This is to ensure a nationally consistent approach and equity, regardless of location. The implementation and funding mechanisms have been set up to support delivery, largely in primary care and the community.

In the context of their DHB role, Canterbury DHB and West Coast DHB clinical staff do not take up positions as Attending Medical Practitioner, Independent Medical Practitioner or Psychiatrist Providing a Competency Assessment, as part of implementing the Assisted Dying Service on DHB time.

Clinicians with appropriate skills or qualifications can, however, voluntarily offer to provide parts of the service in a private capacity. To do this they need to apply to be on the SCENZ register. [SCENZ](#) is the national statutory body that will facilitate the implementation of an assisted dying service.

Health professionals working with patients and whānau are likely to be approached by someone wanting to know about assisted dying. These conversations may take the form of a direct request for assistance to die or because the person is considering it and wants more information. It is important health professionals are prepared to respond with respect and compassion if assisted dying is raised, regardless of their personal views.

More information can be found on the Ministry of Health's website under [End of Life Choice Act 2019](#).

## Further messages and information

These pathways in this link, produced by the Ministry of Health, are particularly useful:

- > [Care pathway for health practitioners \(not including medical practitioners\)](#)

Whatever your views on the Act, you must not influence the person making the request in any way. For this reason the DHB advises non-clinical staff to refer the person to their treating clinician.

Clinicians who are asked about assisted dying by someone who may be eligible should say that Canterbury/West Coast DHB clinical staff do not provide assisted dying services as part of their DHB role.

The SCENZ Group (Support and Consultation for End of Life in New Zealand Group) holds a list of doctors who provide assisted dying services. You can contact the SCENZ Group via 0800 223 852 to get the name and contact details of a doctor who can help you."

You can read about the process in more depth in The Act or find out more about the Act by completing the 'End of Life Choice Act: Overview' e-learning module on LearnOnline.

## Information and resources for the public and clinical and non-clinical staff

Other useful information for the public can be found on the Ministry of Health website. Further information will be available on the site from 7 November:

- > [End of Life Choice Act 2019 - Information for the public, updated July 2021](#)
- > [Te Tiriti o Waitangi and assisted dying](#)
- > [What is assisted dying?](#)
- > [Eligibility](#)
- > [Informed choice](#)
- > [SCENZ - The Support and Consultation for End of Life in New Zealand group](#)

# Cancer Society volunteer drivers to the rescue

With the re-emergence of COVID-19 in the Christchurch community, Canterbury Health Laboratories (CHL) needed extra drivers to help deliver the big uplift in COVID-19 swabs from the testing centres to the laboratory.

With most health-related activity continuing as normal in Alert Level 2, finding additional staff to support our routine pool of drivers was a challenge.

The idea of using volunteer drivers was discussed last Monday morning with Canterbury DHB Emergency Coordination Centre (ECC) staff and plans swung into action.

The Cancer Society provides a great volunteer driving service supporting oncology patients in Canterbury,

supplying nearly 5000 trips per year. Volunteer Services Manager for the Cancer Society Jane Condell was contacted by the ECC team and put out a request to all their volunteer drivers.

The response was overwhelming, says Rob Hallinan from ECC staffing.

"The phone didn't stop ringing for the rest of the day and we had all 15 shifts for the week filled by early afternoon. The volunteers have been incredibly generous with their time and we now have a database that we can call on for future requests."

CHL Operations and Commercial Support Manager John Osborne says the volunteer drivers have worked out brilliantly, providing extra capacity to support the usual courier drivers.



"They're already familiar with the requirements of a driving service which really helps in orientating the volunteers to the needs of our service."

Waiting for the result of a COVID-19 test can be an anxious time, and the drivers play a key role in helping us get test results out as quickly as possible, he says.

# White Ribbon Day – how to get and provide help

*\*Trigger warning\* This article discusses issues of violence against women, partners, children and family members.*

White Ribbon Day is 25 November and the theme of this year is 'Whiti te rama - Shine a light on violence prevention'. Physical, emotional, financial, psychological and sexual abuse exist in all sorts of families and relationships. It isn't always obvious or easy to identify, so White Ribbon aims to help people shine a light on both preventing violence and responding to it.

