



Shining a light on a new facility for Child Adolescent & Family specialist mental health outpatient services

At their November meeting Canterbury DHB Board members endorsed a proposal to carry out a significant redevelopment and refurbishment of the former Canterbury Linen Facility in Christchurch. The Māia Health Foundation have come on board to raise the \$5 million needed to fit it out – they are doing this by an online fundraising campaign, Shine a light, which is online now. To kick things off they are looking to raise \$100,000 before Christmas.

Child, Adolescent and Family (CAF) outpatient services have been based at The Princess Margaret Hospital for many years and everyone acknowledges that the facilities are well past their 'best before' date. The prospect of new facilities on the drawing board is brilliant news.

We have been working with Māia to jointly fund this new fit-for-purpose child and adolescent outpatient space for Child, Adolescent and Family (CAF) South, North and the Access team. Considerable effort went into identifying a suitable setting for CAF that will work not only for our delivery of clinical care, but also an accessible space that children, young people and their whānau will feel comfortable attending.

The Canterbury DHB Board approved substantial funding for the former Canterbury Linen Services building near CAF North to be redesigned as a large outpatient space. Works to be completed include earthquake strengthening to provide an upgraded 'shell'. Once this first phase is complete a full fit out to create a modern, fit for purpose Child and Adolescent outpatient facility will be carried out.

The Māia Health Foundation is contributing \$5 million directly towards making the space appealing and clinically fit for purpose for the under 18s and their whānau. The



rooms will be designed to provide a calm, appealing environment that takes into account sensory modulation perspectives for young people rather than a standard clinical outpatient facility that has been fitted for adult purposes.

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This large-scale development will provide a child and youth friendly therapeutic environment that our community and staff can be proud of.

Māia's 'Shine A Light' website is now live. Stories shared on the website are going to make a real difference as Māia appeals to the public to support the project to create a new, modern outpatient facility. In addition, Māia have approved

\$36,000 to fund sensory modulation equipment for take home sensory modulation kits, mobile kits for Rolleston, Rangiora, Ashburton, and three items for sensory spaces in CAF North, CAF South and Whakatata House.

While project timelines are yet to be confirmed you can find out more about the Shine a Light campaign on [page 12](#).

Royal Commission of Inquiry into the Terrorist Attacks on Christchurch Mosques

The Royal Commission of Inquiry is due to be released publicly tomorrow and there will be increased publicity around the terror attacks. A reminder to you all to support each other and if you want to talk to someone about how you're feeling there are a range of support options available including through the Employee Assistance Programme, Workplace Support and remember you can also text or call 1737 24/7 to talk to a trained counsellor.

A reminder too that the [Canterbury Resilience Hub website](#) provides a wealth of information about all of the resources available to help you manage for mental health and wellbeing or support someone else. It's all right to feel affected, whoever you are. And it's all right to need support.

**IT'S
ALL RIGHT
TO TALK
IT OUT.**



ALL RIGHT?

ALLRIGHT.ORG.NZ

Holiday publication dates and deadlines for the CEO Update

The last *CEO Update* for 2020 will be a Christmas special, to be published on **Monday 21 December**, with a deadline of midday on Thursday 17 December.

Please send in your Christmas-themed photos – whether it's decorations, a tree, a festive team outing or activity. Share the love and help us spread some Christmas cheer.

The first issue for 2021 will be published on **Monday 18 January**, with a deadline of midday Thursday 14 January.

Feel free to share some holiday snaps to show how you made the most of some time off work.

Photos and stories should be sent to communications@cdhb.health.nz.

We're always after new people to interview as part of our 'One Minute With' series – feel free to nominate a colleague or yourself.

Ngā mihi nui

**Andrew Brant, Acting CEO
Canterbury District Health Board**

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

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



Bouquets

Jackie, Anaesthetic Outpatient Clinic, Christchurch Hospital

Just had an appointment in Anaesthetics and met a wonderful nurse called Jackie. She did an exceptional job of making sure I was comfortable with everything. She was warm, friendly, and very thorough and put me completely at ease.

Security Guard, main entrance, Waipapa, Christchurch Hospital

My son is a patient in the new Children's Acute Assessment ward. On Thursday night, around 1am, there was a female security guard working reception. She was amazing. Her friendly attitude was amazing, and her help is much appreciated. She is a great staff member.

Ward 14, Christchurch Hospital

Amazing kind workers. Thank you so much.

Level 4, Outpatients, Christchurch Hospital

Exemplary service. Thank you.

