Canterbury District Health Board Te Poari Hauora ō Waitaha



Launch of Canterbury Children's Team puts vulnerable children at the centre

More than 150 people from across the wider health, education, justice, police and non-government sectors in Christchurch came together late last week to launch the Canterbury Children's Team.

The Children's Team's job is to identify those children with complex unmet needs and then support them to improve their lives. While most children grow up happy, healthy, and loved by their families, whänau and caregivers, too many don't have adults who keep them safe. Unfortunately, in health, we are often involved when things don't go well.

Parental capacity, poverty, welfare dependency, drug and alcohol abuse, and mental health issues are frequently blamed for poor parenting. In Canterbury, the ongoing effects as a result of the 2011 earthquakes have taken a toll on many of the region's families, and this is impacting on some of the our youngest and most vulnerable citizens.

Carolyn Gullery Canterbury DHB's General Manager of Planning and Funding is the co-chair of the Canterbury Children's Team. At the opening she talked about the real power of collaboration – working together based on a shared vision and built on trust, because in that way all things become possible.



Above: From left; Mayor Lianne Dalziel, Carolyn Gullery (Local Governance Group Co-Chair), Peter Whitcombe (Canterbury Children's Team Director) and Social Development Minister Anne Tolley.



Above: Local Governance Group.

Here's an excerpt from Carolyn's address at the opening event, which I think nicely sums up the opportunity and responsibility we have, to play an active role in our local Children's Team.

In Canterbury we have a unique opportunity to rethink how we want our city and communities to be.

Our children are among our region's greatest assets. The Christchurch rebuild is really for them – for their future.

Unfortunately, though, some of our most vulnerable citizens are our children.

The earthquakes have had both immediate and longer-term impacts on children, their families and whānau.

The aftermath is still being dealt with by many – rippling across communities and individual households, and amplifying the need for support.

Some children require Child, Youth and Family protection and support.

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Social Development Minister Anne Tolley speaking with the Kapa haka group.

But there are many whose circumstances aren't serious enough for that intervention – but who still need personalised support before things get worse for them.

That's where the Canterbury Children's Team comes in.

The aim is to make sure our children have the best possible chance at living well and healthy in their own homes and in our communities.

It's a privilege to be part of a group of committed people who are so determined to do the right thing for the children of Canterbury.

It is an important opportunity - and to quote the anthropologist Margaret Mead,

'Never believe that a few caring people can't change the world. For, indeed, that's all who ever have.'

The changing face of Canterbury

Statistics NZ has recently released a new 'Inside Canterbury' infographic. It contains data from several Statistics NZ data sources, such as the 2013 Census, the New Zealand General Social Survey, the Household Labour Force Survey, New Zealand Income Survey and the Household Economic Survey.

It's worth a look to check out the changing face of Canterbury. Our official population is now recorded as 586,400 and more of us (than the rest of NZ) report having supportive friends, family and neighbours.

Half of all migrants to Canterbury are from Australia, the UK or the Philippines.

Here's the link, or find it at www.stats.govt.nz

QM &

David Meates CEO Canterbury District Health Board

Sadly, between seven and ten children, on average, are killed each year by someone who is supposed to be caring for them. Child Youth and Family (CYF) has around five thousand children in its care at any one time. Another twenty thousand children around the country live in situations that aren't serious enough for the attention of CYF but who have complex unmet needs that need to be addressed before their circumstances get worse.

Once a child has been referred and accepted onto the Canterbury Children's Team, they are matched with one main professional or practitioner to be their main point of contact. They then make sure the right people who can help are involved.

The Lead Professional makes sure it all happens and that the child's and family's voices are heard. The teams aren't introducing new services, what's different is this is a joined up approach. No single agency alone can protect vulnerable children. Nor can all the issues be addressed from one aspect only.

Canterbury Children's Team is part of the Government's Children's Action Plan which maps out how the government is working to improve results for vulnerable children and their families and whānau. It ranges from establishing Children's Teams, to measures to protect vulnerable children and get better results, including safety checking of people who work with children, and a programme to build on the children's workforce capability.