## How to help as a health professional

Adult victims of family violence are three times as likely to present to the Emergency Department as non-victims, and yet less than a quarter ever officially report the abuse.



Health professionals are uniquely positioned to identify and act on suspected family or intimate partner violence (IPV) but many are not sure what to do if a patient says 'yes' when they ask about it.

Training is available and the eight-hour course (see below) offers insight into the dynamics of intimate partner and family violence. It informs how to screen, identify and respond to family violence disclosures as well as child abuse and neglect.

Training is available on healthLearn

- › A [pre-learning module](#) completed at time of orientation
- › A comprehensive and mandatory [eight-hour training course](#) for all Canterbury DHB staff
- › Upon completion of the 8-hour course, [this refresher](#) needs to be completed every two years.

We must routinely screen for family or intimate partner violence. Victims don't usually initiate conversations about violence and abuse but when they are asked, they often share. It is important to use direct questions about specific behaviours, as this elicits more disclosures than general questions about home life.

If you suspect someone is a victim of family violence, then use the screening questions in the training to offer them an opportunity to disclose. If you have not completed the training, find someone in your team who has, or refer to your social worker for support. We have a six-step process in all DHBs to offer consistency in our approach to responding to victims of family violence.

1. Enquire and Identify
2. Validate and Support
3. Health and Risk Assessment
4. Safety Planning
5. Referral and Follow-up
6. Documentation

In the compulsory training, all these steps are covered to help build confidence in responding.

Health professionals are often viewed as safe people to talk to. Demonstrating a genuine, caring and non-judgemental attitude is critical and 'mana enhancing'.

### How to help as a friend or family member

Many people who are affected by IPV or family violence will confide in a close friend or family member but more than 40 percent report that they receive no support or help.

There are five key principles if someone shares their family violence history with you.

- › Let them know you believe them
- › Let them know you're glad they told you
- › Let them know you're sorry it happened
- › Let them know it's not their fault
- › Let them know you will help

### Where to get help if you're affected by IPV, domestic abuse or violence

- › Hey Bro 0800 439 276
- › Canterbury Men's Centre 03 365 9000 text: 022 302 4966
- › Stopping Violence Services for Males & Females 0800 478 778
- › He Waka Tapu 0800 439 252 text: 027 243 9252
- › Age Concern 03 366 0903
- › Victim Support 0800 842 846
- › 0800 Refuge 0800 733 843
- › Battered Women's Trust 0800 733 843
- › Te Whare Hauora 0800 117 474
- › Shakti Ethnic Women's Support 0800 742 584
- › West Christchurch Women's Refuge 03 379 0575
- › [www.areyouok.org.nz](http://www.areyouok.org.nz) 0800 456 450
- › Alcohol & Drug Central Coordination 03 338 4437
- › Alcohol Drug Helpline 0800 787 797
- › Enabling Youth 0800 478 778 text: 021 999 214

**Tiaki Whānau is the Child and Family Safety Service for CDHB.**

**We have a Child Protection Specialist Natalie Cookson, Family Protection Specialist Jolene Hunter and Paediatric Sexual Abuse Social worker Charmaine Norton who are available to discuss concerns and consult with, look at referral options and pathways as needed. Available normal business hours (internal: 81459).**

**Out of these hours for urgent follow up we have a social worker available in the Emergency Department or your allocated ward social worker for non-urgent follow up.**

Refer to one of the many support services for advice. You could help your friend/family member reach out for assistance and attend appointments with them as a support person if required.

### Where to get help if you're affected

There are professional support services (listed above) available for both the victim and perpetrator. It is important that both receive help to end the cycles of family violence, IPV and destructive relationships. Solicit the support of a trusted friend or family member because they want to help.

*"Asking for help doesn't make you weak – it reveals strength, even when you don't feel strong."*

Learn more about [White Ribbon Day here](#).



# Shining A Light on Child and Youth Mental Health

Māia Health Foundation has launched a six-week Shine A Light appeal as part of its mission to raise \$6 million for a modern, fit-for-purpose mental health outpatient facility for children and young people in Canterbury and we need for you to join us!

