



In 37 weeks the first patients will be moving into the new wards at Christchurch Hospital, Hagley – formerly known as the ASB/Acute Services building

This will be one of the most complex hospital moves ever undertaken in New Zealand. And the plan is to move in over a nine-day period, with the first patients moving into the new facility from Monday 18 November, and the final moves scheduled for Tuesday 26 November.

The countdown is well and truly on with only 259 days to complete construction of the building itself, the link corridor joining Hagley to the existing Christchurch Hospital Campus, and the sealed drop off/ mobility parking area where the old temporary outpatients building used to be located.

And what is not so obvious is the detailed planning that is now underway. From the logistics of migration planning, clinical cleaning, orientation and training, to new ways of working. Then there's organising all of the back-of-house things such as laundry, linen, waste and delivery of supplies, pre-stocking, infection control, air quality testing, paper-lite and 'dumping the junk' and how will things work once most services move to the new facility, with a rooftop helipad.

While there are 15 people working on migration planning, for the remaining 100+ people involved in the various governance, migration and workstream groups, this



The inside of Christchurch Hospital, Hagley is starting to take shape – this is the view from one of the patient rooms

planning is on top of business as usual, so thank you in advance for the work that will be needed to ensure a smooth transition.

We are planning a formal blessing of the building along with opportunities for staff to tour the facility and a public open day. Dates will be confirmed closer to the time.

Check out the photos showing progress of this new facility on page 8.

If you have any questions or would like more information, get in touch via itsallhappening@cdhb.health.nz.

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Prime Minister and Minister of Health visited Hillmorton last Thursday to announce increased funding for new facilities for specialist services currently located at The Princess Margaret Hospital

Our Specialist Mental Health Services turned on a warm welcome for the Prime Minister the Rt Hon Jacinda Ardern, and Minister of Health the Hon David Clark last Thursday. They were in town to announce the approval of around \$79 million funding for two new facilities to be built on the Hillmorton site.

The Prime Minister's announcement gave the go-ahead for two multipurpose buildings – an Integrated Family Services Centre including purpose-designed facilities to meet the needs of the Mothers and Babies service, Eating Disorders and Child and Adolescent inpatients, and a separate High and Complex Needs Unit for people needing longer term rehabilitation.

The announcement provided a welcome boost for our Specialist Mental Health Services staff and it's also a boost for our patients, both local and regional, who will benefit from the improved facilities.

These two buildings will be the first steps in a full remodelling of the Hillmorton campus – a process which will, over the coming years, transform our mental health services. With one in five Cantabrians accessing mental health support, this funding and the new facilities it will allow us to provide is fantastic news for the wellbeing and mental health of Cantabrians.

For the staff currently working in outdated buildings at The Princess Margaret Hospital site, these new facilities can't come soon enough. I'm thrilled that the budget has been increased.



Minister of Health the Hon David Clark

The Prime Minister enjoyed her time meeting staff involved in these projects and heard first-hand about some of the design challenges. A special thanks to Specialist Mental Health Services consumer advisor Linda Smith who has been involved in the development process for these new buildings since day one. Linda was selected to cut the commemorative cake with the PM – a task she handled with aplomb.

New facilities will support staff to meet the increased demand for specialist mental health services

The demand for Canterbury's mental health services has continued to grow in line with predictions based on international post-disaster research. Over the past eight years, our specialist mental health services have been challenged by more people needing our help than we have physical space for – and our ageing facilities are no longer fit for purpose. This has created ongoing issues.

Our staff are supporting 700 more people every



Prime Minister the Rt Hon Jacinda Ardern pictured with staff from Specialist Mental Health Services involved with planning the new facility

month in our adult general mental health service than pre-quake, and 450 more people every month in our Child and Youth mental health service.

In the past year 32,341 people received mental health support from across our health system. Almost half of this group have required our specialist mental health services in the past year. This equates to 3,893 children and adolescents along with 9,899 adults and 2,419 older people accessing our mental services. This high demand has put considerable strain on our existing facilities and on staff delivering and managing our mental health services.

While design work continues through the various stages on these two new buildings, developing a business case for a new acute adult inpatient service to replace Te Awakura is next on the drawing board and will be progressed this year.



Prime Minister the Rt Hon Jacinda Ardern and Specialist Mental Health Services consumer advisor Linda Smith cutting a cake as part of the funding announcement



Artist's impression of the Integrated Family Services Centre to be built on the Hillmorton site



Artist's impression of the High and Complex Needs Unit for the Hillmorton site

Measles outbreak

We're officially into autumn and teams are busy with winter planning to help keep the flow of patients through primary care and our hospitals and health centres. At this time of year we are usually refining our influenza immunisation campaigns for staff and the public, however, at present, the focus is on a significant measles outbreak.

