



Ongoing testing at Christchurch Hospital Hagley to assure high quality standards are met

Further to my message to all staff last week, I've included below a joint media statement issued today from the Ministry of Health and Canterbury DHB:

The Ministry of Health and Canterbury DHB say the migration of services to Christchurch Hospital Hagley has been delayed as testing and checking is ongoing.

It's important we take the time to ensure the finishing work, testing and commissioning of the new hospital is completed to a high standard, says Michelle Arrowsmith, Deputy Director General, DHB Performance, Support and Infrastructure.

"It's disappointing there are further delays with finishing Christchurch Hospital Hagley, however, both the Ministry and Canterbury DHB are committed to getting this important process right.

"This is the largest hospital ever built in New Zealand. It's a highly complex project involving a large number of subcontractors as well as our main contractor CPB.

"A build of this size requires a significant amount of checking and documentation as part of commissioning. This process is taking longer than expected. As a result of some of the testing, we have found a number of issues that need to be rectified.

"For example, we are still waiting for test results on the small batch of brackets holding the panels above the main entrance. We're also doing an audit of the passive fire systems, as well as programming the Building Management System.

"It's important we take the time to get this right to ensure we deliver a high quality safe facility for people in



The migration of services into Christchurch Hospital Hagley has been delayed

Canterbury. As a result, we have agreed with Canterbury DHB to delay our handover of the building until next year," says Michelle Arrowsmith.

Canterbury DHB Chief Executive, David Meates, says while it's disappointing as the teams are looking forward to moving into the new hospital, it's important the necessary time is taken to ensure the hospital is fully completed.

"We have always been clear that we need to have the building completed, fully commissioned, cleaned and with sufficient time for staff orientation and training to be completed before we move in.

"Both the Ministry and Canterbury DHB are very clear that a delay is preferable to moving patients into an unfinished hospital. Patient and staff safety is paramount.

"New timings will be updated next month," says David Meates.

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Taking care of ourselves so we can take care of our community

For more than a decade, the Canterbury Health System has been on a journey to put patients and our communities at the core and heart of everything we do. By holding this focus, we've made extraordinary gains, and together we've transformed our health system to what it is today – one of the most integrated, connected, data-enabled and person-centred health systems in the world. I want to acknowledge every one of you for contributing to this extraordinary achievement; it's an outcome of our collective efforts across every team, every service, and every part of the system. Thank you.

Through 2019, I've had the privilege of leading this organisation through one of its most challenging years to date. I'm keenly aware that we're pushing ourselves hard, and our focus on delivering care to more people than ever before at the standards we uphold so highly is coming at a cost to our own wellbeing. We can't simply add more people – we're already operating many of our services in really efficient ways, and there aren't many easy solutions to some of the challenges we're collectively facing. I'm seeing and hearing the impacts of this from many of you, and in the data that shows sick leave across the DHB has increased significantly over the past few years.

And so, as well as celebrating all that we've achieved, I do want us to talk more openly about the pressures we're working within and that all of us are navigating. I want us to be exploring alternative ways of working. The time is right for us to be doing all we can to focus on our own wellbeing.

The most immediate and important action we can take is to change our approach to leave. We know that many people continue to accrue annual leave, while their use of sick leave increases at the same time. This tells me we have to do more to take solid breaks throughout the year, to rest, recharge and connect with family/whānau and friends.

Over the coming Christmas period, our number one priority is to proactively enable as many people as possible to take a break. With my announcement to staff on Friday about our delayed move into Christchurch Hospital Hagley, this is now possible for more people than before. And for those of you who can't be on leave over Christmas and New Year because you're caring for our community, I want you to be working with your manager to agree and action a plan to take a solid break as soon as possible after that.

When we're more proactive about our annual leave, we create a triple win for all of us. When we're well rested, we're refreshed, more resilient and less likely to get sick; patients are on the receiving end of even better care; and our organisation and health system are more productive and efficient.

So, in closing, you'll be hearing much more from your leaders about our new approach to Leave Care. This includes how we better support those of you who are unwell, and how we encourage you to take the time off you need to restore and recharge, so all of us can be our best selves for the patients and communities we serve, and the colleagues we work alongside.

If you're working this long weekend, thank you. If you're off, enjoy the break.



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

David Meates
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@cdhnb.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

Ward B2, Burwood Hospital

I am writing to thank the staff of Burwood Hospital for their professional and personalised ongoing care of our mother whilst she was recuperating, and for the support given for her to transition into rest home care that has resulted in a very happy lady enjoying a dynamic and positive ageing environment. She was very fortunate to have such wonderful staff care for her in such a brilliant facility. We in turn were very lucky to have such support for a key life milestone transition. Please convey our thanks to all concerned.

Emergency Department (ED), Christchurch Hospital

At the beginning of October, I was in the ED waiting room awaiting the arrival of my mum via ambulance. I received a call to say she had passed before they could transport her. I was extremely upset. A nurse came out of ED and straight to me to ask what was happening and to move me to a private room to process this news. Unfortunately, I did not get her name. She was amazing in my time of grief. She was essentially the first person I had contact with after finding out the news of my mother's passing. She sat with me and consoled me, contacting a friend to come and sit with me until someone came to pick me up. All I can remember is that she was wearing bright pink shoes and had the most fantastic and empathetic attitude

without being overbearing. You have a real asset in her and her empathy. I come from a role in emergency services myself and can only hope I provide half the support to those who I come into contact with each day that she gave me. I am passing on this feedback in the hope it will reach her, and she will take some comfort in the fact that she helped me through one of my worst days. Without her, that day would have been much harder.

