



Techweek – showcasing elements of our digital transformation

Last week Techweek was held throughout New Zealand, and here in Canterbury we were amongst it, sharing some of the innovations that are making it better for patients.

Canterbury DHB Chief Digital Officer Stella Ward spoke at a number of events, including the popular Techie Brekky. Three innovations were showcased at the Techie Brekky and our provider partners explained how the solutions we have been working on together are making a positive difference for people using our health services and, in the case of Cloud Technology, the benefits will be for staff when we switch to a hybrid public/private cloud solution.

Deloitte talked about [DeloitteASSIST](#), the voice-activated alternative to a patient call bell, which means patients can talk to the system and, for example, tell the nurse that they need more water, or that they're cold. This message is then sent direct to the nurses' station and all voice requests are triaged using AI [Artificial Intelligence], so that anyone who uses the word 'pain' for example, is seen immediately and ahead of someone who wants help using the TV remote. DeloitteASSIST is being trialled in some areas at Burwood Hospital, and initial feedback from long-stay patients in the spinal unit, in particular, is encouraging – as the product can also provide entertainment options.



Canterbury DHB Chief Digital Officer Stella Ward speaking at the Techie Brekky



Deloitte New Zealand Director for Digital Health Kate Reid talking about DeloitteAssist

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The airport-style [check in kiosks](#) in the new Christchurch Outpatients are created by a kiwi company, Florence. One of the benefits of the kiosks is that they save patients' time. When patients check in they can also update any of their own information. Patients simply scan the bar code on their appointment letter, and when they check in they receive information about where they need to go for their appointment.

CTP, our cloud technology partner, is working alongside our Information Services Group (ISG) teams as we prepare to move to a new secure hybrid public and private cloud system. This will improve network speed for anyone using our system, improve security, and enable us to restore our systems faster in the event of a disaster. It will also improve the speed and agility of ISG through automation and standardised work, which means they can deliver faster services to our end users.

Our HealthPathways solution was also showcased. It was created in Canterbury and is now used around New Zealand, throughout Australia and has been picked up by some National Health Service Trusts. HealthPathways is a tool to assist family doctors and is currently used to support the care of more than 28 million people worldwide

It was heartening to see such a fantastic turnout, and see the facilities in Manawa put to good use. The networking opportunities at these events can spark even more great

ideas to save patients' time, and increase efficiency with the support of technology.

If you'd like to see and hear more, check out this video from [Techweek TV](#) on the role of technology in the future of health – note the discussion starts about one minute 15 seconds into the video.

And here's a great [article](#) which talks about more innovations, including Sense Medical's Cortex product in use at Christchurch Hospital, and HealthPathways.

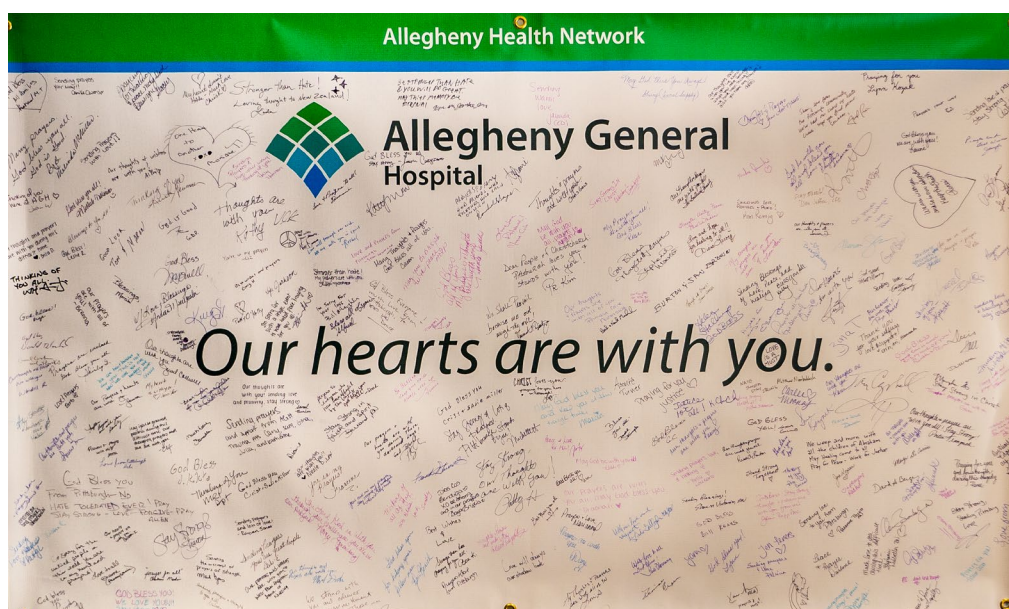


Cloud Technology Partners VP Strategic Accounts Trisha Rozas presenting the cloud system

Kindness from across the miles – messages of hope from Allegheny Hospital Pittsburgh with whom we share an 'unfortunate bond'

Shortly after news of the 15 March terror attacks was made public, we received an email from Dr Jeffrey Kohen who is the President of Allegheny General Hospital. Allegheny General Hospital was the receiving health facility for those injured by a lone gunman who killed 11 people and injured seven others while they were worshipping in the Tree of Life Synagogue in Pittsburgh. This event occurred in October 2018, so their hospital team could relate to what was experienced by our teams here in Canterbury and offered to share their experience and learnings.