Thanks to the team at Community and Public Health, our Wellbeing Health and Safety team, Infection Prevention and Control, the Canterbury Health Laboratory staff and countless others who have been kept extremely busy over the past week with the current measles outbreak.

This week we are focusing on increasing public awareness of the symptoms and letting people know what to do if they or someone in their family becomes unwell.

Check the fact box on page 4 and please share this information with your colleagues, friends and family. Immunisation through two doses of the MMR vaccine is the only sure protection from measles, which is so contagious that 90 percent of unimmunised people who come within two metres of an infectious person will catch measles. And it's so much more than spots or a rash. Measles is a serious, sometimes life-threatening disease.

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

David Meates
CEO Canterbury District Health Board

Measles – what you need to know

There are currently 7 confirmed cases in Canterbury, with the number of staff and public having been exposed now numbering in the hundreds. It's now simply not possible to confident we have been able to identify and follow up everyone, so we are keen to increase awareness of the signs and symptoms of this incredibly infectious disease.

To date four of the confirmed cases are believed to have contracted measles in Rangiora but a number of the cases have also been treated in Christchurch Hospital. There are now two cases in Christchurch that appear to be community-acquired.

General information on measles

People who contract measles are infectious from five days before the onset of the rash and should stay in isolation as soon as they suspect they may be infected until five days after the rash first appears. If you have symptoms consistent with those below you should stay home from work and have no contact with unimmunised people. If others in your household are unimmunised, they need to stay in isolation too for at least 14 days from likely first exposure and seek further advice before ending their period of isolation.

Symptoms of measles include:

- › A respiratory type of illness with dry cough, runny nose, headache
- › Temperature over 38.5°C and feeling very unwell
- › A red blotchy rash starts on day 4-5 of the illness usually on the face and moves to the chest and arms.

More information about measles is available at www.health.govt.nz/your-health/conditions-and-treatments/diseases-and-illnesses/measles



The key messages for the public who ask questions about the outbreak are as follows:

- › Measles is present in Canterbury
- › It is a serious and very infectious disease. If you are exposed and you aren't immune, you will get measles
- › Anyone born after 1969 who hasn't received two doses of the MMR vaccine isn't fully protected and is likely to be vulnerable to infection. People born overseas may also be vulnerable
- › If you are unsure whether you are immune, contact your general practice team for advice – for those eligible for funded healthcare in New Zealand the vaccination and the appointment is free
- › There is no cure. The only sure protection is through two doses of the MMR vaccine
- › If you think you have measles call your general practice team for advice. Do not visit your general practice, a pharmacy, or the hospital unless it is an emergency.
- › Stay at home if you are sick and isolate yourself from contact with anyone who doesn't have full immunity. Don't share finger food, cups, plates or cutlery with anyone else. Cover coughs and sneezes and wash or sanitise your hands often to reduce the chances of measles spreading.



Bouquets

Ward 24, Christchurch Hospital

Thank you for your kindness and professional care of me when I was in Ward 24. You all worked so hard and cheerfully and anticipated the smallest needs of everyone in the ward. My speech is a little slower but I'm enjoying the beautiful weather and walking each day. I appreciate everything you did to help my recovery.

Natalie, Outpatients, Christchurch Hospital

I wish to thank Natalie who was very caring and loving to me today. I have got macular degeneration in my eyes and I have severe arthritis and Natalie went out of her way to assist me. Thank you very much.

Emergency Department (ED), Christchurch Hospital

I would like to thank the staff for taking care of me. From the triage nurse, to the administrator who booked me in, and the ED health professionals Roxie and Josie and Emma. The knowledgeable and efficient care, the professionalism and kindness that I experienced was outstanding. Thank you for your time.

Zara, Ward 21, Christchurch Hospital

I am very pleased with how the nurses in Ward 21 looked after my two-year-old daughter when she broke her arm. One nurse in particular was absolutely amazing – her name is Zara.

She looked after my daughter in the afternoons and evenings. Zara was extremely friendly, but what stood out the most was her level of compassion for our situation. When my daughter was upset and sore, Zara would take the time to also ask me how I was doing, and if I needed any help at all. She went above and beyond and I'm extremely grateful. As well as caring about my daughter's health, Zara also ensured my daughter was smiling, comfortable and that both of our needs were met.