Level 3, Christchurch Women's Hospital

I was admitted briefly to Christchurch Women's Hospital for observation at 23 weeks pregnant. This was an anxiety-provoking time, however, the excellent care we received from the ward midwife and obstetric registrar put my husband and I at ease. Their knowledge, skill and bedside manner will never be forgotten.

Emergency Department and Ward 29, Christchurch Hospital

I was given great care by all staff, orderlies, doctors, nurses, food staff, etc. Nothing was a problem, and everyone treated me with respect. I appreciate the professionalism of all the Canterbury DHB staff.

Ward 25, Christchurch Hospital

I was very happy with my recent stay in Ward 25. I found all the nurses and people I dealt with very understanding and friendly. They took very good care of me.

Ward 17, Christchurch Hospital

After surgery I was visited in the morning by a wonderful Māori woman. I cannot put into words how important that was.

ED, Ward 11, Surgical Assessment and Review Area (SARA), Christchurch Hospital

Recently I had to visit Christchurch Hospital and was admitted for two nights. I stayed in several wards with lots of different staff looking after me. I was overwhelmed as every single person who dealt with me was amazing. They made me feel comfortable, they were always there when I needed something, and they eased my nerves a lot! I would like to praise them for everything they do. They are awesome people and you are very lucky to have them in your team. A big thank you to Nurse Joseph in ED; an ED doctor, whose name I think is Eden; SARA ward nurses, Danielle, Stella and Pip; Jose and Ruby in Ward 11, the orderlies; and the whole surgical and anaesthetic team. What was supposed to be a very hard time for me they all made so easy. Thank you guys so much for everything.

Ward 24, Christchurch Hospital

The way the staff/nightshift look after their patients is outstanding.

Ward 11, Christchurch Hospital

Fantastic care and terrific staff. Thank you for all you do.

Ward 10, Christchurch Hospital

I am a current patient in Ward 10, under the Vascular Team. I would like to make a special mention of Anaesthetist Hamish, who kept me alive during my surgery. I am grateful to be able to return to the golf course. Thanks to you all.

Caroline, Reception, Oncology, Christchurch Hospital

I am writing to say that Receptionist Caroline in Oncology is fantastic. Every week she puts a smile on my face and she cheers me up after chemotherapy.

Medical Day Unit, Christchurch Hospital

The nursing staff are excellent. Thank you all for your care.

Eye Outpatients, Christchurch Hospital

Martine directed me over to Lorena and Donna to help with my lost property. I found them very helpful, caring and humorous all at the same time.

Eye Outpatients, Christchurch Hospital

Thank you for the wonderful service I have had from the Eye Clinic.

Karen, Reception, Level 4, Outpatients, Christchurch Hospital

We were greeted and assisted by Karen. She was just wonderful. Smiling, welcoming and very helpful. She is a true asset to you.

ED, Christchurch Hospital

My son came into ED due to a severe asthma attack. I was so impressed with the care he received and would like to thank all the staff in ED for the work they do. There was a staff change over and this was explained to us. The lady at reception kindly explained that I had arrived before the ambulance and calmly took my details and checked my son's address and phone number. Once he arrived he received excellent care from the doctor and nurses. Everyone was so respectful of him, taking the time to listen to him and gain all the

information. There was no hesitation in taking an x-ray when he shared that he had fallen from a horse the day before and winded himself. The process was very quick from the time it was decided an x-ray was appropriate to when it took place. It was reassuring that he remained in the observation area prior to going home but equally good that he did not need to stay in hospital unnecessarily. I went to the café as suggested by a staff member. In the process of getting there I got lost, a security guard showed me where to go. The staff at the café were friendly too. Once again, I wish to thank the staff. Keep up the great work.

ĒTAHI ARA E RIMA KI TE NGĀKAU ORA WHAKATŌKIA NGĀ RAUTAKI MĀMĀ NEI KI TŌ AO KIA RONGO AI KOE I NGĀ PAINGA



Let's get ready to move Christchurch Hospital Hagley

Update No: 28

The move to Christchurch Hospital Hagley will bring with it many new ways of working. Over the coming weeks, we'll be looking at some of the main changes. Many of these are included in the [healthLearn](#) module, which all staff are expected to complete before migration begins.

Delay, don't desist

While a delay in the handover of Christchurch Hospital Hagley from the contractor has been confirmed, it is important that planning and preparation for migration continues.

Migration preparation work around the building will change to allow for essential duties to be carried out while minimising those jobs that may interfere with the build works of the project. However, familiarisation/planning visits will continue as the spaces and routes to, from and within the building will not change. Please note, however, that use of lifts will remain limited.

The building is a very large workspace, and staff need to be intimately familiar with their part in it to ensure smooth running once we do take ownership. To this end, access to the building will be restricted and managed *but it will continue*.

Please make use of the other resources for familiarising yourself with the building – such as the [healthLearn package](#), the 360-degree tour and the many maps and route outlines that are available on the [intranet page](#) and from your Hagley Operational Transition team representatives. The combination of getting on site and getting familiar with the materials off site is a winning one.

Personal Protective Equipment (PPE) requirements for accessing the building are unavoidable so it's imperative that you check with the Facilities team and your manager if and when you take part in a familiarisation/planning visit. It is also essential that all access is requested through the Facilities Development Projects (FDP) team for all entry to the building. Requests for familiarisation/planning visits from the trainers will go through Nurse Manager Rebecca Syme and Project Manager – Hagley Operational Transition Yvonne Williams, who will coordinate with (FDP). The responsibility for our staff on site sits with the FDP team and so no staff are to enter the building without this express permission/guide.