We received a banner in the post last week, signed by hundreds of staff from Allegheny Hospital and containing good wishes and messages of hope. We are looking to put this on display at Christchurch Hospital. The accompanying letter also



talks about the 'unfortunate bond' we share with them: Orlando Regional Hospital received a banner from Beth Israel in Boston which cared for the wounded from the Boston Marathon bombing. Beth Israel received one from the receiving hospital of the victims of the Columbine shooting in Colorado.

The onus is now on us to continue this tradition among the global medical fraternity, and it's a responsibility we will fulfil.

Allegheny Health Network



**Allegheny General
Hospital**

Allegheny General Hospital
320 East North Avenue
Pittsburgh, PA 15212-4772
Tel 412 359-3131

April 17, 2019

David Meates, MNZM
CEO, Christchurch Hospital
Private Bag 4710
Christchurch, New Zealand 8140

Dear Mr. Meates,

I write to you today as the CEO of Allegheny General Hospital. We have been following the events that transpired on March 16, 2019 and noted that you were the receiving facility for the victims of the Mosque attack. Your staff's commitment to providing care to the injured was noted by all of us in Pittsburgh, Pennsylvania. This resonated with us as we were the receiving facility for the shooter of the Tree of Life attack on Oct. 27, 2018. We share an unfortunate bond and salute you for the work you did on behalf of your community and country.

As we went through our experience, we received many texts, emails and calls of support. One of the most notable items we received was a banner from Orlando Regional Hospital stating, **"We Stand With You"**. The banner was signed by many of the staff in their facility and it now hangs in a prominent position in our lobby. Orlando received a banner from Beth Israel in Boston which received wounded from the Boston Marathon bombing. Beth Israel received one from the hospital caring for the victims of the Columbine shooting in Colorado. We are an unfortunate fraternity of hospitals that have responded when called upon.

Enclosed is a banner that Allegheny General Hospital has signed. We know how hard this event was on all of you and admire how you responded. This group of hospitals proudly represents the healthcare world in these troubled and turbulent times. We remain an anchor of sanity to our communities by standing for decency and compassion.

With our warmest personal regards and with great admiration we are proud to be associated with you.

Sincerely,

Jeffrey K. Cohen, MD
President, Allegheny General Hospital
Pittsburgh, PA

Kindness in our own backyard – thanks to the Muslim community of Christchurch

A special thanks to the Muslim community of Christchurch for inviting representatives from our services to a special dinner last week to express thanks for the treatment and care received. Unfortunately I wasn't able to attend but have heard it was a most enjoyable evening and further served to strengthen our ongoing relationships. Some photos from Friday's dinner are below.



Emergency Department Specialist Dominic Fleischer thanking the Muslim community of Christchurch on behalf of his colleagues



Christchurch Hospital staff receiving a certificate of appreciation for their care

Queen's Birthday weekend

It's a long weekend this weekend to mark the Queen's Birthday – if you're heading away, take care and enjoy the three-day break. If you're staying put I hope the weather plays ball and you can get out and enjoy the great Canterbury [or Chatham Islands – for our team there] outdoors. And if you're working over the long weekend, thank you.

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@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

Acute Medical Assessment Unit, Ward 23, Christchurch Hospital

I want to say how awesome all the doctors, nurses and orderlies have been on the occasion that my mother was in hospital. I, my mother and my family have been blown away by the exceptional attitude of staff. Non-judgmental, open, actually listening and responsive. Whatever you're doing right now, keep doing it. Thank you from the bottom of my heart, you made a difference.

Oncology, Christchurch Hospital

Ian Ward, doctors, technicians from the Radiology area, clerical staff, volunteers and the child from Lincoln Primary School who coloured in my bag. All have performed above and beyond the call of duty. Caring, kind and sympathetic which helped carry me over the experience. The organisation ran like clockwork.

Nicholas Lash and Eddie, Bone Shop, Christchurch Hospital

Nicholas Lash is an amazing surgeon. Eddie who works in the Bone Shop is fantastic. Thank you to all who looked after me in the last two weeks.

Kate and Amy, Radiology Department, Christchurch Hospital

I was fortunate to have two lovely ladies, Kate and Amy look after me. I was a bit anxious and want to say a big thank you again to them both for being so kind and considerate to me. They are a wonderful credit to your hospital team, so professional but very caring. Thank you for restoring my faith.