Pippa, Grace, and Katrina, Ward 28, Christchurch Hospital

I was in Ward 28 and would like to thank Pippa, Grace, and Katrina for the kind and caring manner in which they treated me. These ladies are an asset to your team. I would recommend them for any medical team. Thanks again ladies for your support.

Maternity, Christchurch Women's Hospital

I transferred to Christchurch Women's Hospital from Lincoln Maternity and ended up with an emergency caesarean. Everyone who cared for me was so professional, calm and caring. Special recognition should go to my awesome midwives: Sue, Yana, Steph and trainee Sophie. Thank you for making what could have been a really stressful experience into a nice one.

Emergency Department (ED), Cardiology Ward 12 and Theatre, Christchurch Hospital

I would like to thank the staff of ED, Ward 12 and Theatre who looked after me with such care and professionalism during a recent admission. They are skilled and efficient but above all focused on the patient and their needs and concerns. Despite the awful pun, I would like to say thank you from the bottom of my heart.

Emergency Department, Christchurch Hospital

I had to bring my partner to the Emergency Department due to a serious home injury. The care given by firstly Nurse Ryan was just unbelievable – caring, professional, reassuring, just world class, and I would like you to please ensure he receives our thanks. Also the Dutch doctor and a senior Chinese doctor, both very professional and we were so lucky that we had them looking after us.

George, Birthing Unit, Christchurch Women's Hospital

My wife and I had our first child here. Our midwife Di Cooke asked if we would be comfortable having a student. We said "yeah why not, they have to learn somehow", and so we got introduced to George Clarke. This was his first birth introduction and he was an absolute legend and really

encouraged and praised my wife on the good job she was doing. I think it's important to give positive feedback as generally people always advise of negative stuff and miss the positive. I hope this gets passed onto George and I hope he becomes a GP so he can be our family doctor haha! All the best George.

Medical Day Unit, Christchurch Hospital

Many thanks to the fantastic staff, nurses, administrators and hospital aides of all kinds, especially Carol and Helene. Wonderful service from kind, generous and helpful people. A special thanks to Sharon and her team for being open on public holidays. Doubly exceptional service.

Emergency Department, Christchurch Hospital

The staff were very friendly.

Gastroenterology Day Ward and Interventional Radiology, Christchurch Hospital

Thank you to the team who looked after my daughter. We experienced so much kindness, gentle hands, intuitive care and professionalism that I am extremely grateful. A special thank you to nurses Thysje and Cherie, who made our pathway flawless.

Eye Outpatients, Christchurch Hospital

The service given to me at the Eye Clinic today was outstanding.

Ward 14, Christchurch Hospital

Fabulous nursing staff, really understanding and informative of my condition. Couldn't have wished for a more empathetic group of nurses.

Bone Shop, Christchurch Hospital

We had our first experience at Christchurch hospital yesterday, when my seven year old daughter needed to attend the Bone Shop. Sam was the doctor who saw us, his calm friendly manner put us both right at ease, and I was super impressed that every time he touched my daughters

arm he asked her permission first. He included her in all the discussion, and asked her if she had any questions. The nurses who put the cast on were fantastic too, all in all it was a great experience. Thanks.

Claire Marquet, Day surgery, Christchurch Women's Hospital

I recently had day surgery and received lovely support from a nurse afterwards. I felt her manner was very caring, kind, attentive and informative. I was very thankful for her kind care and feel she should be praised and recognised. Her name was Claire Marquet.



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 a non-staff member and you want to subscribe to receive this newsletter every week please [subscribe here](#).



The Library

Browse some of the interesting health-related articles doing the rounds.

[“Cervical cancer detection by DNA methylation analysis in urine”](#) – This study looked at testing urine as an alternative cervical cancer screening approach to conventional cervical scrapes. The results showed good agreement in the results of both screening tests and has the potential to remove barriers to screening by making it less invasive and easier for women. From *Nature*, published online: 28 February 2019.

[“Antibiotic management of urinary tract infection in elderly patients in primary care and its association with bloodstream infections and all cause mortality: population based cohort study”](#) – The results of this study found elderly patients with a urinary tract infection had better outcomes when treated with immediate antibiotics, compared with those who received no antibiotics or whose antibiotic treatment was deferred. From *British Medical Journal*, published online: 27 February 2019.

[“The relationship between anxiety symptom severity and problematic smartphone use: A review of the literature and conceptual frameworks”](#) – While it acknowledges the advantages of smartphones, this article looks at the problematic use of smartphones, defined as the ‘excessive use of a smartphone with accompanying functional impairments in daily living, and symptoms resembling those found in substance use disorders.’ From *Journal of Anxiety Disorders*, published online: March 2019.