For more information about Children's Teams and the Children's Action Plan visit <u>www.childrensactionplan.govt.nz</u>.

🖉 Inside Canterbury

Canterbury is home to 13 percent of New Zealand's population: 2009			Top 5 iwi affiliations in Canterbury: 2018		Canterbury has less ethnic diversity: 201 How Carlindory compress with the rest of New Zealand			
Canterbury tatal population		New Zealand total population	Ngôi Tahu/Kāi Tahu	15,372	functioner.	87%	10	72%
586,400		4,595,700	Ngipuhi	5,472	Macei	8%	wi .	16%
			Ngild Porcu	4,116	racific	2%	vs	8%
	Migration to Canterbury: 2015 Toff of migranis who move to Conterbury are from Australia. United Singdon, or the Philippines. Indexe only migrate who taked en others on their enviced		Nghi Tauhandsa	1,848	Asian	7%	vs	12%
ê"			waikato	1,749	Other	3%	V 5	3%
W II.					Gors not total 100% as geople may be sounded in more than one			

Labour market and income: 2015





Cantabrians have strong support networks: 2014





Facilities Fast Facts

Wayfinding

The Canterbury DHB has signed off on a wayfinding strategy that will guide all decisions regarding signage and nomenclature (a system of naming things) right across the DHB. This means we're saying good-bye to the multitude of signs, typefaces, colours and styles of signs that currently decorate the walls of our facilities.

Our new clean, uniform approach to signage will keep walls uncluttered and make it easy for people to find their way around a DHB facility.

The Wayfinding Strategy has been developed over the past year and involved workshops with experts, the design team, user and consumer groups. It will ensure that there is a consistent approach and prevent new and creative names being created. ALL decisions regarding signage are now required to be approved by the Facilities Governance Group chaired by Executive Director of Nursing Mary Gordon to ensure we stay consistent with our approved strategy. The Wayfinding Strategy Guidelines can be found here on the staff intranet.

The new signage will be rolled out progressively as more of our facilities get built or refurbished. The newest building to boast the new colours and look is the Rangiora Health Hub.



Migration Planning (Furniture, fittings & equipment)

If you're going to be moving into a new facility next year, don't give away your desk, bookshelf or noticeboard. Planning is underway to establish what equipment can be reused and what will need to be bought. Even if something may not be needed in your department, it may be recycled and re-allocated to another team. More details of the process, and what you will need to do will be available shortly. We will be recycling and reusing as much as possible.

Now's the time to clean out your office, dump the junk i.e. hard copies of reports, files and folders no longer needed. We'll also have more detail soon on what you (legally) need to save and store.

Burwood

The final decision paper regarding after hours hospital management for Burwood Hospital has been released and is available on the Facilities Development Project intranet site. The document details several changes that will be implemented including the establishment of new Clinical Team Coordinator and Duty Nurse Manager roles.

Between now and Wednesday 16 December information on the proposed recruitment process and selection criteria is available on the intranet (see appendix 1 and 2 of the Final Decision paper) with recruitment running until the end of January 2016. Individual meetings will be arranged with anyone impacted by the decision.

Implementation (including training and orientation) begins in March next year.

Click <u>here</u> for a copy of the document.

Work continues at pace on the ward blocks with the target for hand over still the end of the first quarter 2016. This picture shows the timber detailing and concrete shade fins on the exterior of ward block one.



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Christchurch

Staff Parking: A reminder about parking around Christchurch Hospital



The Park & Ride shuttle service that was set up for patients and visitors to Christchurch Hospital because of the loss of parking spaces on the hospital site and the closure of the blue public car parking building has now moved to Deans Ave to a parking lot set up by a private developer. Apart from the change in venue the service remains exactly the same - the shuttles are free and run between the Christchurch Hospital main reception/Hagley Outpatients and the parking lot every 15 mins from 7:00am to 8:30pm.

The communications team has pamphlets with maps and details of how to use the service; if you need any of these to distribute to patients and their visitors please email your contact details to itsallhappening@cdhb.health.nz and we will send you some.