Dental Department, Christchurch Hospital

Excellent service, great communication from Dental Officer Adrienne and her lovely helper.

Surgical Outpatients, Christchurch Hospital

I would sincerely like to thank Mr Rukshan Ranjan and Miss Davies from Surgical Outpatients. The care and compassion I have received has been so much appreciated through a very difficult period.

Gastroenterology Day Unit/Endoscopy Unit, Christchurch Hospital

I recently had a small day procedure in the Gastroenterology Day Unit and I want to pass on my thanks to Senior Medical Officer Dr Heidi Su, nurse on admission Amy, Kate Pryor, Richard Dy, and Susan Smith, who were all in the procedure room with me, and post-sedation care nurse Tessa. I always have a great experience with the Gastro Day Unit, but I was feeling especially nervous last week, and the entire team made me feel so at ease and calmed all nerves I had going into it. Everyone was friendly, kind, and went out of their way to make sure I was comfortable. The special touch of a nurse sitting in the procedure room stroking my head and holding my hand was exactly what I needed to keep me distracted and showed the extra level of care provided by this team. Could you please pass on my thanks to all the team mentioned above as they were outstanding and made my visit a breeze.

Ward 11, Christchurch Hospital

As usual when our dad stayed in Ward 11 he had wonderful service from Registered Nurse Callum Smith. Dad has had a special spot for Callum on his previous visits and always wants me to put in a good word. Callum is very calming, and I think that pays dividends in Dad's care. Also, thanks to Ward 11 Charge Nurse Manager Gail Sumner, she is a great asset to the team. We appreciated all the help given. Thanks, too, to Val McDonald in Social Work.

Registered Nurse Amanda, Ward 11, Christchurch Hospital

Amanda was fantastic at communicating to me while my daughter was in surgery. Her professional and kind manner was reassuring and just what I needed. I know the ward was busy and staff were busy, but she took a moment to make sure all was well. Thank you, Amanda.

Ward 27, Christchurch Hospital

Thank you for the team's excellent care, you have been especially wonderful, particularly Joan and Nigel and Marni.

Emergency Department (ED), Christchurch Hospital

I had a bike crash, resulting in some considerable pain that turned out to be lateral fractures to my collarbone and some bad bruising to ribs and a sore neck. I want to express my thanks to the hospital for my treatment, from when I arrived at ED through to discharge. In particular, I want to call out Nurse Annie and Dr David for their professionalism and care. Their attention to detail with regards to both asking for details, regular checking in, and explanation of what was happening and why, was extremely appreciated.

Medical Day Unit, Christchurch Hospital

I would like to complement and thank Nurse Jane Fowler and the team at the Medical Day Unit for my care I appreciated the friendly manner of all staff I encountered there and the warm care I received. Jane, in particular, was wonderful, making sure I was well informed about everything I needed to be, and ensuring that I was well taken care of. Thank you for the wonderful work that you all do!

Christchurch Hospital

Thanks for the support and service.

Ward 24, Christchurch Hospital

The staff are amazing. There is so much love here, it has been so appreciated.

Kumee, WellFood Assistant, Ward 11 Christchurch Hospital

When you are a family member waiting for your loved one to come back after surgery and are feeling a bit apprehensive, it is a pleasure to have the lovely Kumee assist with her compassion and humour. Such a lovely lady. God bless her.

KEEPING OUR COMMUNITY HEALTHY

**WELL
NOW**

SPRING 2020

CANTERBURY

A snapshot of how we're doing

**Your community
health magazine
is out now!**

Keep an eye on your
mailbox, or check it
out on our website.

cdhb.health.nz

Welcome to Waipapa

MIGRATING TO
CHRISTCHURCH
HOSPITAL HAGLEY

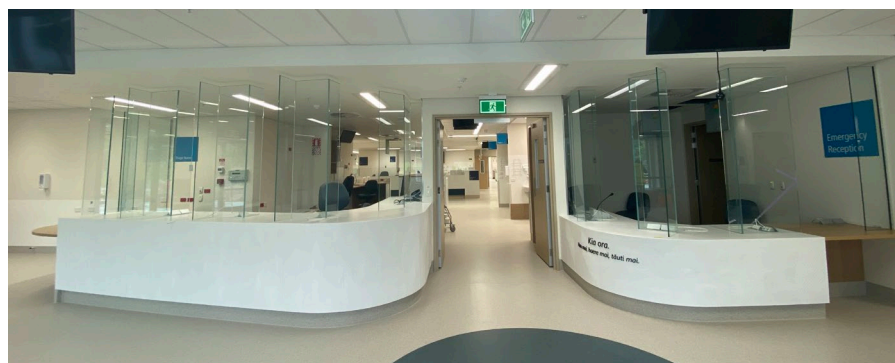
Making Waipapa welcoming for the whole community

In addition to some beautiful new spaces for staff, patients and whānau, Waipapa also has some less obvious new accessibility features.