Our communities' tamariki and rangatahi are in need of some support. There has been a 140 percent increase in demand for child and youth mental health services in our region since January 2018.

Māia is committed to be part of the solution to make it better for patients, and for the staff who work in the Child Adolescent and Family Service, by raising funds for enhancements at a purpose-designed facility, in partnership with Canterbury DHB. The location is confirmed and detailed design is underway.

We would like to encourage Canterbury DHB staff to join us in fundraising \$300,000 over the next six weeks. Be part of a community that cares about child and youth mental health.

Give now at [shinealight.nz](https://shinealight.nz) and your light will shine twice as bright, thanks to the Rainbow Children's Trust who will match every donation, dollar for dollar.\*



Over the last five years Māia Health Foundation has raised more than 12 million dollars to help take Canterbury's health services from good to great.

For more information go to [shinealight.nz](https://shinealight.nz) or click on the QR code below.

\* Thanks to the Rainbow Children's Trust and other generous donors, donations will be dollar-matched up to a total of \$150,000

**Please give today.**

**Shine A Light for our young people and our community's future.**

And remember, if you give today your donation will be doubled. For every dollar we raise as part of this year's Shine A Light campaign, Rainbow Children's Trust will match it\*.



# Canterbury Healthcare Challenge 2021

## – teamwork begins

The 2021 Canterbury Healthcare Challenge is well and truly underway.

Four teams made up of health professionals and students from across Canterbury DHB, tertiary institutions and the wider health community, will come together to present their patient management plan in competition for prizes on **Wednesday 17 November, 1:30-3:30pm at Manawa.**

The teams have been given a complex patient scenario (an abridged version of which is right) that is not dissimilar to those they may encounter as a health professional or student. Each team has been working collaboratively over the past few weeks to create a management plan for the patient. They will present this to a panel of judges who will assess their plan, how well they worked as a team to develop it, and their overall presentation.

Te Papa Hauora Health Precinct is generously supporting this event.

## Meet the teams

### Med Zepplin

Caitlin Davenport (captain) .....Dietitian  
 Eden Wilson-Suttie .....Psychology Student  
 Kate Gillies .....Enrolled Nurse  
 Angie O'Neill .....Social Worker  
 Vinny Karunaserera .....House Officer  
 Laura Pidcock .....Pharmacist  
 Team Mentor: Medical Specialist Maggie Meeks

#### What motivated you to choose your team name?

Actually, we couldn't come up with any names ourselves, so we Googled 'funny medical team names' and this is the one everyone agreed on!

#### What gives your team members the winning edge?

Firstly, we are mildly competitive and secondly, we have been bribing the judges.

#### Do you have a secret weapon?

We can't reveal that at this stage I'm afraid.

#### Can you describe your team's work process?

We are meeting in person one or two times each week.

### Canterbury Healthcare Challenge 2021 patient scenario

Teams were introduced to a 67-year-old Māori male named Eddie who lives in Ōtautahi (Christchurch) with his wife but has whakapapa to Rotorua. Their adult tamariki all live in Ōtautahi and their mokopuna all attend the local kura.

Eddie has been feeling slightly chesty over the past several days, coughing up increasing amounts of brown sputum and increasingly short of breath. He often coughs up sputum in the morning, but this is usually cream coloured. He was treated with Augmentin for a lower respiratory tract infection by his GP one month prior. His GP also carried out a COVID-19 test which came back negative. Eddie has had one vaccination and is due to get his second in a week or two. He is vaccinated against the flu.

Recently Eddie was at home when he became very dizzy and light-headed while standing at a work bench in his garage. This caused him to fall awkwardly onto the concrete floor, landing heavily on his left shoulder. His wife called 111 and the paramedics became concerned when Eddie mentioned he had some chest pain in addition to his shoulder pain, so he was transported to the Emergency Department.

In ED a thorough work-up and tests were carried out. It was decided to admit Eddie into a General Medical ward.

Teams now need to work together to come up with a short and long-term management plan for Eddie and present this to a live audience and judging panel on Wednesday 17 November.