Members of the Acute Medical Assessment Unit (AMAU) team in the Hagley foyer during a familiarisation tour



The AMAU team check out the staffroom on the Ground Floor

Watch this space

There are exciting things planned for the terrace space between the Towers on Level 3. Discussions are underway for fundraising for a beautiful space that will give staff, patients and whānau the opportunity to take a break, catch their breath and enjoy our beautiful place in the world. Stay tuned for developments!

Scope change vs defect process

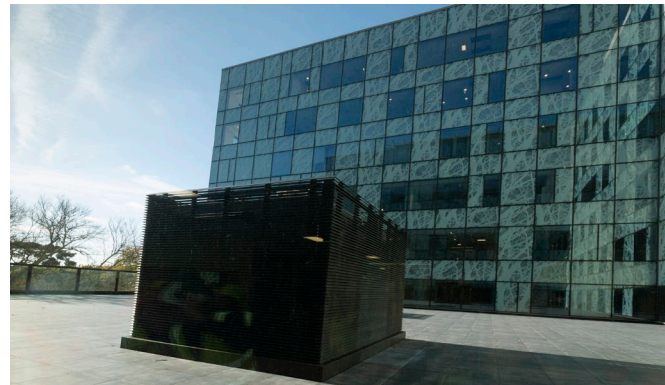
As we get familiar with our spaces within Christchurch Hospital Hagley, there are inevitably questions about things that need to be changed or corrected. The [intranet page](#) has a link to the process for scope change and defect advice, including clear definitions of both.

Scenario testing

Early last week, a small team carried out scenario testing of routes to, from and around Christchurch Hospital Hagley to find out how long it's likely to take to migrate patients and equipment on move days. More than 10,000 steps were achieved over a remarkably small number of hours, along with clear times of routes that will be used by staff for migration and workflow planning.

No patients were needed for the test-runs, as several team members volunteered to be wheeled around the hospital in the name of research. Our thanks to the teams who took part, and our brave patients.

A short video is available on the [Facebook](#) and [Intranet pages](#), and the final routes and times can be found on the intranet page.



Plans are afoot to make the Terrace space usable and beautiful for patients and staff



The ICU team testing the route from Hagley ICU to Interventional Radiology. Times for the most common routes are now on the intranet

PINteresting...

When you get settled into Christchurch Hospital Hagley, you're going to need to know your PIN number for your swipe card, as some of the doors will require both a swipe and your PIN.

If you don't know your PIN number, email the ID Badge Office on IDBadgeOffice@cdhb.health.nz and request it be sent to you.

Please note the email must come from your Canterbury DHB email address and include the following information:

- › Your Employee Number
- › Your Access Card Number
- › Your full name (as it appears on your ID Card).

Stay in touch

Follow the [Facebook page](#) or email us at letsgetreadytomove@cdhb.health.nz.

ISG Download

Thomas Sardelich-McNutt: Transalpine ISG's KiwiBank Local Hero Medallist

Every year, Kiwibank runs The New Zealander of the Year Awards to celebrate everyday Kiwis who are making New Zealand a better place.

One of the categories is the Kiwibank Local Hero award, and Transalpine ISG Network Administrator based in Greymouth, Thomas Sardelich-McNutt, was one of 2019's winners.

As described by Kiwibank, "the Kiwibank Local Hero award recognises those whose selflessness and determination has made a difference in the community. It provides a special opportunity to all New Zealanders, who have witnessed or experienced the contributions made by this year's medal recipients, to say thank you, we appreciate what you are doing to make our communities better."

Thomas says: "I was nominated for my work within the community at the Life Education Trust and the Rotary Club, and the work I do that is over and above what is expected of me. For the Life Education Trust I worked on the digital upgrade of the classroom and I was involved in confirming the scope of the upgrade and installing a TV. Now, a student can stand up in front of an Xbox Kinect camera and hold their arms out and the screen shows in real time where their organs, veins and arteries are."

For Rotary, Thomas assisted with this year's Bookarama by collecting books from drop-off points, sorting

them and assisting with the setup for the weekend so that the public could easily find their next second-hand book.

"I'm the youngest person in the Greymouth Rotary Club helping at events. I took part in the 2018 Inspiring Stories Future Leaders programme looking at community-based issues like improving mental health and addressing drug and alcohol addiction and what we can do as a group to identify and potentially resolve them," Thomas says.

Thomas's partner nominated him for the award.

"I sometimes think I don't deserve the recognition and feel there are a lot of people that do 'good in the hood.' I do it for the value of giving something back to the community, as a lot of people from the community have helped me in various ways.

"It is nice to be acknowledged and I hope this inspires other young



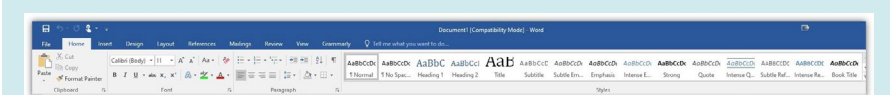
Thomas Sardelich-McNutt

people to follow and get involved in their local Rotary Club or contribute back to their community in one way or another," Thomas says.

Have a look at the [Awards website](#) to find out more about these annual Kiwibank awards.

What's different about Word 2016?

The Windows 10 team continues to progressively install Windows 10 and Office 2016 across Canterbury DHB. When you first use Microsoft Word 2016, you'll likely notice it is very similar to Word 2013, but the difference sits more in the categorising of the icons in the toolbar (or what Microsoft calls 'the ribbon'). You may have noticed that some icons that used to be under a certain tab (e.g. the Design tab) now sit under the Home tab. You can, however, customise the ribbon. [Read more here on customising the ribbon.](#)



250,000 – a milestone worthy of a plaque

Last week we told you about the South Island Alliance's (all five South Island DHBs combined) achievement of a cool quarter million entries on Safety 1st.