There has been NO CHANGE to any of the staff parking that is already in place. The new Park & Ride location in Deans

Ave is for patients and visitors only at this stage – there is no staff parking available there are present. The developer of the car park has signalled his intention to create 500 additional car parks for the public (which would be available to staff and anyone else wanting to park there) however, they aren't available at present.

The Metro Sports Centre is still open for parking and there is no change to the adjacent CDHB Staff Afternoon Car Park, afternoon staff will continue to have access to this car park until at least 2018. Security staff are available to escort staff late at night to this parking lot; however there could be a short wait if security are dealing with other situations at the time. We also encourage staff to leave by the Main Hospital Entrance and walk together whenever possible.

The staff car parking building on the corner of Antigua and St Asaph Streets is available free of charge for all staff after 3:45pm daily. If you work late shifts, you may want to move your vehicle to this building later in the day as more parks become available. Security has a presence here when night staff are returning to their vehicles from 10pm – 11:30pm. You need to register your staff number and vehicle registration with the transport office in order to gain access to this carpark. Further information is available on Canterbury DHB's intranet which is available <u>here</u>

Canterbury Grand Round

Friday, 11 December 2015 – 12.15- to 1.15pm, with lunch from 11.45am.

Venue: Rolleston Lecture Theatre

Speaker one : Christine Walsh, Consumer Council

"Joining the dots: Connecting with Consumers"

Christine will cover the what, why and when of consumer engagement. What is important to consumers and what is currently happening in New Zealand.

Speaker two: John Thwaites, Consultant Geriatrician

"CDHB - the best place to train"

This presentation is an update on CDHBs implementation of the MCNZ New Zealand curriculum framework for prevocational medical training. The focus will be on sharing our current educational initiatives, plans for the first cohort of PGY2 doctors with the new curriculum and vocational career planning.

Chair: Mike Epton

Video Conference set up in:

- » Burwood Meeting Room
- » Meeting Room, Level 1 TPMH
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton
- All staff and students welcome

Talks (with speaker approval) will be available in two weeks on the intranet.

Next Clinical Meeting – Friday 19 February 2016

(Rolleston Lecture Theatre)

Convenor: Dr RL Spearing.

ruth.spearing@cdhb.health.nz



Bouquets

Ward 28, Christchurch Hospital

To the wonderful angels on Ward 28 – each and every one of you. Words will never be enough to express our gratitude for the love and care you all gave ... during her stay. We will never forget your commitment to her wellbeing and efforts to keep her as comfortable as possible. Her star shines brighter because of you all. Thank you from the deepest part of our hearts.

Emergency Department & AMAU, Christchurch Hospital

Please accept our sincere thanks for the excellent care I received while in Christchurch Hospital. I was admitted at the tail end of a very enjoyable holiday in the beautiful South Island and the kind attention and friendliness of each member of the staff I encountered was just what we'd experienced along the way, even though they were working, not in Hospitality but in a potentially far more stressful occupation. I was made to feel comfortable, at home and well cared for by everyone and experienced excellent medical care.

Please pass on our sincere thanks to all in ED who handled my care and in AMAU: the team of doctors; Nurses Kim, Rey, Claire and Nikole; Denise Dwyer, who kindly wrote a letter on our behalf; the lovely cheerful lady who delivered the meals and drinks (her name unfortunately escapes me) and Makani, the Spotless employee who kept the area sparkling. Also please pass on our thanks to anyone else involved in my care during that time...they all did a great job! I want to mention also that I found the atmosphere in AMAU to be so comfortable, it was apparent to me that the staff had an excellent relationship with each other. We were far from home but you made us feel at home. Thank you all so much! Keep up the excellent work!

Julia Reeves, Nick Abernethy and his team– Food Services Christchurch

I was really impressed with the choices, quality and thought that went into the organisation of the staff Christmas lunch at the Main Campus on Thursday. It was an efficient, smoothly run, pleasant lunch. Thank you Nick and your team.