It has been a wee bit challenging to align our schedules. Obviously, we've started everyone on an HPE diet and Ensure Plus BD between meals to boost our cognition. Otherwise just eight-hours sleep and daily 10km runs.

#### Does your team have a motto?

Second is first loser.

#### What would winning this mean to your team?

Everything (see above)!

## Mahi Tahi

Sadhana Ravichandran (captain) .....Physiotherapist  
 Emily Sycamore .....Dietitian  
 Alexandra O'Brien .....Social Worker  
 Ange Huor .....House Officer  
 Ajay Patel .....Pharmacist  
 Georgia Brownlee .....House Officer  
 Prim Sadindum .....SLT Student  
 Team Mentor: Pharmacist Jess Allison

### What motivated you to choose your team name?

Mahi Tahi is 'work together' in Te Reo Māori. We wanted the name to resonate with our team spirit and embrace the cultural value of this patient in the case study. The more we say positive words and more Te Reo we utilise in our daily life, the more we embrace and involve this in our work ethic and patient care.

### What gives your team members the winning edge?

The speciality of this team is our different experience levels and the diversity of our work environments; some of the team members work in the community and some work in the hospital. It allows us to reflect on the case holistically and discuss how we can empower the patient with a strong management plan.

## Daffodils

Lea Dumaine (captain) .....Physiotherapist  
 Tayla McDonald .....Occupational Therapist  
 Ash Singh .....Pharmacist  
 Guiping Xiao .....Social Worker  
 Olivia Day .....Enrolled Nurse  
 Tylie Cridge .....Radiographer  
 Juliette Phillipson .....House Officer  
 Team Mentor: Nurse Educator Lisa Frame

### What motivated you to choose your team name?

Just like this flower that blooms in the cold before most other flowers, we aim to bring warmth and care to our community despite challenges. We also liked that it is so emblematic of our Christchurch campus.

### What gives your team members the winning edge?

Having team members across campuses and across wards will help us to think holistically about the patient and his needs.

### Do you have a secret weapon?

Resilience! There will always be things that are going to hold us back, so it's about not giving up. Trying to be proactive to problem solve when required and reminding ourselves of our end goal.

### Can you describe your process as a team?

The hardest challenge is to make a time to meet up because everyone is so busy. Some strategies such as using polls, using calendar invites, Zoom and using the Microsoft Teams have been very helpful! So far, we have brainstormed our idea and questions, so the next step is conceptualising a solid and flexible management plan and preparing our presentation.

### Does your team have a motto?

Teamwork makes the dream work. This resonates well with Mahi Tahi.

### What would winning this mean to your team?

It's quite powerful to have a group of people with various skill sets putting our minds together to think about this case as it allows to grow and learn out of the fast-paced work environment, but it would be amazing to win! However, it's not just about winning, it's more about being proud of a really strong management plan that we created as a team.

### Do you have a secret weapon?

I don't know about secret, but Microsoft Teams has been a great ally!

### Can you describe your process as a team?

We are meeting both in person and via video calls as we have members in different campuses. As far as physical training – the walking around trying to find the right meeting room has increased our step count!

### Does your team have a motto or mantra?

"Can you guys hear us?" That's definitely our catch phrase when trying to connect via video calls!

### What would winning this mean to your team?

Winning would be a great recognition of the time and dedication we've put into this.



## In Stitches

Claire Swarbrick (captain).....Physiotherapist  
 Laura Bates.....Registered Nurse  
 Isla Foote.....Dietitian  
 Tanya Jephson.....Social Worker  
 Robin Page.....House Officer  
 Jessie Sims-Johns.....Pharmacist  
 Arshi Nadeem.....Nursing Student  
 Team Mentor: Clinical Nurse Coordinator Jane Evans

### What motivated you to choose your team name?

Tanya our social worker came up with many great suggestions and we voted on it as a team. We liked how it was both relevant and funny.

### What gives your team members the winning edge?

We're all vaccinated.

### Do you have a secret weapon?

We plan to use our psych nurse to restrain the speakers from the other teams, so they can't talk and therefore we win by default.

### Can you describe your process as a team?

We enlisted in the New Zealand SAS as a team to help prepare but had to drop out of selection half-way through because our pagers wouldn't stop going off.