This week we can reveal who was the quarter millionth 'customer', and if you look a little closer at the stats, it'd be no surprise to those who work with them that the Patient Record Release Office – a discreet little no-nonsense unit tucked away opposite the café in the Christchurch Hospital reception area – completed the 250,000th form.

The milestone was so significant to Safety 1st's vendor RLDatix that they had a personalised plaque made – and it's a beauty, as you can see from the image.



From left, Patient Information Officers Minal Lamghare, Steph Forsyth, Sharon Reid, Maria Hayes, Claire Thornton (Team Leader) and Katrina Logan
Absent: Julie Ferguson

A very modest Sharon Reid, the Patient Information Officer whizz responsible for the all-important 250,000th entry, was excited to receive the plaque on behalf of all who have ever contributed to the data pool in Safety 1st. In particular for her team, led by Claire Thornton – just seven people who have clocked up close to 30,000 entries between them.

They use Safety 1st as their paperless record system for documenting the release of patient information to patients and external agencies.

Sharon, by herself, had managed more than 2200 in the year to June – and those include ACC entries, many of which are quite complex. Her enthusiasm and obvious positivity are no doubt a significant factor in her contribution to Safety 1st's success. And it was equally clear from the buzz in the office that this team know how to have fun, as well as get the job done.

"Like all new things, it took some getting used to in the first instance, but now that we have learned how to get the best from the system, we couldn't function without Safety 1st," she says.

Privacy Officer and Team Leader Claire Thornton extolled the benefits of having recently gone paperlite which has maximised Safety 1st and other tools and enabled them to increase their output and efficiency.

"Obviously we have saved reams and reams of paper, not to mention the time saved in not having to print and copy, and the effort, space and money we save through not having to physically file and retrieve data."

Attaching electronic documents to the patient record request is so much easier.

"It makes sense to use Safety 1st, as requests we receive relate to patients and external enquiries about their care," she says.

There was an empty shelf behind Sharon's desk, perhaps a testimony to the benefits of going paperlite – or perhaps not. It's not empty anymore though. And there's space there for when we clock up the half million, the million and so on – assuming of course that one of our South Island DHB partners doesn't beat us to it.

All power to them if they do though, with the richness of data we are accumulating, staff and patient safety, linking of enquiry, and the contribution that Safety 1st makes, the quality of our care is the real winner.

Assessment and identification of pressure injuries and risk

Assessing the likelihood of someone developing a pressure injury is an important step in managing people in our care.

Sometimes people come into our care with past or pre-existing pressure injuries – these people are very vulnerable to developing more pressure injuries so the right care at the right time is important.

For the purposes of data collection, we need to identify where the pressure injury occurred. Pressure injuries that happened in the person's home or residential care are defined as community acquired. If pressure injuries have developed while a person is in our public hospitals these are referred to as hospital acquired.

The Canterbury Pressure Injury Prevention Advisory Group (CPIPAG) is launching a new pressure injury alert sticker for the hospitals this month to support the identification and coding of pressure injuries at the time a person's skin is checked on presentation to hospital.

Pressure Injury Alert

Full skin assessment completed: Date: _____ Time: _____

Please stage according to the:

INTERNATIONAL NPUAP/PIUAP PRESSURE ULCER CLASSIFICATION SYSTEM

Injury no. 1	Injury no. 2	Injury no. 3
Classification	Classification	Classification
1 2 3 4	1 2 3 4	1 2 3 4
Unstageable	Unstageable	Unstageable
Mucosal	Mucosal	Mucosal
Suspected Deep tissue	Suspected Deep tissue	Suspected Deep tissue
Hospital acquired	Hospital acquired	Hospital acquired
Non Hospital acquired	Non Hospital acquired	Non Hospital acquired

Causal factor(s): _____

☐ Plan for full skin assessments documented ☐ Safety First ☐ Wound care chart

☐ SSkin strategies to manage risks documented ☐ ACC45 / ACC2152 (if stage 2 or above)

Print Name: _____ Designation: _____

Ref: 2311272 Authorised by: the Canterbury PIP Advisory Group April 2019

"We want to improve the data collection and reporting of pressure injuries, so we can measure our improvement over time," says CPIPAG Chair Robyn Cumings.

This includes accurately coding and reporting pressure injuries.

Send in your pressure injury prevention photos to win!

Remember to send in your photos sharing how you are helping to reduce pressure injuries.

Email your best high-quality photo to communications@cdhb.health.nz by **Monday 25 November** and you could win a gift hamper of tasty treats.

*Please ensure everyone pictured has provided consent for their photo to be shared across the regions and online.

To assist with this, Decision Support has also developed an interactive pressure injury dashboard that provides pressure injury data trends by rates, length of stay, diagnosis grouping, ward and patient demographics. Instructions on how to access this dashboard are available [here](#).

"As with any quality improvement programme, we expect to see a reduction over time in the number and severity of pressure injuries across the system as our teams have increased knowledge, training and processes to manage them," Robyn says.

Remember, it takes a team to prevent pressure injuries

Throughout this month, members of interdisciplinary teams share how they're responsible for preventing pressure injuries.

Physiotherapists – Physiotherapist Laura McIntosh says she and her colleagues have an important role to play in preventing pressure injuries.

"Physiotherapists are experts in movement. We help people move every day and this month is a timely reminder for us to remember to share our knowledge, not only with our patients but also other people involved in their care."



Nurses – Continence Nurse Specialist Di Poole says to help prevent pressure injuries, it's important to prevent incontinence from occurring:

"Identify any incontinence issues and assess and manage the incontinence with a shared care plan. If an incontinence aid is required, ensure it isn't too tight and keeps the skin dry."