Lee Tuki

Department of Psychological Medicine, University of Otago, Christchurch & Specialist Mental Health Service, Canterbury DHB Tuesday Clinical Meeting

Tuesday 8 December 2015, 12:30pm - 1:30pm

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

Title: Treating depression in patients with an alcohol use disorder

Presenter: Dr James Foulds, National Addiction Centre

Special notes:

- » These meetings are held on a weekly basis (except during school holidays).
- » A light lunch will be served at the School of Medicine venue, 7th Floor, from 12 noon.

- » Psychiatrists can claim CME for attending these meetings.
- » The sessions will be broadcast to the following sites: For TPMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at TPMH. For Hillmorton attendees the venue is the Lincoln

Lounge, Admin Building, Hillmorton Hospital

- » The dial in address is: Psych Med Grand Round.
- » If you have difficulties dialling in please call 0800 835 363 to be connected.



Well known Sumner resident thanks staff

Nancy Meherne's recent stay in hospital was a rare event, her first hospitalisation for illness in her 86 years.



The well-known Sumner resident, who has featured in newspaper and television stories is a fantastic example of wellness and activity in old age, gardening, cycling and even body surfing.

A former primary school teacher, Nancy has dedicated much of her life to helping children discover the joy of learning how to play a musical instrument. In recent years she taught music at Sumner School and today still has 20 piano students who come

Above: Nancy Meherne.

to her home for lessons, including the 76 year old father of a former student.

Nancy has recovered well from her illness and wrote to Canterbury DHB Chief Executive, David Meates, thanking those involved in her recent hospital care.

"I wish to express my thanks for the care and expertise of your staff during my three day stay in your hospital. I somehow managed to suffer pneumonia, maybe due to opening a bag of biograde soil and shovelling it from a large heavy bag in the boot into a wheelbarrow bit by bit without a mask."

(Nancy hopes her experience will encourage others to always wear a mask when opening soil or potting mix.)

Throughout her stay at Christchurch Hospital she was impressed by the friendly and efficient staff who "never wasted time", she says.

"I felt the entire organisation was competent and the doctor in charge was most knowledgeable and observant."

Nancy is the youngest of three children, she has two brothers aged 91 and 88.

Her younger brother cycles up to 30 kilometres a day, still dances and has never been in hospital. Her older brother walks without the aid of a stick despite suffering a broken pelvis and broken leg when he was knocked under a bus which had to be lifted off him by crane.

Nancy credits much of her and her brothers' good health to the diet her parents established when they were children (partly due to her father's serious health problems after being wounded in the battle of Passchendaele, "with all its lack of food, terrible conditions and aftermaths").

"We had plenty of fruit, vegetables, wholemeal bread, virtually no sweet things like cakes, biscuits and rich puddings, just junket with fruit every day. The family ate meat, but always in moderation and not every day, had lots of exercise and "were never really sick".

Nancy says she wishes everyone could share in the experience of healthy living that she and her brothers still enjoy.



Above: Nancy looking after her plants in her glasshouse.

Hot Topics from Child Health Nurse Educator team

Please find attached the summer edition of Hot Tips. Inside this issue you will find:

- » Several stories about poverty and child health.
- » A report from a recent visit to Christchurch by Russell Wills, Commissioner for Children.
- » The 'Society Page'...not really, but there are photos.
- » A College of Child and Youth Nurses AGM report.
- » Some Summer entertainment ideas: a movie and a book.



Next steps for Hurunui health

Work is now well underway to develop a locally-led model for health services in Hurunui.

The work forms part of the Canterbury Rural Sustainability Project, a health system initiative facilitated by the Canterbury Clinical Network aimed at supporting rural communities to lead the modelling of their health services.

Rural Health Manager, Craig Watson said the project aims to provide people in rural communities with access to the most appropriate and sustainable health services to meet their specific needs.

"Leaders from the Hurunui community and wider health system came together in July 2015 to discuss the sustainability and effectiveness of health services in Hurunui," Mr Watson said.

"From this workshop, seven areas of focus were identified for enhancing the community's health services."

Two working groups made up of people with specific perspectives were formed to explore these areas of focus. One group focused on the integration of health services in Hurunui, including better coordination between primary, secondary and community services.

Recommendations from this group included beginning the process of discharge from hospital at the time of admission in order to better ensure a seamless transfer of care back to primary care.