These features were adopted after discussion and liaison with a range of consumers with varying requirements and agencies that support and represent groups such as Blind Low Vision NZ. These features include important aspects that aren't legislatively required but are evidence of our dedication to providing the highest level of care for our entire community.

Features include:

- › Braille signs on lifts and accessible toilets
- › Strobe lights as well as audible emergency alarms
- › Accessible parking outside ED and in the undercroft (undercover)



The Emergency Department reception area has many accessibility features including lower desks, hearing loops, wide doorways and corridors, and bariatric seating

- › Bariatric seating in all wait areas
- › Slip resistant vinyl in wet areas
- › Slip resistant tiles in main entry
- › Baby change tables in accessible toilets throughout the building
- › Lowered reception desks
- › Hearing loops at reception desks
- › Talking lifts
- › Increased number of larger accessible toilets
- › Wide doorways and corridors for ease of access for people with walking aides or wheelchairs.

We like to move it, move it

This week, Ward 20 moves from Level 3, Parkside East to Ward 18, Level 3, Parkside East.

This move makes way for work to begin on the exterior panels and passive fire upgrades of Parkside.

Migration of Ward 20 to Ward 18 will take place on Wednesday 9 December, with a maximum of 25 patients expected to be moved. As with the patient migration to Waipapa, patients will be moved to their new spaces in their beds with their belongings, and Ward 18 will be up and running as soon as the first patient arrives. As the wards are on the same floor, migration will be through the service corridor between the lifts. Please keep this area clear between 9.30am to approximately 11.00am if you're not directly involved in the move.

Ward 20 is the Plastic Surgery ward and will become known as Ward 18 while in this space. This is essential for emergency response procedures.

Campus compliance works

Work will get underway shortly on the campus compliance and remediation project.

Passive fire remediation started in areas vacated by the Waipapa migration as soon as spaces became free. There is a lot of interest in these areas by wards and services that would like to have additional space. Decisions on what these areas will be used for will be made as and when they are ready for occupation.

The portacom from outside the old Emergency Department in Parkside will be moving to make room for cranes to be on site in early 2021 for exterior panel remediation. Work will involve upgrading brackets on the exterior concrete panels on Parkside and Riverside and replacing some panels with an alternate cladding.

This work will be noisy at times, so it's important that areas are empty for work to progress. This shouldn't affect any egress points to the Ground or Lower Ground Floor of the main campus.

Work will begin at Parkside East in the newly vacated areas and continue gradually through much of the campus, including Riverside, the Clinical Services Building and Christchurch Women's Hospital. This is an essential long-term project and is expected to take several years to complete.

Vacated areas should not be used as general access routes, even if they are empty. Some spaces are needed for emergency egress, however, this is the only time they should be accessed by staff not involved in the compliance works.

Following discussion and engagement with affected services, a comprehensive plan is being finalised regarding who will be moving where once remediation work is complete. Any queries should go through the General Manager's office. Please contact Maree.Millar@cdhb.health.nz.

Keep sending in your photos!

We're putting together a photo gallery of the move. If you've got some great snaps to share, email waipapa@cdhb.health.nz.



The Ward 16 SARA team just before they moved from Parkside in Christchurch Hospital



The team's new home in B3 in Waipapa

Let the festivities begin!

The Specialist Mental Health Services (SMHS) team started early with their festivities with a fabulous turnout last week for their staff Christmas lunch.

Santa's helpers were into the festive spirit, serving up food and good cheer.

A big thank you to the WellFood team for all their hard work and wonderful presentation.

And from everyone at SMHS, Merry Christmas one and all!



The Divisional Leadership Team from left, Acting Director of Quality and Operations Vicki Dent, Rural Adult Community Service Consultant Psychiatrist/Clinical Director Sigi Schmidt, Acting Quality Manager Rebecca Webster, Specialist Mental Health Services General Manager Greg Hamilton, WellFood Food Services Manager Karen Watson, Director of Allied Health Sandy Clemett and WellFood Service Manager Nicky Moore



Radiology Christmas trolleys bring the joy of a cuppa, kai and connection

Three Radiology Christmas tea trolleys toured the corridors of Christchurch Hospital last week loaded with food and drinks.