If you want to submit content to **The Library** email communications@cdhb.health.nz.

To learn more about the real-life library for Canterbury DHB:

- › **Visit:** www.otago.ac.nz/christchurch/library
- › **Phone:** +64 3 364 0500
- › **Email:** librarycml.uoc@otago.ac.nz.



Facilities fast facts

Christchurch Hospital, Hagley



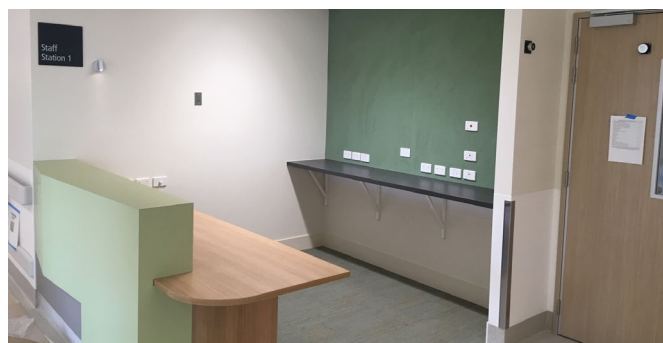
A view of a staff station in Ward B6



Level 1 – an Intensive Care Unit bedroom with “pendants” for ceiling-mounted clinical equipment



Ward A7 – a staff station looking towards paediatric ward rooms



A staff station in Ward A3



Above: A view from Level 7 of the ambulance / drop-off area being built on the site of the old Hagley Outpatients building, with Christchurch Women's Hospital on the left
Left: A view from Level 7 showing the Link to the existing hospital under construction



A view along the corridors in Ward A3



Level 1 – Intensive Care bedrooms on the left, with medical equipment bays on the right



Rhapsody – The glue that keeps our electronic systems together

Rhapsody is a healthcare-focused integration engine, helping different software systems communicate with each other.

Rhapsody is utilised by public and private hospitals, health systems, vendors, public health departments and government organisations across the globe. It is used as the back-end communication tool that allows us to share patient data between the Ministry of Health and health providers such as DHBs, communities or other primary health organisations.

In simple terms, it is the glue that keeps all of our systems talking and working together so we can see the right data for a patient in the right place at the right time.

If you've ever wondered how patient updates are made in a patient management system such as the South Island Patient Information Care System (SI PICS), or how test results from the likes of the New Zealand Blood Service can be instantly visible in a clinical system such as Health Connect South, the answer is probably Rhapsody.

Rhapsody is often referred to as a 'messaging service'. A message can be the notification of an event, such as, 'patient being admitted', a patient's details being updated, a document, or a single laboratory result.

The information that moves through Rhapsody can be broadly categorised into:

- › Patient demographics – who are you?
- › Patient journey – where are you?
- › Observations – how are you?

The management and monitoring of the data flow is an important function of ISG, with the Rhapsody team constantly monitoring all the different connections and data to make sure everything is working optimally. This team provides troubleshooting as soon as systems connections or interfaces are showing signs that they may not be fully operating at the expected level.

Right: Business Systems Analysts Jade Mackay and Arul Reddy checking the Rhapsody dashboards

The ISG team is working to improve the way Rhapsody works for Canterbury DHB as it is a key part of how our applications communicate with each other. We've commissioned work to understand the ways in which we can improve: to both reduce the likelihood of outages and to allow us to change faster, more safely.

As part of this work, we are moving the computers that run Rhapsody into the cloud so that we have the ability to quickly recover in the event the data centres that host Rhapsody are unavailable. We expect this work to be completed this year as part of our cloud transformation project.



Key facts:

- › There are seven production servers dedicated to Rhapsody.
- › Data is shared and connected with all the DHBs in the South Island and many in the North Island.
- › More than two million messages are sent and received each day.
- › Hundreds of applications are connected within the DHB and externally, too.



New Zealand makes a noise about the 'silent epidemic', hepatitis C, with a national campaign

In 2016, the World Health Organization announced its Global Strategy on Viral Hepatitis with the goal of eliminating hepatitis B and C by 2030.

New Zealand signed up to this, along with 193 other countries. PHARMAC's recent funding of Maviret, a direct-acting antiviral drug that can treat all six genotypes of hepatitis C (hep C) and with a cure rate of over 95 percent, is a big step towards New Zealand achieving this global goal.

Last week, the Health Promotion Agency (HPA) launched a national hep C awareness campaign, including a website (www.getHepCtested.co.nz), highlighting some of the main risk factors for infection, what can happen if hep C is left untreated, and encouraging people to see their GP to get tested.