Other recommendations include promoting the use of telemedicine and investment in reliable technology that integrates with the whole health system.



Above: Discussing opportunities for health services in the Hurunui at first meetin held on 27 July 2015.



Above: Carolyn Gullery addresses the first meeting as part of the Rural Sustainability Project in Hurunui held on 27 July 2015.

The second group focused on the sustainability of the health workforce in Hurunui, particularly in the provision of afterhours services.

The group's recommendations included providing visibility of patient notes/basic information to St John and improving communication across health providers of services already available.

The groups also developed a set of collective principles that will guide the ongoing work, which includes values like the patient being at the centre of the model, enhancement of services appropriate to the needs of the population and providing services closer to home and matched to acuity/ need.

Mr Watson said the findings are now under reflection by the main group and are expected to inform the next steps in developing a locally-led model for health services in Hurunui.





Pre-Christmas meal enjoyed by staff

Christchurch Campus staff were treated to a pre-Christmas meal on Thursday.

Staff had a choice of ham, chicken, vegetarian strudel, new potatoes, vegetables, gravy, and apple sauce. Dessert was either steamed pudding and custard, or fruit salad.

Christchurch magician Elgregoe entertained staff waiting in line while guitarist Graham Wardrop provided relaxing background music to the diners who stayed to eat their meals in the Great Escape Café.

As always there was a huge turnout of staff and a big thanks to everyone who volunteered to help with serving meals and ushering the queue as they waited in line to be served.

Go to the <u>Canterbury DHB Facebook</u> page to view a video of staff enjoying their lunch at Christchurch campus.



Christmas meal celebrations at Hillmorton

Staff turned up to the Avon Cafe at Hillmorton campus in large numbers for the delicious breakfast and lunch options. Festive songs and other musical entertainment were provided during the lunchtime sitting by Te Korowai Atawhai and very special guest Eddie Low.











Above: Kath, Karen and Bev - the very festive Avon Café serving team at Hillmorton campus who made sure everyone got fed.

Left: Festive songs provided by Te Korowai Atawhai with special guest Eddie Low.

our health system



Information Services Group (ISG) wishes to advise staff that as we approach the Christmas and New Year break they need to be extra vigilant with opening emails and attachments from unknown sources.

At this time of year spammers and hackers email out electronic Christmas cards which are infected with viruses. If you are unsure of the sender, please do not open the email, just delete it.

Another threat is phishing attacks that attempt to draw the attention of recipients with the subject line "Your mailbox is over Quota" [for example], while the sender may appear to be Information Services Group (ISG).

Users are directed to a fake website and asked to enter private information. In the event that you receive a message fitting this description: ...

Phishing is a process used by fraudsters to acquire sensitive information such as usernames, passwords and or credit card details by pretending to be an email or message from a trustworthy organisation. Communications claiming to be from banks, popular social websites and auction sites are commonly used to trick the unsuspecting public. This has been greatly reduced with the two factor authentication project which ISG introduced earlier this year. Remember:

- » ISG may send you an email from time to time, but this communication will never ask you to enter your CDHB user name and password either through an email, text message or a website.
- » ISG will not ask you to enter any of your security details into a pop-up screen. If you see one of these screens then it is almost certainly a scam.
- » If you have been presented with a pop-up screen asking you to enter your security details. This is also almost certainly a scam.

Our email traffic is filtered which provides you with protection against dangerous viruses and spam. However, some spam may occasionally get through to your inbox or may be diverted to your Quarantine Summary, so please use caution.

We ask you to remain vigilant of these uninvited emails and remind you that you do not provide your CDHB user name and password on any website that you are directed to.

By following the above we will ensure that CDHB staff can continue to work without disruption over the festive season.

Printing in colour ten times more expensive

Information Services Group (ISG), wishes to advise staff that the cost of printing in colour is ten times more expensive than black and white (b&w).

The full cost will be incurred even if a blue dot or a single underline is printed in the document in colour.

ISG has set the system default to print b&w. However, staff are able to change this setting when they are printing.