"By offering a cuppa, some food and a chat, we show kindness to one another and remember the value we each bring to our patients and colleagues," says Charge Magnetic Resonance Imaging Technologist Peter Dooley.

The idea for the trolleys (this year there were three) was inspired by a former colleague, the late Kerrie Rollo, who was one of the most generous, kind hearted people that many have had the privilege to know.

"Kerrie was a huge fan of Christmas and since she passed away the tea trolley, for us, serves as a way of honouring her memory, as well as that of other treasured colleagues who have died, some recently and others many years ago.

"In this our third year, as well as bringing to mind friends and colleagues we've lost, we also raised a mug to our Parkside department, which has seen us through thick and thin."

"All the donations of goodies – baking, chocolate, coffee and even cash donations, helped us spread the love as far as possible," he says.

People were grateful for the special treat and enjoyed pausing from their work for a few minutes to have some banter.

"I personally enjoyed stopping one of the cleaners and offering him some kai and I loved it that he took a ginger kiss and two big pieces of lolly cake. I thought to myself he was either really hungry or those were his favourites. Either way it brought me joy."

Over the last few years some amazing 'Christmas elves' have baked all through the night for the trolleys' treats.

"A special thanks to the helpers on the day and those who contributed baking. We were very lucky to have a small group who contributed financially which allowed us to buy coffee, herbal teas and orange juice, plus cheeses, as well as a lot of Christmas mince pies."

A special mention to Josie MacFarlane from Ultrasound who loves Christmas so much that she helps make this happen each year, Peter says.



From left, Medical Radiation Technologist Kathleen Bargent, Charge Magnetic Resonance Imaging Technologist Peter Dooley, Sonographer Josie MacFarlane, and Jack Gormley



Trolley pushed by Operations Manager Felicity Woodham stopping at Gastroenterology and Nuclear Medicine

"He aroha whakato, he aroha ka puta mai"

"If kindness is sown, then kindness is what you will receive"

Canterbury team's research a first for Australasia – celebrating excellence in nursing practice

The first study in Australasia on the effectiveness of a device that can stop peripherally inserted central catheters (PICCs) moving out of place has been published in the *Australian Journal of Cancer Nursing*.

It describes a project led by Christchurch Hospital Nurse Consultant Vascular Access Elizabeth Culverwell.

A PICC is a flexible catheter that is inserted in a peripheral vein in the arm and passed along the vein pathway and ends near the heart. It is used for mid- to long-term treatment to deliver intravenous infusions, medications and for obtaining blood samples.

While there are advantages to using a PICC, there are also risks. Complications associated with inadequate PICC securement, such as PICC migration (moving), and blood stream infection, are two of the most frequent and serious complications.

These result in significant personal cost to the patient as well as having financial implications for the healthcare system, Elizabeth says.

"A serious event occurred at Christchurch Hospital in 2012 involving inadequate PICC securement, which resulted in PICC migration with a fatal outcome."

This led to the first evaluation in Australasia of a subcutaneous engineered stabilisation device (SESD) SecurAcath™ and the implementation of this device to secure PICCs.

Between 1500 and 1711 PICCs are placed in patients annually at Canterbury DHB.

"The SESD has reduced both migration and dislodgement, decreased re-insertion rates and associated costs across our organisation," Elizabeth says.

The team's study – "Do subcutaneously engineered stabilisation devices reduce PICC migration? A product evaluation report" – has been published in the *Australian*



From left, Clinical Nurse Specialist Haematology Wendy Jar, Nurse Consultant Vascular Access Elizabeth Culverwell, Nursing Director Infection Prevention and Control Service Sarah Berger, and Clinical Manager Radiology Philippa Francis

Journal of Cancer Nursing and will soon be available through the Canterbury DHB medical library.

"This is the first publication in Australasia on the SESD SecurAcath™ securement device. As a result of the work done by our Christchurch Hospital team, 12 other DHBs in New Zealand and health care facilities across four Australian States have implemented this PICC securement device.

"As authors we'd like to thank the Central Venous Access Devices Governance Group for approval and oversight of the project, the credentialed registered nurse PICC team and the nursing staff who participated in the evaluation and data collection," Elizabeth says.

"As patients transition through the labyrinth of outpatients, hospital and post-acute care settings, it is imperative to do what's right in their vascular access voyage." – Vineet Chopra, Chief, Division of Hospital Medicine, Michigan, USA

High levels of community midwifery care in Canterbury

Midwifery care in Canterbury is overwhelmingly done in the community – and we think that's a good thing.