There are approximately 50,000 New Zealanders who have hep C, but half are undiagnosed – the group the HPA is particularly targeting. The campaign will run until the end of May this year. Canterbury DHB will be sharing material and promoting hep C awareness over the coming months in support of HPA's campaign. Click on the following link to look at and share [the HPA's hep C resource material](#).

Canterbury DHB has been a leading centre in hep C research for many years and continues to do its part in finding and treating people with hep C. Since July 2016, a multidisciplinary team, including Canterbury DHB staff from Gastroenterology and Infectious Diseases and community service providers, has been leading a South Island Alliance Hepatitis C workstream for the Southern Region as part of the elimination strategy.

The success of this approach has been proven by Canterbury having the highest numbers of patients treated in the country.

The team is working with laboratories to reach patients who are hep C positive but haven't had treatment or haven't been followed up. To promote diagnosis the team has visited General Practice teams to raise awareness of hep C and visited clinics with a mobile FibroScan® – a simple, painless tool that determines if someone has liver damage.



The team has also been working on educating at-risk groups in the community and encouraging testing.

Hep C can affect people from all walks of life, says Hepatitis C Coordinator for the Southern Region Rob Hallinan.

"It is spread through blood-to-blood contact and people may show no symptoms for many years, which is why hep C is sometimes called the 'silent epidemic'."

This is why testing is so important. Research also suggests that three out every four New Zealanders with hep C were born between 1945 and 1965, so anyone in this age range who has ever been exposed to a risk factor should get tested, he says.

The workstream is currently working in partnership with the Canterbury Initiative and primary health organisations to provide a subsidy for general practice visits for people requiring treatment.

The risk factors for hep C include:

- › Getting a tattoo or body piercing.
- › Having had a blood transfusion before 1992.
- › Injecting drugs – even as a one-off.
- › Living or receiving medical treatment in high risk areas, such as Eastern Europe, Southeast Asia, the Middle East, or on the Indian subcontinent.
- › Being born to a mother with hep C, or living with someone with hep C.

Mana Ake 'shows what's possible when communities come together'

The Minister of Health spoke to children, teachers and special education needs coordinators when he visited Christchurch to talk about an innovative initiative providing wellbeing and mental health support to children.

Mana Ake – Stronger for Tomorrow offers support for children in schools years 1–8 who are experiencing ongoing concerns that impact their wellbeing including anxiety, parental separation, grief and loss or managing emotion.

In his visit to Fendalton Open Air School, the Hon Dr David Clark acknowledged the work that has already been done and the success of the programme.

"I'm told that over 500 children have been supported individually and 120 in groups so far; that 165 schools are already involved in the programme and that a further 57 will come on board in April. That's pretty impressive in a short time."

The initiative was launched by the Prime Minister Jacinda Ardern in February last year as the first stage of the Government's plan to deliver dedicated mental health support to children in school years 1–8 across Canterbury.

Addressing the kaimahi (workers) who work with schools to deliver Mana Ake the Minister said:

"You are an important part of that wider mental health response and showing just what is possible when communities come together."

Mana Ake kaimahi work with schools to support teachers, families and whānau when children are experiencing ongoing issues that impact their wellbeing.

They can work with individual children and their families at school, in the community or at home, and with groups of children in schools. They also provide advice, guidance and support for teachers and family/whānau.

In her welcome, the school's principal Raewyn Saunders said Mana Ake has been a life changer.

"It's been focused around addressing our children's needs immediately, nipping issues in the bud rather than waiting



Centre, Minister of Health Hon Dr David Clark with Mana Ake staff and Fendalton Open Air School pupils. Middle row from left, General Manager Planning and Funding Carolyn Gullery and Canterbury DHB Chief Executive David Meates



Fendalton Open Air School pupils perform a welcome

and letting them escalate. We treasure our relationships with our kaimahi and we feel very privileged to be on the Mana Ake journey."

Canterbury Clinical Network is responsible for leading the design and delivery of the initiative, which is a collaboration between the Ministry of Health, the Ministry of Education, Canterbury DHB, Police, non-governmental organisations and consumers.

The final roll-out of Mana Ake will take place in April making it available to all children in school years 1–8 from Kaikoura to Ashburton. To find out more about Mana Ake, visit the [CCN website](#).

Two decades of service recognised

Nutrition and Dietetic Secretary and Receptionist Maree Everest is “the glue that holds us all together”, her colleagues say.

To celebrate her 20 years of sterling service in the job, they presented Maree with a bouquet of flowers to show their appreciation for all she does.

Acting Clinical Manager Nutrition and Dietetics Tory Crowder says Maree started with the department in February 1999.