ISG strongly recommend that all documents are printed in b&w and printing in colour should be an exception which will reduce costs.

In the New Year, a campaign will see posters (see below) being placed on noticeboards throughout the organisation.

Should you have any questions, please contact Geoff Prosser, Geoff.prosser@cdhb.health.nz







Standing Orders launch

The first standing orders of a new coordinated, system-wide package have been launched, aimed at supporting health professionals across Canterbury and the West Coast.

A standing order is a written instruction issued by a medical practitioner authorising a specified person, such as a paramedic or registered nurse, who do not have prescribing rights to administer and/or supply specified medicines and some controlled drugs. The intention is for standing orders to be used to improve patients' timely access to medicines; for example, by authorising a registered nurse in a primary health care setting.

The Canterbury West Coast Standing Orders Development Group in association with HealthPathways and HealthLearn are pleased to begin the launch of the standing orders package firstly in Canterbury. The West Coast version of the standing orders will be released on the West Coast early in 2016.

Standing orders now available: Emergency Contraception Pill (ECP) and Uncomplicated Urinary Tract (UTI) in Women.

A writing programme is currently underway which will see a further 20 standing orders come on stream as they are developed. Cellulitis, Acute Otitis Media and Adrenaline for Anaphylaxis are the next planned for released.

Support and training resources have also been made available.

Search Standing Orders on HealthPathways or visit http://bit.ly/1SvEgG1 for more information.





Canterbury Collaborative Simulation Interest Group (CCSIG)

Date: 15th December

Time: 1.00pm – 4.00 pm

Venue: Bevan Lecture Theatre, 7th Floor, University of Otago School of Medicine, Christchurch Hospital

Registration fee: No charge

Draft Programme:

- "HUMAN FACTORS IN MEDICAL DEVICE DESIGN: SIMULATION AS A TOOL." Michael Sheedy, Bio Medical Engineer
- SIMULATION IN THE MILITARY Sgt Garreth Pratt, Instructor, DHS(NZ)
- New Zealand Defence College, Burnham
- SIMULATING COMPLEX HUMAN BEHAVIOUR- AN AVIATION PERSPECTIVE'- Captain Ian Munro. Airline Training Manager | Mount Cook Airline

TO REGISTER PLEASE CONTACT: Professional Development Unit.





Safe Sleep Day was observed last Friday 4 December. The project started as a Canterbury initiative for Safe Sleep Day 2015, led by Child and Youth Mortality Review Group, Canterbury District Health Board and Change for our Children. The aim is, through community awareness, to see an end to pillow-related deaths of babies.

Key Message of the day: Make every sleep a safe sleep - for every baby.

Secondary key messages:

- » Place baby in their own baby bed
- » Eliminate smoking in pregnancy and protect baby with a smoke free environment.
- » Position baby flat on their back to sleep.
- » Encourage and support mum to breastfeed.

As part of the observation Elaine McLardy, SUDI researcher for the coroner, presented three informal education sessions at Christchurch Women's Hospital for staff. Static displays were also on show at Christchurch Women's Hospital and the paediatric department at Christchurch Hospital and resources (to share with staff and new parents relating to safe sleeping) were made available at all CDHB maternity units.



hange for our Children Limited (2015)

Nature's pillow is the only pillow a baby needs.

Young babies have large and heavy heads with a bulge at the back. This bulge is like nature's pilow. It is the only pillow a baby needs until they are about three years old.



Nature's pillow protects babies when lying on their backs. It helps keep them in a safe position during their vulnerable first months.

Pillows feature in too many infant deaths

Pillows can push a baby's head forward and cause breathing to slow down or stop.

Babies placed, or propped, on pillows can tip or roll off and then get onto their fronts, into gaps, or under or against someone or something.

Many things can act like pillows e.g. cushions, tri-pillows, bean bag products, soft materials, even the crook of a parent's arm.

Pillows near sleeping or unsupervised babies are dangerous. They can lead to suffocation.

Please talk pillows to help make every sleep safe for our babies





Christmas Card orders

Here's the printed Corporate Christmas Card on offer this year – please place your order via communications@cdhb.health.nz.