Lead maternity carers (LMCs) are self-employed and work in the community, caring for women through pregnancy, labour and birth and postnatally until six weeks after birth. Midwives who are based in hospitals or maternity units are called core midwives and are employed by district health boards.

In most cases, LMCs are considered the best form of care for pregnant women due to the continuity they can provide.

Between October 2019 and October this year, only 47 women in Canterbury were booked for the Core Midwife Clinic. This is a tiny proportion of the over 6000 women who give birth in Canterbury each year.

That means more than 5900, whether mostly healthy mums having healthy babies or with some level of complexity to the care, were successfully supported by a community-based LMC.

This low number of women requiring core midwife support antenatally is very different from most other DHBs around New Zealand, says Canterbury DHB Director of Midwifery Norma Campbell.

"I knew our figures booked for the Core Midwife Clinic had dropped but was delighted to see by how much. This is as a result of us retaining

midwives in our community who want to be LMCs, combined with women more often opting for this kind of support and care."

Other DHBs seem to have much larger volumes of pregnant women sitting with DHB-employed core midwifery teams, which in turn translates to less continuity throughout pregnancy, labour, birth and postnatally, she says.

"Canterbury supports LMCs with services they need and helps them to fill their caseloads when women may think they still have to come to the hospital. It's great to be able to refer them to an LMC instead.

"This can also mean that very different discussions are then had about place of birth and we are encouraging LMCs to continue to ensure that if women and their babies are well they stay at one of our community units."

The Maternity Assessment Unit (MAU) now sees women with the LMC or after referral by the LMC, in half the time it did a year ago.

"Before we had the MAU, women and their LMC could wait between five and seven hours for an acute assessment which had to be done on our busy Birthing Suite."

Women are much happier with this change, Norma says.

"When women call our clinic and do not know how to find a midwife, we work closely with the local Midwifery Resource Centre to locate a midwife they can call."



Canterbury DHB Director of Midwifery Norma Campbell

"The role of the LMC Liaison midwife is also an incredibly valuable one that supports this model of care by liaising between the DHB and LMCs in the community.

These working relationships were extended when the College of Midwives appointed a COVID-19 Liaison midwife during lockdown as it was a difficult time for LMCs who visit women in their homes.

"The stories we are hearing and the stories the statistics tell, all add up to a three-way win."

Women get the care they need from a skilled professional they have developed a trusting relationship with, LMCs get to provide the important and valued contribution they have been trained for to the full extent of their scope, and hospital-based services are more able to concentrate their resources and expertise on the women and babies that need that level of care, Norma says.

Keeping patient information safe

From Chief Medical Officer Sue Nightingale

The ever-increasing use of smart mobile devices has revolutionised the way we deliver healthcare by making patient health information more accessible where and when we need it. However, increased accessibility must be accompanied by measures that will safeguard that information – which is essentially why the new Privacy Act 2020 has been introduced.

Clinical staff are generally well aware of those risks and take their responsibilities in relation to the security and privacy of patient information seriously, but with the new Act taking effect from last week, here is a reminder of those responsibilities – because we are all human.

These are 'minimum standard' precautions you should always take, which equally apply to all staff, clinical and non-clinical, who deal with confidential information and/or use devices for work purposes away from their normal work setting.

All personal devices such as tablets, laptops and phones must be password protected and set to lock automatically after a short period of inactivity.

Without a password a lost device may give an unauthorised person access to emails and potentially other systems that hold identifiable patient information. Additional steps to prevent this: Ensure 'find my device' options are enabled, and that you have activated any systems that allow you to delete data remotely if your device is lost or stolen.

No identifiable patient data, which includes NHIs, may be held on a laptop, tablet or phone.

Password protection is not a complete protection.