“She is always immaculately dressed and professional, unflappable in any situation that comes her way and invaluable to our team.”

Maree says she has loved every minute of her 20 years at Nutrition and Dietetics, with a great team of lovely people who always make her feel appreciated.



Nutrition and Dietetic Secretary and Receptionist Maree Everest

UNDER THE WEATHER?

Make your GP team your first call 24/7

Canterbury
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Te Pōwhiri Hauora o Wairarapa



New-look, new services on max.: Exception sheets, organisation chart and refreshed payslips join service offerings

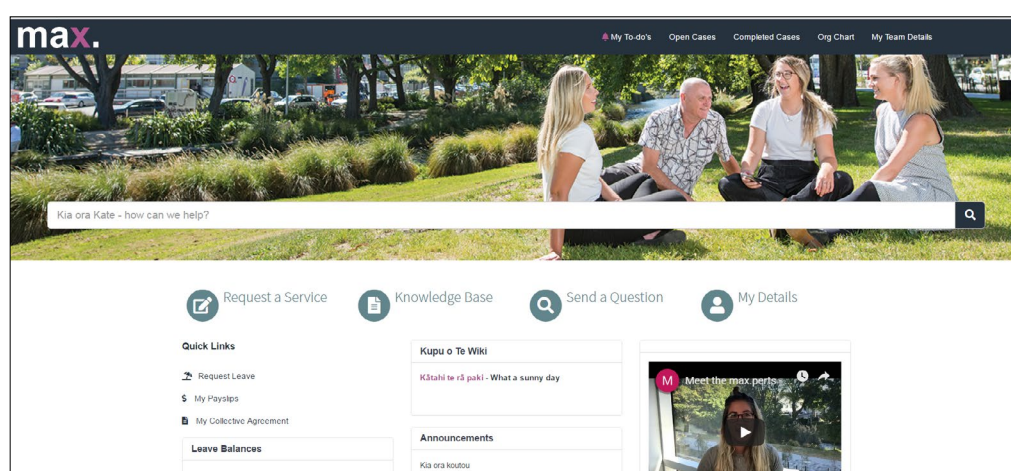
Kia ora koutou,

It's me again, your paper- and time-saving HR portal, **max**. You may not have recognised me with the slick new look I received recently, but I assure you – I have even more to offer.

I have three new services PLUS a refreshed look (which is designed to make it easier for you to use me). This means it's easier to click into your most used services, and find the functions you're looking for.

My three new services are:

- › **Exception Sheets:** I'm happy to start saying goodbye to one of your biggest paper processes by taking Exception Sheets digital. Managers can now submit and approve these in one easy step – and there is no printing or scanning involved whatsoever. Exceptions for each employee are now filed as individual cases. This not only streamlines this process, but increases the visibility of the status and communications around each request. Exceptions outside of the MECA are handled by Roster, and they'll send to your general manager for extra approval, if required. Find this under 'Request a Service' or by typing into the search bar.
- › **Organisation chart:** This interactive map is designed to show a person's reporting lines, outlining their position and number of direct reports. Find it in the toolbar on your **max**. homepage. If your information is not correct, please ask your manager to tell us via 'Send a Question'.
- › **New-look payslips:** These crucial documents have been redesigned to make it easier to see your pay details and are stored in the same place – on your **max**. homepage. Don't forget you can turn off your paper payslips under 'Request a Service' (and encourage your teams to do so, too).



Don't forget all of your approvals and requests for everything **max**.-related are housed on your top banner under 'My To-dos'.

The release of these new services exemplifies some of my strengths: as we replace old paper systems with new digital pathways that make everything we do more visible, it makes work, work better for our people.

If you'd like any help with these new services, including demonstrations, training, tips or tricks – please don't hesitate to get in touch with my new support team, the **max.perts**. Contact them via 'Send a Question' on **max**.

Nga mihi nui,
max.

Health to benefit from charity's collaboration with Vivace Espresso

Making a stand as a responsible Kiwi business, locally owned and operated Vivace Espresso has partnered with Māia Health Foundation and Innocent Packaging to introduce a fully compostable takeaway coffee cup to its cafés nationwide.

The initiative, launched last week, will see funds raised for vital healthcare redevelopment across the Canterbury Health System.

General Manager for Vivace Espresso Paul Baker says his company chose to partner with Innocent Packaging and Māia Health Foundation because they are two Kiwi organisations committed to measurable change.

"We are well aware that Māia Health is also fundraising for a future-proof rooftop helipad at Christchurch Hospital with \$260,000 to go so every contribution helps."