Resources

You can order free resources on preventing pressure injuries and how to classify and document pressure injuries from [Community and Public Health](#).

No ordinary orderlies

They're the glue that sticks so much of our hospital together, and now they're better trained than ever before. Last week, the 100th Orderly received their NZQA Health & Wellbeing Level 3 (Orderlies) qualification.

Our orderlies have had the opportunity to complete the qualification since 2014, following the development of a three-week, full-time training course with four dedicated trainers. The goal for the course was to ensure orderlies have the right skills to make the patient journey as comfortable as possible. Training emphasises compassion, understanding and empathy, known as CUE, and it has transformed orderlies' interaction with patients and staff, and was the driver for the extended training opportunities.

Manager of the Orderly Services, Alan Heney, says the qualification has become the springboard for further career development for some orderlies.

"Graduates have taken on other careers in health, which is really cool. We now have mortuary technicians, nurse aides, medical couriers, pharmacy technologists, a receptionist and a social worker – all of whom started out with us."

Since its inception, 138 Orderlies have passed the qualification, with four in



From left, Careerforce Workplace Advisor Pam Harris, Director of Nursing Heather Gray, Orderly Christchurch Hospital Andrea Ritchie, Manager Orderly Services Christchurch Hospital Alan Heney

Ashburton, 34 in Burwood and last week Andrea Ritchie became the 100th Canterbury DHB Orderly to achieve the milestone. Over the past five years, three staff have also gone on to pass NZQA Health & Wellbeing Level 4.

Director of Nursing Heather Gray says she's delighted by the continual development of the orderly service and extends her hearty congratulations to all those who have completed the qualification.

"It has been a pleasure to be involved with this initiative from early inception, almost a decade ago, to the point where new recruits are asking about the programme at interview. Every orderly in the team enriches the programme with their personal talents and efforts and builds on the success."

Orderly duties include:

- › Patient transfers, this requires knowing how to use the bed's rear wheel steering, brakes and height adjustments, as well as transferring patients from a trolley to bed.
- › Delivery of milk through the hospital, (Yes they are the 'milk fairies').
- › Collection and delivery of clinical records
- › Despatching and delivery of dirty linen
- › Moving and replacing medical gases like Heliox and Argon
- › Mortuary assistance
- › Assisting with emergency incidents
- › Rubbish pick-up of general and infectious waste. Orderlies remove 2.5 tonnes of rubbish a day. Items are as diverse as infectious items, chairs and old printers
- › Specimen pick-up
- › Taking care of equipment such as pumps, oxygen, and Lifepacks, when the patient has arrived at their destination
- › Operating the HoverJack Air Patient Lift that allows patients who have fallen to be lifted without gathering a lift team.

World Leader in Practical Obstetric Multi Professional Training (PROMPT) visits Christchurch

The Christchurch PROMPT Team was delighted to host Tim Draycott, from the PROMPT Foundation in Bristol in the United Kingdom (UK), last month.

Tim was on a speaking tour of New Zealand.

PROMPT is a simulation training programme for obstetric emergencies that brings the maternity team that attends these obstetric emergencies together to train in their real work place. PROMPT is run in all DHBs in New Zealand. It is the most common obstetric emergency course run in the UK and Australia and is also run in many other international centres.

Tim is most well known internationally for his work in setting up PROMPT and has received awards for this including an honour from the Queen.

In addition to being the Obstetric Lead for the PROMPT Foundation and a working Senior Medical Officer at Southmead Hospital Bristol, he is currently the Chief Maternity Advisor for National Health Service Resolution (Litigation authority) and has recently been appointed Vice President of the Royal College of Obstetricians and Gynaecologists.

PROMPT Christchurch has recently celebrated its 11th birthday. The original 'parents' of the Canterbury DHB Programme were Midwifery Educator Tina Hewitt and Obstetrics and Gynaecology Senior Medical Officer Sharron Bolitho with the support of Christchurch Hospital General Manager Pauline Clark.

Pauline's clinical background is midwifery and, along with the whole

maternity team, reducing preventable harm to mothers and babies remains a priority for her, Sharron says.

"Her master's thesis was on the topic of whether the UK maternity quality improvement system, including PROMPT, could flourish in New Zealand."

Last year, as medical lead for PROMPT Christchurch, Sharron went on secondment to the PROMPT Foundation in Bristol and she is currently on sabbatical with the inaugural fellowship at the Manawa Simulation Centre.

The local programme has had a major revamp this year, Sharron says.

"As well as a new format, local PROMPT is focusing on closer links with the rest of the maternity quality team."



PROMPT Canterbury DHB (CDHB) and West Coast (WCDHB) Leadership Team. From left, front row Midwifery Educator WCDHB Linda Monk, Midwifery Educator CDHB Tina Hewitt. Back row, Midwifery Educator CDHB Rhonda Robertson, PROMPT Obstetric Lead Tim Draycott, Senior Medical Officer Obstetrics and Gynaecology who is on a 'Simulation Sabbatical' Sharron Bolitho. Absent: Anaesthetic Lead Daniel Mattingley

PROMPT improves clinical outcomes, including a 50 percent reduction in brain injuries caused by a restriction in the oxygen being supplied to the brain at birth (Bristol, Victoria, Kansas) and a 34 percent reduced maternal deaths (Zimbabwe).

"It improves patient safety not just by improving team performance, but also by spotting possible systems problems before they happen in real life."

There is also published evidence that over the long term PROMPT improves safety culture, so that the good teamwork and communication behaviour learnt in emergencies, spills over into our ordinary working lives and becomes 'the way we do things around here', Sharron says.