Christmas Card for emailing

In addition to the printed card we now have available a holiday season greeting which you can send to colleagues via email.

Holiday message from Canterbury DHB...

To send just copy and paste the link above into your email.



a safe and enjoyable holiday season!



CHOOSE a career with us...

Positions at Brackenridge

Brackenridge supports people with learning disabilities to create lives. We are committed to providing person directed services to our clients.

We are on an exciting transformational journey aimed at improving the quality, safety and effectiveness of services in support of the clients we serve.

General Manager, People & Capability - Brackenridge

A new role has been created for a General Manager, People and Capability to help lead this journey. Reporting to the Chief Executive Officer you will lead, facilitate and support improving our people and capability, holding overall responsibility for service performance of this area. Together with the CEO, this role will drive organisational strategic planning while increasing employee engagement and improving organisational culture. We are seeking a strong, enthusiastic people focussed leader with exceptional communication skills. If your experience demonstrates a strong Human Resource Management background that doesn't just implement but inspires a shared vision throughout an organisation then we want to hear from you.

Applications for this role will close 16 December, please apply online or call Kathryn in Recruitment 0212470471 for a confidential discussion.

GP - South Westland

As General Practitioner at the South Westland Medical Practice, you will be based in the beautiful glacier township of Franz Josef. In this role, you will assist to cover primary care to the communities over a 250 km stretch. Each of the settlements has a medical clinic, each run by a Rural Nurse Specialist.

A generous relocation package will be offered to help you settle in to the new role and location. Subsidised accommodation and a work vehicle will be provided, together with support in gaining medical registration and a work visa if required.

Contact Rachael Salter - Recruitment Specialist on +64 (0) 27 839 5946.

General Manager, Service Delivery - Brackenridge

Reporting to the Chief Executive Officer this role will provide the strategic leadership and senior management for the portfolio of services that delivers support to our clients. As well as having budgetary, staffing and operational responsibility for the service of these portfolios, you will also be instrumental in improving service quality and developing new service programmes to support our clients.

If you are passionate about supporting people to create great lives, have senior leadership and management experience within the health and disability, education or social services sector and can show demonstrated change management and service improvement experience and confidence then we want to hear from you.

Applications for this role will close 16 December, please apply online or call Kathryn in Recruitment on 0212470471 for a confidential discussion.

Clinical Lead

We're looking for an experienced General Practitioner who will champion change within a leadership position at a really exciting time for the Westport practice. As a GP, you will get to experience multi trauma accidents, have a varied and autonomous role and be in a position that offers a huge scope of practice and professional development. You will be supported by a team of nurses who go above and beyond.

Vehicle and accommodation covered for the first month as well as a generous relocation package.

Contact Rachael Salter - Recruitment Specialist on +64 (0) 27 839 5946.

Ashburton Hospital shows support for White Ribbon pledge

Signing the White Ribbon pledge is (from left) Evans Chibanguza, Social Worker and White Ribbon Ambassador, Director of Nursing Jan McClelland and Clinical Director John Lyons.





One minute with...Richard King, Chemical Pathologist, Canterbury Health Laboratories

What does your job involve?

Providing pathologist oversight and a clinical perspective to the work of the laboratory. The laboratory receives about 2800 specimens per day and performs more than 4.3 million tests per year. In biochemistry we measure over a thousand different analytes in many different matrices including blood, urine, cerebrospinal fluid, saliva and tissue from patients. The pathologist has a role in ensuring the laboratory produces quality results in a timely manner. I cover the areas of clinical biochemistry and genetic pathology.

Why did you choose to work in this field?

In addition to medicine, I studied chemistry, this field allows me to harness skills from both these disciplines.

What do you like about it?

Medicine is pathology - the application of science to medicine and understanding the fundamental basis of disease is fascinating. Pathology provides many intellectual challenges and often debunks long held beliefs. Every day is different and brings new challenges. We are at the frontier of a new era of genomic medicine, I believe this will change the way we will practise medicine. The development of non-invasive prenatal screening (NIPS), pre-implantation genetic diagnosis (PGD) and screening (PGS), the role of genetics in cancer and the possibility of targeted cancer diagnostics, treatment, monitoring and potential curative therapies are all stimulating new developments, it is a very exciting time to be a pathologist.