The redevelopment of Christchurch Hospital is the largest in New Zealand's history.

"With some patients having to travel from all over the South Island to receive specialist treatment only provided in Canterbury, we feel this is a cause many of our Kiwi customers will feel passionate about, just like we do," Paul says.

The Vivace Espresso compostable cup will feature Māia Health Foundation branding and a QR code for two years, helping to spread their story and raise some much-needed funds to enhance regional health services. Canterbury-based Vivace Espresso, which supplies and distributes its coffee nationwide, will donate a portion of proceeds of each carton of cups sold back to Māia Health Foundation – approximately \$10,000 per year.

Māia Health Foundation CEO Michael Flatman says he is delighted for the foundation be in partnership with Vivace.

"Vivace approached us with their plans to move to compostable coffee cups and simultaneously help promote Māia, and we jumped at this incredibly generous opportunity.

"With this partnership, the Māia brand will be seen throughout the country and as a charity we simply couldn't buy this type of exposure. We're looking forward to putting Vivace's generosity to good use, in order to help improve the Canterbury Health System, not only for the people of Canterbury but for many others across the country," says Michael.



The new compostable cups on display at the launch of the collaboration inside Vivace's Roastery

One minute with... Rosalee Jenkin, Healthy Commute Programme Lead

What does your job involve?

Coordinating Canterbury DHB's Healthy Commute programme, which is all about supporting staff who are interested in driving to work a bit less to try out some other modes of transport – such as walking, cycling, bussing, carpooling, scootering and so on. At the moment we are designing the programme for staff at Christchurch Hospital, and our friendly travel planners will be coming around to chat to people one-on-one about their commute over the next month or so.

Why did you choose to work in this field?

I think healthy, sustainable transport is one of the most obvious ways we can reduce our carbon emissions and address climate change, plus it has so many other benefits.

What do you like about it?

We're offering solutions, and genuinely trying to help people feel happier and healthier in their commute to work. I think most of us want to make a positive difference in the world, but often we just get caught up in the day-to-day rush and it can seem a bit overwhelming. I like that we're here to make it a little easier for people to do their bit.

What are the challenging bits?

Getting my head around the many different layers and facets of Canterbury DHB!

Who inspires you?

So many people! But at the moment I'd have to say Greta Thunberg and the young students all over the world (including here in New Zealand) who are leading the School Strike 4 Climate movement.

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?

Really listening to people and doing my best to understand where they're coming from. Empathy is important because everyone's situation is different. It's also important to me that I'm walking (or biking and bussing, in my case) the talk. You won't see me driving into town unless I really have to!

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

Plenty – it's pretty sparse! But I'll go with my love of/mild addiction to op-shopping.



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

Honestly, I'm pretty happy here in Ōtautahi! I've always felt pretty lucky to live in New Zealand – and more so now than ever.

What do you do on a typical Sunday?

I try to spend some time outside in the sun (if it's out!) either gardening or going for a bike ride.

One food I really like is...

Baked salmon.

My favourite music is...

At the moment I'm loving D'Angelo. But Michael Jackson will always get me on the dance floor.

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 8 March 2019 – 12.15pm to 1.15pm, with lunch from 11.50am

Venue: Rolleston Lecture Theatre

Speaker 1: Dr John O'Donnell, Immunology
"Autoantibody Measurement: more sfumato than chiaroscuro?"

Detection of antigen-specific serum autoantibodies has clinical utility in the diagnosis of a spectrum of disease in different organs. Autoantibody detection has helped conceptualise disease mechanisms and guide therapeutic approaches. However, there are limitations to their utility, which we are at risk of exceeding. Antibodies do not behave like a biochemical analyte such as creatinine. Assay standardisation has so far failed and may not be practical. The reasons for these limitations need to be understood to avoid clinical misinterpretation and erroneous decision making.

Speaker 2: Dr Ken Romeril, Bowen Icon Cancer Centre, Wellington and CEO Myeloma New Zealand
"Four Decades of Myeloma"

A personal account of how the treatment of this blood cancer has evolved during my medical career as a haematologist.

Chair: Peter Ganly

It is requested out of politeness to the speaker that people do not leave halfway through the Grand Rounds. 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

All staff and students welcome.

Next is – Friday 15 March 2019

Rolleston Lecture Theatre

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

South Island Alliance update



The latest South Island Alliance update is available now. Read about the Well Child Tamariki Ora Quality Improvement team's work with the West Coast, Nelson Marlborough Health's new support for patients and their whānau, and more. Read the full update [here](#).