*Sharron will be speaking at the Grand Round on 29 November.

Check out PROMPT Maternity Foundation information and training videos or these websites: www.promptnz.org and www.promptmaternity.org

You can contact these local leads via Canterbury DHB email:

- › Midwifery: [Tina Hewitt](#) / [Rhonda Robertson](#)
- › Anaesthetic: [Daniel Mattingley](#)
- › Obstetric: [Sharron Bolitho](#)



From left, PROMPT Obstetric Lead Tim Draycott and Senior Medical Officer and PROMPT Anaesthetic Lead Daniel Mattingley



The Manawa Simulation Centre team. Front row from left, Manawa Coordinator Christine Beasley and Manawa Management/Administration Alysha Chua. Back row, from left, Senior Medical Officer Neonatal, Medical Lead Manawa Maggie Meeks, PROMPT Obstetric Lead Tim Draycott and Senior Medical Officer Obstetrics and Gynaecology on a 'Simulation Sabbatical' at Manawa Sharron Bolitho

KEEPING OUR COMMUNITY HEALTHY

**WELL
NOW**
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

Milk bank features in medical journal

Canterbury DHB's Human Milk Bank is featured in the latest *New Zealand Medical Journal* (NZMJ).

The latest edition includes the paper, *Supporting mothers, protecting babies for long-term health: establishing a pasteurised human milk bank*.

The authors are Medical Specialist Maggie Meeks, Human Milk Bank Manager Anthea Franks, Clinical Nurse Specialist Neonatal Infant Feeding Hazel McGregor, Dietetic Master's graduate Rachael Lamb, and Quality Coordinator Child Health Graeme Webb.

They say one of the roles of a Neonatal Intensive Care Unit (NICU) is to support mothers who wish to breastfeed as they develop their milk supply, and this has been shown to be particularly helpful for the mother of the late preterm infant (34–37 completed weeks).

The paper reviews some of the benefits of a mother's own milk, unpasteurised donated milk and pasteurised human milk supplied through a milk bank. NICU opened its Human Milk Bank in 2014 and is now pasteurising over 500 litres per year.

The Human Milk Bank is currently the only hospital-based milk bank in the country. It is located on the same floor as the NICU and has its own storage freezers and staff who undertake the pasteurising of the milk and administrative tasks.

The milk is provided to support women as they develop their own milk supply for at least the first week after the birth of their preterm baby.

The Human Milk Bank shelves are low on stock

Milk Bank Manager Anthea Franks is appealing for donors to top up supplies.

Registered donors don't even have to leave their house. Milk donations can be picked up from women who live in or near Christchurch thanks to Nurse Maude volunteers. There is a drop-off point at Rangiora Hub for North Canterbury donors.

For more information about becoming a donor, watch our video on Facebook [here](#) or visit the [Canterbury DHB website](#).

Operating Theatre Assistants a cut above

Christchurch Operating Theatres are celebrating a second consecutive, successful year, with their Operating Theatre Assistants (OTAs) completing the New Zealand Certificate and Wellbeing Health Assistance level 3 through Careerforce.

To obtain this qualification the OTAs complete 16 unit-standards over a year, covering a variety of important topics including 'professional and ethical behaviour', to 'observe and respond to change' and health, safety and security to name just a few.

This department continues to experience the benefits of having the OTA complete the certificate and feedback from the OTAs is very positive.

It is a great achievement for all participants which was celebrated by the Perioperative Nurse Manager Marie Lory, Clinical Nurse Manager Sam Beazley and the team. Congratulations!



Operating Theatre Assistants: Adam Hibbert, Hayley Thompson, Therese Cumming and Lewis Hall



Graduates and mentors: Marie Lory (Perioperative Nurse Manager), Adam Hibbert, Hayley Thompson, Therese Cumming, Lewis Hall and Liane Dixon (Nurse Educator)

Thursday 14 November is World Diabetes Day

November is Diabetes Action Month and features an awareness and action campaign that seeks to educate New Zealanders about diabetes, inspiring people to take action and support people who have diabetes.

November 14 is World Diabetes Day, and that's not just some date chosen at random – it marks the birthday of the man credited with co-discovering insulin at Toronto University in 1922. Frederick Banting discovered insulin along with his assistant Charles Best and colleague, John MacLeod.

The former and the latter were later awarded the Nobel prize for this hugely significant discovery. Insulin is central to the treatment of Type 1 diabetes which, put very simply, is a person's inability to manage blood sugar concentrations using the insulin a healthy pancreas should produce.

The theme for this year is It's About Time. The theme recognises that it's about time to raise awareness of all types of diabetes among New Zealanders. That it's about time those living with diabetes have access to better medication and continuous glucose monitors. It's about time everyone supports those affected by diabetes. And it's about time we find the 100,000 undiagnosed with type 2 diabetes.

And while we are talking about time, this short [It's About Time](#) video will take just two minutes of yours – it will help you understand why diabetes is a growing issue for New Zealanders, what we can do about it, and what might happen if we do nothing.

If you or a family member lives with diabetes and would benefit from more information – firstly discuss this with your general practice team. There is also patient information anyone can freely access online at [HealthInfo](#).

In Canterbury we are fortunate to have the [Diabetes Society](#) located on Carlyle St, Sydenham. It is our local



diabetes **action month** >> For more information go to www.diabetes.org.nz or talk to your health care professional today

diabetes charity, offering a shop with specialist products and a supportive team of people with lived experience of diabetes.

For more information on diabetes, World Diabetes Day, or the It's About Time campaign, visit the [Diabetes New Zealand website](#).