### Does your team have a motto or mantra?

It's fun to stay at the YMCA.

### What would winning this mean to your team?

Winning this event would mean that we won.

The teams will share their plans for judging at a public presentation on Wednesday 17 November between 1:30 and 3:30pm in Manawa.

This is an excellent multidisciplinary team effort. We hope you can join us on the day to support your colleagues.

If there is a change in COVID Alert Levels, this event may move online.

## DR LUCY HONE'S 4 STRATEGIES FOR TOUGH TIMES

ALL RIGHT?

Mental Health Foundation  
mauri tū, mauri ora

GETTING  
THROUGH  
TOGETHER  
whāia i tōu te pū tōwhiri

### ACCEPT WE LIVE IN UNCERTAIN TIMES

It's hard and against our  
basic human nature... but  
things will return to normal

### BEING HOPEFUL CAN BRING IN SOME LIGHT

Simply look overseas to see life  
will not be this way forever

### KNOW THINGS WILL BE DIFFERENT AND NEXT YEAR WILL BE A NEW YEAR

### GIVE YOURSELF A BREAK

# One minute with...

## Brodie Spang. Registered Nurse (RN), Emergency Department (ED), Christchurch Hospital



### What does your job involve?

I could write this entire article about what we do in ED! In summary, as an ED RN we are usually the first person to lay eyes on a patient (adult, child or baby). We triage and provide initial care, and initiate appropriate investigations, treatment and referrals in liaison with the multi-disciplinary team. We are constantly assessing, and re-evaluating, patient needs, and escalating care as required. From here we facilitate transfer to an appropriate location, whether that be home, to a ward or an intensive care setting. Along the way we advocate for our patients and their whānau, provide support, empathy, reassurance and education as required.

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

I always wanted to work in an acute setting. I was fortunate enough to have the final placement of my degree in ED. I felt like I really found my place and was stoked to be asked to come back.

### What do you like about it?

I really enjoy the variety and fast pace as well as the autonomy nurses are able to have in the area. I also have to mention the team or rather, 'family'. ED is definitely a team sport and I couldn't ask for a more supportive network.

### What are the challenging bits?

My introduction to nursing wasn't exactly gradual, I was on placement during the March 2019 attacks. I then spent a fair bit of time in the COVID-19 'red zone', caring for people considered 'high risk' due to symptoms/contacts during Level 4 lockdown. Also, we often care for people and their whānau on their worst days; after tragedy, poor prognosis or unexpected events. There are definitely a few challenges, but I didn't choose to be a nurse, or to work in ED because it was easy!

### Who inspires you and why?

My parents. They are both such hardworking genuine individuals, I'm proud to say I got my work-ethic from them. I'm inspired daily by the ED family around me. I really do feel blessed to be working amongst such an integrated team with such intelligent, kind individuals.

### 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?

I believe these values should be at the heart of every nurse. We have the privilege of working with very vulnerable individuals, I believe it is imperative that everyone is met with empathy and respect no matter the situation. As nurses we also carry a lot of responsibility, as people trust us. I believe this shouldn't be taken lightly.

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

I trained in mixed martial arts for 12 years, achieving my second-degree black belt. Following this I focused on teaching both adults and children, but most enjoyed working with the younger ones.

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

Surrounded by family, at Mum and Dad's house where I grew up.

### What do you do on a typical Sunday?

Spend time with my partner, family and friends. Go to the gym or for a walk. Relax.

### What's your favourite food?

I actually don't have a favourite but I'm a sucker for anything potato-based; chips, roast, mashed potato, you name it!

## Something For You



Something for You is the Canterbury DHB employee benefits programme. The deals offered are from the Canterbury business community to say thank you for all that you do.

### Torpedo7

#### Torpedo7 Friends and Family Promotion

From 3-16 November you and your friends and family can get up to 50 percent off a huge range of gear from Torpedo7 online or instore (take a copy of the flyer and your Canterbury DHB ID card). See more information and the online code [here](#).