South Island Cancer Consumer Group looking for new members

The South Island Cancer Consumer Group is seeking several new members and would particularly welcome input from Māori and other ethnic groups, and people based in Christchurch/the top of the South Island.

However, they encourage anyone interested to submit an expression of interest.

The Cancer Consumer Group sits within the Southern Cancer Network (SCN), and was established to enable consumers and whānau from across the South Island to provide input and advice on the quality improvement work undertaken by SCN.



The Cancer Consumer Group is made up of people with a range of backgrounds (including people living with or beyond cancer, and their carers/whānau), ethnicities and geographic locations.

The South Island Cancer Consumer Group's purpose is to:

- › provide a forum to advise on cancer consumer related issues within the southern region
- › identify key regional cancer consumer priorities as supported by the National Cancer Strategy and Plans and provide recommendations
- › provide a consumer perspective into projects, service planning and other SCN activities.

More information about the role is available [here](#).

Please send expressions of interest or queries to stacy.belser@siapo.health.nz by 22 March 2019.

Canterbury Clinical Network update

The key messages from February's Canterbury Clinical Network Alliance Leadership Team meeting are now available.

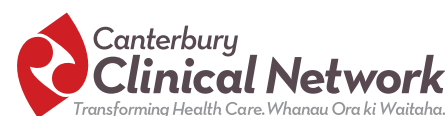
Highlights from the meeting included presentations from:

Falls and Fractures Service Level Alliance (SLA) – Ian Town, Ken Stewart and Koral Fitzgerald presented progress, achievements and focus of the Falls and Fractures SLA. These include a reduction in serious falls injuries through increased access to accredited community strength and balance classes and the in-home Falls Prevention Programme. Areas of focus for the coming year include strengthening integrated falls and fracture care across the system which will include improved falls prevention referral pathways.

Primary Care Capability SLA – Ken Stewart and Linda Wensley presented an update about the progress of the Primary Care Capability SLA. The group has spent some time confirming the role of the SLA to ensure it provides strategic leadership to a number of current system enablers and identify where the SLA can add value to increase capability of primary care.

The messages also report some changes to Service Level Alliance memberships.

You can view previous key messages via the [resources page](#) on the CCN website, as well as dates of upcoming meetings via the [calendar](#).



Canterbury

District Health Board

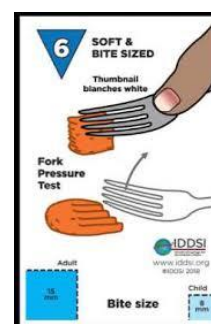
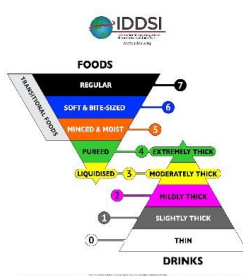
Te Poari Hauora ō Waitaha



There have been recent changes to the Hospital's modified food texture standards and names e.g puree, soft etc.

Christchurch Hospital's Speech Language Therapy and Dietetics teams are holding an information day to update you on these important changes.

Food Texture Information Day



Tuesday 12 March

The Annex Room

(Next to the Great Escape Café)

All are welcome – drop in any time between 12.30 and 16.30pm.

This will be an informal, interactive session to give you the chance to:

- Sample and test our Hospital meals according to the new guidelines.
- Discuss the new system with SLTs and Dietitians.
 - Sample meals from the Pure Food co.
 - Try thickening drinks with Precise Thick-N.

— THE —
**PURE
FOOD**
— CO —



CANTERBURY DHB 2019

Māori and Pacific SCHOLARSHIPS

Māori and Pacific Scholarships are for Christchurch-based tertiary institution students who are studying a health-related NZQA accredited course and has whakapapa with Māori communities and/or cultural links with Pasifika communities, and are also planning to work in the Canterbury region.

- Applications close 5pm Friday 29 March 2019
- Online applications to be forwarded to:

manawhenuakiwaitaha.kaiawhina@gmail.com

- Any queries, please contact:
Ruth Chisholm, Kaiawhina 0274434532
For more information please visit:
www.cdhb.health.nz/maorihealth

Canterbury
District Health Board
Te Pōari Hauora o Waitaha



Money on your mind?



Westpac's Managing Your Money workshops are practical, interactive and will help you develop the skills you need to keep your finances in shape.

Come along to the free Growing Your Financial Wellbeing seminar on Spending and Budgeting.

When: Wednesday 13 March 2019

Time: 12.00 – 12.30pm

Location: Christchurch Hospital, Great Escape Lounge

Staff only

RSVP: Register at <https://cdhbmym.lilregie.com>

We look forward to seeing you!