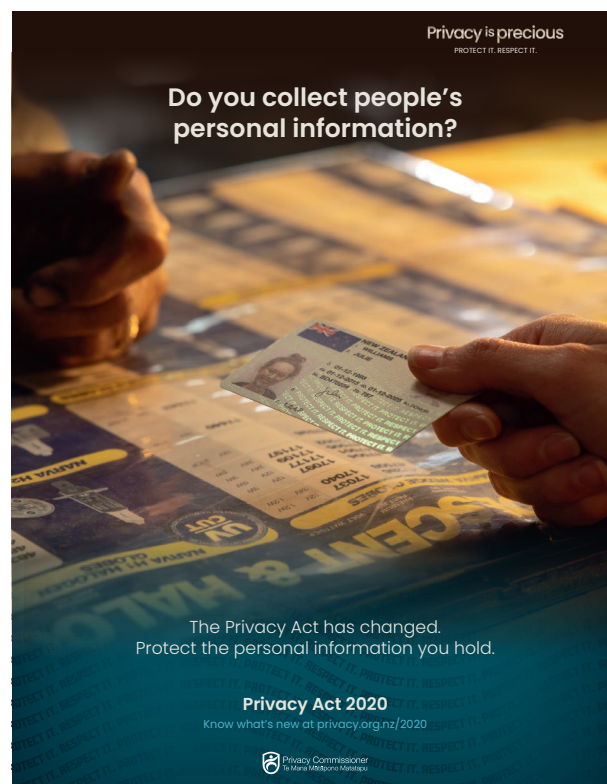
Identifiable patient data is not to be held on USB sticks or other portable memory devices - unless they are specially-encrypted devices.

These devices are too easily lost or stolen.

Lists of identifiable patient information should not be sent by email

Emails in general are vulnerable as they are likely to be accessible through mobile devices – which are also easily lost or stolen.

Sending an email containing patient identifiable data to an unintended recipient is always a risk – most commonly where the device auto-populates the 'To' box based on the first few letters you type. Double check before you hit 'send'



and avoid using 'reply to all' except when you have checked you intend all recipients to receive that message.

Beware of the 'send again' function, especially where you have entered names in the BCC field in the original message. Check that any changes made to the original message are still appropriate to the BCC recipients.

Where it is necessary to send lists of patient data then it should be de-identified* and indexed to a second list containing the identifiers. The list of identifiers should be encrypted, then both lists sent separately. The passcode to decrypt the identifier file should be communicated by a different method such as phone or text.

*De-identification removes all data that may link a record to a patient, including but not limited to name, date of birth, age and address. Particular care should be taken when dealing with unusual diagnoses and situations where the identity could be inferred or deduced.

Work or patient-related information such as images should never be shared through any social media channels such as Facebook or WhatsApp, or via a text.

Celo is an app specifically designed for this purpose and appropriately encrypted. It also allows images and other exchanged information to be saved as part of the clinical record.

For more information about the new Privacy Act 2020, visit the [Office of the Privacy Commissioner's website](https://www.privacy.org.nz/2020).

Shining a light on child and youth mental health in Canterbury

'Shine A Light' kicked off last Tuesday with the mission of raising \$100,000 in three weeks. The appeal comes as Māia prepares to launch its next major project – raising funds for a new, purpose designed outpatient facility for child and youth mental health in Christchurch. The appeal funds will go directly towards this project.

There is no doubt, Canterbury is facing unprecedented demand for child and youth mental health, says Māia Chief Executive Michael Flatman.

"Not only do more people need help, but the facilities where they receive treatment and care are old, outdated and simply not fit for purpose."

'Shine A Light' will be largely run online, featuring stories from those at the coalface of child and youth mental health, along with brave stories from young people and their families who have faced a mental health struggle.

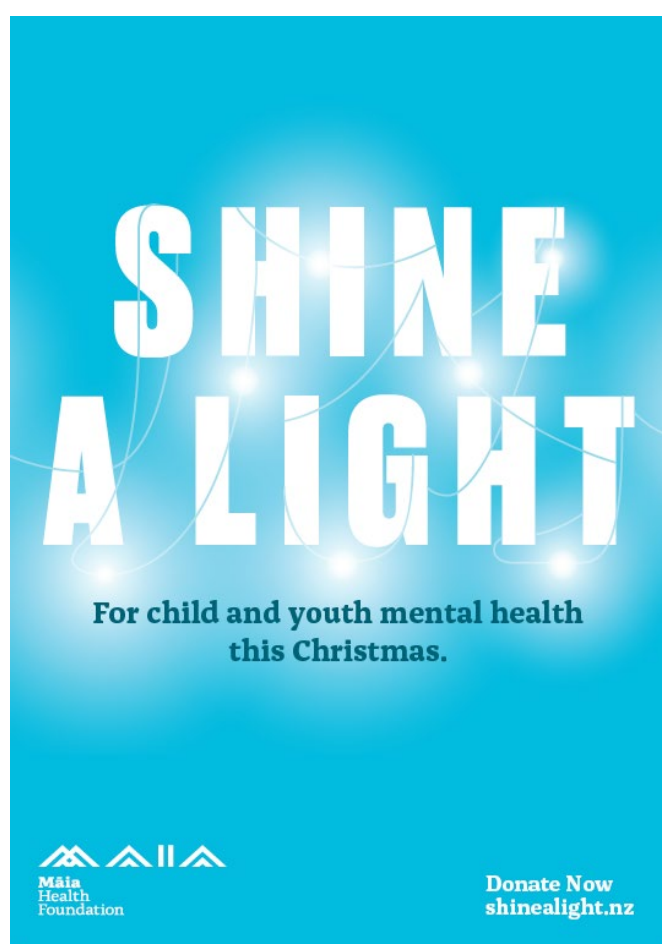
"As well as kick-starting our fundraising for this game-changing project, we hope this Christmas appeal also sparks important discussions around young people's mental health. Hopefully, Cantabrians will then step up and join us to do something about it," he says.