### OPSM

**OPSM** are offering three exclusive offers to Canterbury DHB staff for Diabetes Awareness Month.

1. \$100 off prescription glasses and prescription sunglasses. Minimum spend \$350.
2. 20 percent off\* contact lenses. Minimum purchase three months' supply.
3. Upgrade to free Ultra-Wide Digital Retinal Scan when you purchase a standard eye test.

Offers are valid from 01/11/21 and ends 21/11/2021. See [here](#) for T&C and codes.

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## Free training at Canterbury Medical Library: demystifying the OVID databases

Are you spending too much time searching databases and not getting the results you expect or want?

Come along to this session for tips on searching the OVID databases more efficiently and effectively to save time when finding information for work or study. This is a great opportunity to find out about any of the OVID databases.

When: Wednesday 10th November 2021, 2.30 – 4.00pm.

Where: Training Room, Canterbury Medical Library, 6th Floor, University of Otago, Christchurch

Booking: Email us on [librarycml.uoc@otago.ac.nz](mailto:librarycml.uoc@otago.ac.nz) stating the name and date of the session

Note: While this session will be held in person, attendees are asked to wear a mask and to observe physical distancing, due to the current COVID Level 2 restrictions. **Places for this session are restricted to seven, so bookings will be accepted on a first-in first-served basis.**

If this date and time doesn't suit, or you would like training in other library resources for yourself or for a class, then please contact us to discuss by email, or phone 364 0500, or extension 80500.

We look forward to hearing from you!

From the Team @ Canterbury Medical Library



Professional Development  
Opportunity for GPs and  
nurses

## Treatments for Upper Gastrointestinal Tract Cancers

*A free 45 minute webinar by  
Dr Sharon Pattison, Dunedin  
Medical Oncology Specialist  
and Academic*

**MON  
15  
NOV** | **7.30am**



Dr Sharon Pattison is a Senior Lecturer and Medical Oncologist based in the Departments of Medicine and Pathology at the University of Otago, Dunedin.

Her clinical and research interests are gastrointestinal and neuroendocrine cancers, with particular interests in the variability seen at clinical, histological, and genomic level, and how this variability influences patient outcome.

Sharon is a member of the Cancer Society New Zealand Scientific Advisory Committee.

<https://www.otago.ac.nz/healthsciences/expertise/Profile/?id=2352>

<https://gicancer.org.au/news/dr-sharon-pattison-awarded-research-fellowship/>

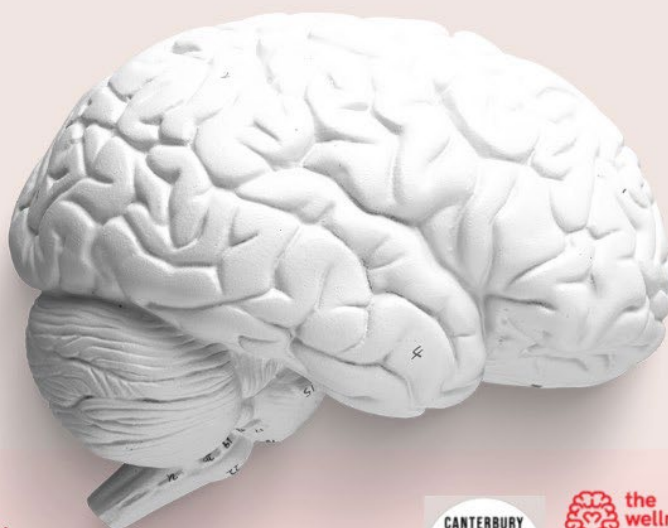
**Register here**



# THE MISSING LINK

A CONTEMPORARY, SCIENCE BASED APPROACH TO  
MENTAL HEALTH & CHRONIC ILLNESS


**BOUGHT TO YOU BY THE CDHB YOUTH ADVISORY COUNCIL**



## **SPEAKERS:**




**BIANCA SMEEKES**

 [neuro.spark](#)



**LIBBY RAINER**

 [the\\_wellnessplatform](#)



**8TH DECEMBER 2021  
ALDRSGATE CENTRE  
6.30 - 8.30PM  
\$10 PER TICKET  
BOOK VIA HUMANITIX**