Contribution of volunteer coordinators recognised

Volunteer coordinators lead, support and empower our volunteers.

They assist our volunteers in their recruitment, organisation and in their daily support in the workplace.

Louise Hoban-Watson is Volunteer Coordinator for Christchurch Hospital and Rachael Walker is Volunteer Coordinator at Burwood Hospital.

Louise says her background is in hospitality management, but she has always tried to do volunteer work in one form or another as it is so important to improve our communities.

"In this role I find wonderful volunteers who act like ambassadors of our hospital. I am lucky to have a great support team and am very thankful for them, we wouldn't be able to provide as much as we do without them."

Nationally, volunteer coordinators and managers activate and support more than a million volunteers across New Zealand. Their value was celebrated last Tuesday on International Volunteer Managers Day, which has been marked annually for the last 20 years on 5 November.

The contribution of volunteers is recognised universally but volunteering does not happen in a vacuum, says Senior Operations Manager George Schwass.

"Volunteering is enhanced and enabled by our volunteer coordinators and I would like to thank Louise for her efforts in supporting her workforce."

Group Operations Manager, Burwood Hospital Sally Nicholas says Rachael provides the leadership and direction that allows volunteers to do what they do.

"Her leadership of this group is essential to coordinate our volunteers' time, talents and efforts."



Louise Hoban-Watson



Rachael Walker



International Pathology Day

It's International Pathology Day and we recently visited Canterbury Health Laboratory (CHL)'s anatomic pathology (AP) department to see what goes on in a busy diagnostic service.

Pathologists are medical specialists who undergo a minimum of five years of postgraduate training in one or more discipline (including anatomic pathology, forensic pathology, microbiology, haematology, clinical chemistry, immunology and genetics).

About 70–80 percent of all medical treatment decisions are informed by a pathology result, and essentially all cancer diagnosis rests with pathologists.

They are supported by a broad team of highly skilled medical laboratory scientists and technical and administrative staff.

Canterbury Health Laboratories (CHL) is one of the largest laboratories in Aotearoa, providing pathology services (including cancer screening, tissue diagnosis, and a range of specialist testing disciplines) to the Canterbury and West Coast DHBs.

CHL offers private services such as immigration medical screening, occupational screening, workplace drug testing and wellness tests, such as cholesterol or blood glucose checks. CHL is also the national Measles Reference Laboratory for New Zealand – a service whose importance has been highlighted with the recent outbreak and kept its microbiology laboratory busy.

AP includes histopathology (tissues, such as biopsies and surgical resection specimens), cytopathology (cells, such as cervical smears or cells in body fluids), and autopsy pathology.

Coronial autopsies are performed by a dedicated team in Canterbury DHB's mortuary, but anatomic pathologists



Medical Laboratory Scientist Wathanaphon Jessica Phuirat unloading slides from 'Thelma', one of the three immunohistochemistry machines in the Anatomical Pathology department

perform 'hospital' (non-coronial) autopsies following both adult and perinatal deaths.

Most anatomic pathologists divide their working days between macroscopic and microscopic examination of specimens, frozen section diagnosis, performing and interpreting cytology tests such as Fine Needle Aspiration biopsies, reviewing cases from other laboratories, and preparing for and attending multidisciplinary team meetings.

Other duties include providing advice to clinicians, quality assurance and audit, teaching registrars and medical students, and research.

Areas of focus for CHL's AP department this year have included:

- › Processing and diagnosing over 50,000 histology and cytology specimens
- › Participating in 23 different multidisciplinary team meetings, most of which are held weekly
- › Performing around 50 autopsies (predominantly perinatal)
- › Supporting seven registrars in postgraduate training as they prepare for the many examinations needed to gain the Fellow of the Royal College of Pathologists of Australasia qualification in AP
- › Preparing for the rollout of the National Bowel Screening programme in Canterbury
- › Collaborating with our oncologists and molecular genetic pathologists and scientists, to develop an algorithm for reflex molecular testing of lung adenocarcinoma (a type of lung cancer)
- › Preparing submissions to government on the new National Cancer Agency
- › Attending a range of scientific meetings (including serving as meeting convenors, session chairs and speakers) and presenting a variety of research projects (posters, oral presentations and publications)
- › Representing pathology at local, national and international forums
- › Maintaining IANZ accreditation of our own laboratory, and serving as Technical Expert Assessors for other laboratories around the country.

The Great Haematology Bake-off

Baking skills were to the fore at a recent baking competition in the Haematology Department at Canterbury Health Laboratories.

The organiser Haematologist Emma-Jane McDonald said the competition was arranged for some light-hearted fun and it was great to generate some interaction across the department.

The Haematology department was divided into six areas with one baker per area which was kept secret from the other areas.

"There were no rules just a cake, and all the cakes were delicious!"

Physician David Smyth, Medical Specialist Alan Pithie and Nursing Director Debra Hamilton were the judges.



Raffle raises money for Breast Cancer Foundation

Ward 17 held a fundraising raffle recently raising \$130 for the Breast Cancer Foundation.

It's the second year they have done this, initially in support of a colleague. "Everyone gets into the swing of it and dresses up their uniform in pink," says Registered Nurse Megan Gourlay.



Ward 17 staff

One minute with...

Elyse Gagnon, Project Specialist – Diversity, Inclusion and Belonging

What does your job involve?

My job is all about making sure our workforce reflects the community we serve and that we have an inclusive culture where everyone is valued and feels a sense of belonging. It involves working alongside people in the organisation to understand what inclusion and belonging in the workplace looks like to them and working on key initiatives and programmes to help achieve that vision.

Why did you choose to work in this field?