What are the challenging bits?

We are called on when results are discordant or do not fit the clinical picture, finding out why is always interesting. In addition to understanding the many biochemical tests, there is still much to learn in the field of genomics – whilst we can sequence the entire human exome on a bench-top analyser in two days for a similar cost to an MRI scan, the interpretation of this data is where the real challenge lies.

The exons, which code for the proteins in our bodies, make up only one to two percent of the human genome, the function of much of the remaining 98 percent is still to be discovered. The nematode worm Caenorhabditis elegans has as many genes as we do, about 20 000, our complexity comes from how these genes are put together through alternate splicing; we are only just beginning to understand this process along with the epigenetic phenomena which control gene expression.

Post-translational modification of proteins adds more complexity. Pathological diseases have so far been ascribed to only about a guarter of our genes. We still have much to learn.

Who do you admire in a professional capacity at work and why?

The scientific, technical and support staff who keep the laboratory running 24 hours a day, seven days a week. They have so much knowledge and continue to push the boundaries, introducing new tests and maintaining those currently in service.

What do Canterbury DHBs values (Care and respect for others, integrity in all we do and responsibility for outcomes) mean to you in your role?

Each sample is precious, it comes from a patient in need of answers – laboratory results leverage decisions in all branches of medicine and from all age groups, from before you are born to after death. We have a duty to provide the right answer, on the right patient, at the right time, for the right reason and assist clinicians in caring for these patients.

The last book I read was...

Identically different – by Prof Tim Spector. This book is a light hearted look at epigenetics and how the environment can influence gene expression. It goes some way to explaining why despite having the same DNA, the basic building blocks of life, identical twins can have distinctly different behaviours, diseases and outcomes.

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

In the garden. I valiantly try and grow all our own vegetables, having a meal made entirely from home-grown ingredients is very satisfying.

My ultimate Sunday would involve...

Being woken by a lick and the wet noses of our dogs, after a night under canvas in the back-country. To see the sunrise over a stunning view of the Southern Alps stretching out before us, and breakfast of bacon and egg butties. Food always tastes so much better in the great outdoors.

One food I really dislike is...

I generally enjoyed school dinners but my heart always sank when it was tapioca pudding, the dollop of red jam floating in the sea of frogs-spawn didn't make it any more palatable. I have avoided it ever since.

My favourite music is...

I first experienced opera teetering in the 'gods' at The Royal Opera House, Covent Garden; La Boheme by Puccini, in Italian. It was a moving experience.



Richard King

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



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News from the Regional South Island PICS Office

In the November edition:

- » Want to see the journey Agnes takes?
- » SI PICS programme team leaders cutover planning day.

'Be Present' fully booked – Video Conferencing available

Due to very high levels of interest the 'Be Present this Christmas' presentation by Dr Caroline Bell, from our Anxiety Disorders Service, and Ciaran Fox, from All Right?, is being made available on Video Conference. The presentation will take place between 12pm-1pm on Wednesday 16 December, and the following sites have been booked for Video Conferencing:

- » The Princess Margaret Hospital : Level 1 Meeting Room
- » Hillmorton Hospital : Lincoln Lounge, Administration Building
- » Burwood Hospital : Spinal Unit (TBC)
- » Ashburton Hospital : Whakanui Room
- » Kaikoura Integrated Family Health Centre : Meeting Room

Video Conferencing will also be available at Christchurch Hospital - location to be confirmed. More information will be available in this week's global emails.





The Staff Wellbeing Programme presents...

Dr Caroline Bell Is a consultant psychiatrist at the Anxiety Disorders Service with a particular interest in managing stress.

Ciaran Fox Is the mental health promotion strategist for the All Right? campaign. He is a programme design and delivery specialist for the Mental Health Foundation.

TOPIC

An opportunity to learn about the importance of taking care of ourselves – particularly during the holiday season. Caroline and Ciaran will talk for 20 minutes each followed by a further 20 minutes of general discussion.