Māia is working closely with Canterbury DHB to confirm details of what the new facility will look like. The new facility will replace the current outpatient facilities at The Princess Margaret Hospital and Hillmorton campus.

Canterbury DHB Child, Adolescent and Family (CAF) service manager Deborah Selwood says CAF staff have gone above and beyond to respond to the increasing demand the service is experiencing, but they desperately need a new, fit for purpose facility.

"We can't prevent why people are referred to us or what's happened in their life that means they need our help. But we can change how they feel when they get here.

"As well as not reflecting a welcoming, caring environment, the facilities do not reflect our modern way of caring for people. We have treatments and therapies that we would love to be able to offer, but our facilities don't easily support."



The new Integrated Family Services Unit at Hillmorton, which includes the CAF inpatient unit, however, this doesn't include a community-based outpatient facility.

This is despite a 140 percent increase in demand for child, adolescent and family mental health services since January 2018.

The campaign website is www.shinealight.nz.

Lincoln maternity staff commended for encouraging breastfeeding

Congratulations to Lincoln Community Maternity Unit for another successful Baby-Friendly Hospital Initiative (BFHI) audit.

The audit report says staff at Lincoln are to be commended for spending ample amounts of time with mothers at consecutive feeding times. This commitment to supporting women to initiate breastfeeding is invaluable.

The BFHI is an international programme launched in 1991 by the World Health Organization and the United Nations Children's Fund to ensure all maternity services become centres of breastfeeding support worldwide. In New Zealand, all maternity services are required to achieve and maintain BFHI accreditation. The standards of care and services provided are audited by the New Zealand Breastfeeding Alliance (NZBA) every three years.

Lincoln's first audit was in 2003 and the facility has achieved them every three years since, says Lincoln Maternity Charge Midwife Manager Bronwyn Torrance.

"In this year's audit, our exclusive breastfeeding rate for 2019 for women who birthed at Lincoln was 92 per cent which is very similar to other years. This achievement is made possible by the team all working together toward the same goal / BFHI standards, and actively addressing any breastfeeding challenges with each individual woman, our BFHI certificate is a testament to that."

Bronwyn says she would particularly like to commend Lincoln's BFHI Champion Midwife Helen Wells who undertook all the data work and resourced the team, ensuring everyone is kept up-to-date.

New Zealand Breastfeeding Alliance Executive Officer Jane Cartwright says Lincoln has shown a significant commitment to breastfeeding and maintaining their standards. The presentation of the certificate recognises Lincoln's ongoing commitment to breastfeeding and the BFHI.



Lincoln Maternity staff with the Baby Friendly Hospital Initiative (BFHI) certificate, front, Hospital Aide Melissa Grubb, rear from left, Ward Clerk Lisa Smart and Midwife and BFHI Champion Helen Wells



Lincoln Maternity has been commended for spending plenty of time with mothers and babies at feeding times

Love Don't Judge – Kei whakawā. Me Aroha

Managing diabetes is not an easy task.

There are so many aspects of wellbeing included in the management of diabetes, that are often overlooked, including the mental health of a person diagnosed with diabetes, says Pacific Island Diabetes Clinical Nurse Specialist Philomena Elaine Moana Petaia.

A recent survey by Diabetes New Zealand explored the experiences of over 1,000 New Zealanders with type 1 or type 2 diabetes. The results showed that 81 percent of Kiwis living with diabetes have experienced diabetes distress.

"They relayed feelings of failure, frustration or guilt in relation to diabetes management, or feeling overwhelmed by the demands of living with diabetes," she says.

Living with a chronic illness like diabetes is an ongoing commitment, including the routine monitoring of blood glucose, medication administration such as insulin, medical appointments and the maintenance of a healthy lifestyle and diet.