I'm a social worker by profession and have always loved working with people. I'm passionate about creating structural changes and exploring new and innovative ways of approaching diversity and inclusion in the workplace.

What do you like about it?

I love researching what's worked well in other organisations, what research tells us works and figuring out how we can adapt it to our organisation. I'm a big fan of puzzles and this job is all about looking at our complex system and seeing how everything works together.

What are the challenging bits?

I think the most challenging bit for me is my mind and dreams going too far too fast. I need to remind myself that we always must make sure we get the basics right first.

Who inspires you?

I get a lot of my inspiration from my family and my partner.

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?

For me, the values are a tool to help us all create a space where people can bring their whole selves to work. I believe we all have a role to play in creating a safe, respectful, fun and inclusive work environment. The values guide us to help make it happen.

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

A picture of my niece! I am a very proud Aunty.

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

Back home in Ottawa (Canada), having dinner with my family.



What do you do on a typical Sunday?

You would probably find me having brunch in one of the new cafés in the city! I've lived in Christchurch for a little over two years and have loved seeing the city come together.

What's your favourite food?

Anything my mum makes – especially spaghetti carbonara!

And your favourite music?

I love a bit of everything – from The Beatles to Taylor Swift to Pearl Jam.

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

Something For You

Something For You is Canterbury DHB's employee benefits programme.

The deals offered are from the Canterbury business community to say thank you for all that you do. You can access all your deals right [here](#). Remember, you'll need your Canterbury DHB ID badge to claim these deals, so be sure to take it along with you.

This week's featured offer is from Torpedo7. From 13 to 26 November, you and your whānau and friends can save up to 60 percent on a range of items instore and online. [Print this flyer](#) or show it on your device in store.

Check out [Something For You](#) for information on more special offers!



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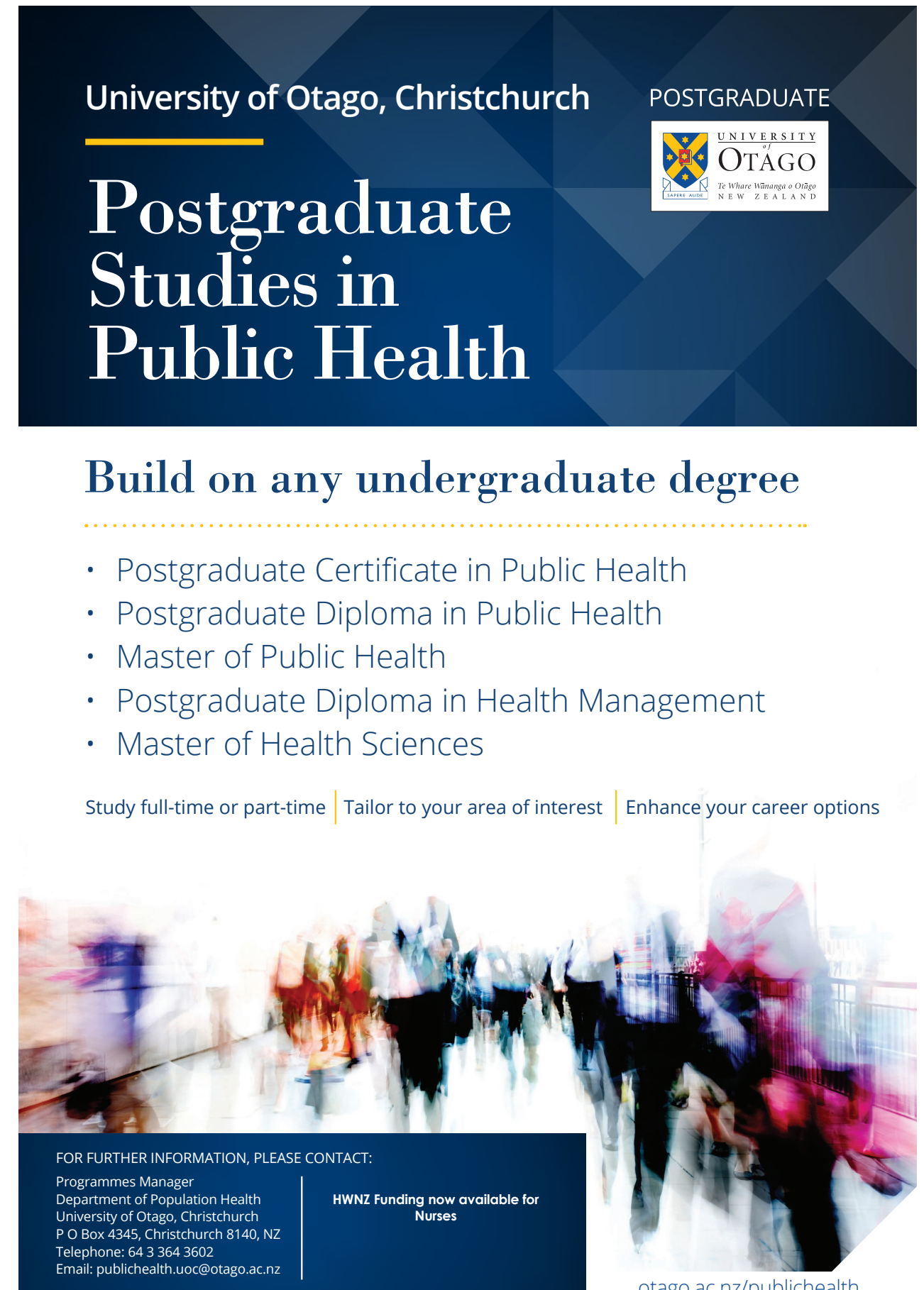
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