"All this is in addition to their usual obligations of work, sport, and family and community responsibilities, to name a few. It can often be overwhelming, frustrating and isolating trying to manage a chronic illness and maintain a somewhat normal lifestyle."

Love Don't Judge – Kei whakawā. Me Aroha was the catch cry for Diabetes Action Month 2020 in November. Diabetes New Zealand utilised the month in support of its annual campaign to raise awareness and encourage action that challenges all New Zealanders to 'Act Now Live Well.'

This universal theme, applicable to all walks of life, is a motto inclusive of all, a phrase and fitting for the events we have gone through as a nation and as Cantabrians, Philomena says.

Pasifika and Māori populations are often overrepresented in diabetes statistics.

"This in itself is the drive and motivation to continue undertaking and improving our specialised services."



Some of the Diabetes and Endocrinology Staff in the Christchurch Outpatient Building wearing their "Love Don't Judge" t-shirts

The team in the Christchurch Outpatients Diabetes and Endocrinology Service have banded together to purchase 'Love Don't Judge' t-shirts, to show their ongoing support.

"This is only the start of the national mission to raise awareness and support for our Kiwis and communities living with diabetes," Philomena says.

For more information visit www.diabetes.org.nz or to know more about the Christchurch Hospital Diabetes and Endocrinology Service visit www.cdhb.health.nz/health-services/diabetes-clinic/.

Act of kindness raises awareness of mental health

The Child, Adolescent and Family Service, Specialist Mental Health Service, would like to pass on a huge thank you to Villa Maria College for raising awareness of mental health and their act of kindness!

Year 9 students at Villa Maria College, Aoife, Isabella, Lily, and Tanisha, recently held a bake sale to help raise awareness of mental health within the school community and funds to purchase sensory supplies for CAF Emergency clients.

The supplies will be distributed to clients via individual sensory packs, which were developed in response to COVID-19 infection control requirements.



Students from Villa Maria College helping to raise awareness and funds for mental health

Aged 15–30?

**PROTECT
CANTERBURY
AGAINST MEASLES**

**Staff MMR
vaccination clinics
on now**

Check the daily global
for clinic times

One minute with... Ryan Radecki, Emergency Medicine Consultant, Christchurch Hospital

What does your job involve?

I am an emergency physician, and I diagnose and treat all manner of undifferentiated illness and injury. I am also a clinical informatics specialist, working to improve patient safety and healthcare quality. Primarily, we oversee the care in the Emergency Department, supervising and educating the staff.

Why did you choose to work in this field?

I chose this field in a way because I couldn't narrow my interests down to a single specialty. The diversity of problems encountered on a single shift fits the way my brain is wired.

What do you like about it?

I most enjoy training future generations of clinicians. I do this here, locally, as well as internationally through speaking, publications, podcasting, and social media. If you do something you love, it never quite feels like work.

What are the challenging bits?

The most challenging aspect of our profession is managing uncertainty, and the need to make the best decisions possible given limited information in a time-compressed context. It is not unusual to be unable to arrive at a final diagnosis in the Emergency Department, which can be a source of stress and frustration for clinicians and patients.

Who inspires you?

I am inspired by my colleagues, and their dedication to our patients and the education of our staff. I am lucky to have them as positive role models, each in their own unique way.

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?

We have a responsibility to New Zealanders to be good stewards of their investment in our hospital, and in us as their clinicians. We are always striving to improve.

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

Our grand, fat, orange, cat, with whom our children are desperately hopeful to be reunited early next year. He is as graceful and athletic as the chunk of cheese for which he is named.



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

No alternative to New Zealand is remotely competitive right now.

What do you do on a typical Sunday?

Sunday is the real work day – chasing around my children, aged three and six.

What's your favourite food?

By sheer frequency of consumption, it must clearly be the daily peanut butter and honey sandwich I've eaten for breakfast for the last 30-plus years.

And your favourite music?

This may be quite esoteric to those reading, but an American band formed in the 80s called 'They Might Be Giants'.

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

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.



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Last edition of eCALD news for the year

The eCALD® team wishes you a Merry Christmas, happy holidays and all the best for 2021.

The final edition of eCALD news for 2020 includes stories on a new study to scope service provision for refugee background clients and families; improving access to general practice services for former refugees and current asylum seekers, and a Refugee as Survivors New Zealand specialist mental health service, offering full or half day face-to-face or webinar training for service providers and community groups in health.

You can read more [here](#).

eCALD refers to culturally and linguistically diverse groups who are migrants and refugees from Asian, Middle Eastern, Latin American and African (MELAA) backgrounds