General Medicine, Christchurch Hospital, Burwood Hospital

I am full of praise for the excellent treatment my partner received from the General Medicine team at Christchurch Hospital and now Burwood Hospital. Absolutely humbled by the service we have received.

Dr Simcock and team, Ward 20 staff and food staff, Christchurch Hospital

To Dr Simcock and his medical team, wow, you guys are amazing. I don't know how to thank you. You never gave up on me. Nick, Gin, James and Victoria, you are the best. I don't know how you guys do it, knowing that I could have lost my leg. The nurses

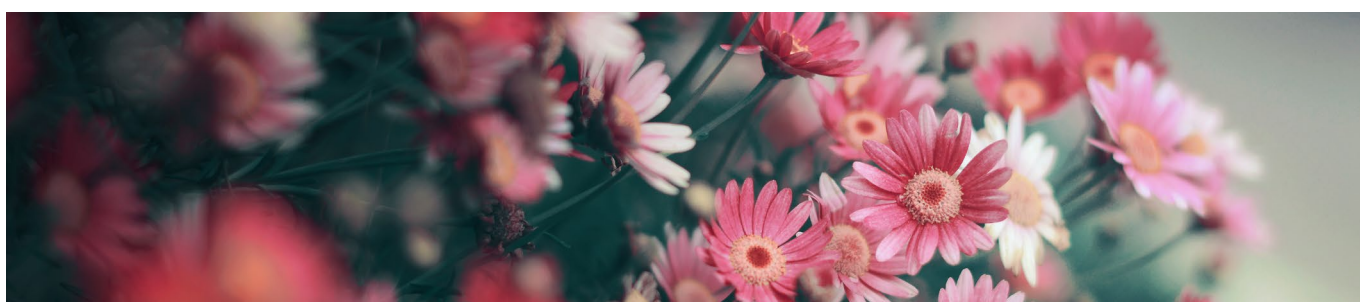
and nurse aides are so amazing. Thank you for looking after me while I was in your care. Eleven weeks was a long time to put up with me. You made sure I was safe. Thank you. The people who brought the food and drinks around are wonderful. I am so grateful to meet people who make your day feel happy. Big thanks to the cook and helpers – the meals were yummy.

Outpatients, Christchurch Hospital

I am always happy with the staff's manner.

Gynaecology, Christchurch Women's Hospital

I'd like to say a huge thank you to Dr Vanessa and nurses Sarah and Meg in the Acute Gynaecology Unit. They were extremely supportive as I went through a miscarriage. Vanessa was very thorough... Meg carried out great care. On the Gynaecology Ward every nurse I came across was amazing – Holly, Louise, Rosa – there were more but I forget their names. They are amazing nurses and a great attribute to Canterbury DHB. The Canadian female doctor was amazing as well. Excellent work ladies.



Day Surgery, Christchurch Hospital

I want to say thank you very much for the care I received when I had a procedure done at the beginning of May. The skill of the staff involved was very comforting. The nurses were just wonderful. Thank you Rebecca Stack, and all involved.

Outpatients, Christchurch Hospital

The staff in this area are wonderful. They are very well presented and their manners are beautiful. I am looking forward to coming back! Please pass this on to them.

Big Shout Out**Outpatients colleagues**

Huge thanks to our Clinical Prioritisation Assessment Criteria general outpatient colleagues – Janene Manawatu and team for their wonderful support and flexibility in supporting the Diabetes Endocrine clinical and administration teams during our time out of the Outpatients building. Your generosity has been greatly appreciated.

From the Diabetes/Endocrine Services team

Ward 25, Christchurch Hospital

Night shift was crazily busy but the staff I was working with were great. Nurse Aide Antoinette was amazing, as were the other nurses. It made a really hard shift run smoothly and efficiently, with a helpful positive team to work with, delivering good patient care. Thank you.

#carestartshere

all
right?

IT'S
ALL RIGHT
TO REACH
OUT.





Let's get ready to move

Christchurch Hospital Hagley

Update No:5

Wayfinding

A wayfinding strategy has been developed by professional wayfinding experts to internationally recognised signage standards, including input from DHB staff. It's the DHB's intention to use this strategy in all our new builds and to apply it consistently. It's already in use at Burwood Hospital, Christchurch Outpatients, and many of our smaller sites.

This means:

- › Saying goodbye to the multitude of signs, typefaces, colours and styles of signs that currently decorate the walls of our facilities
- › A new clean, uniform approach to signage
- › Specific places for notices
- › Walls will be uncluttered and make it easy for people to find their way around
- › Appropriate colour contrast, font size and type – taking into account international signage standards for people with impaired vision
- › A consistent approach.

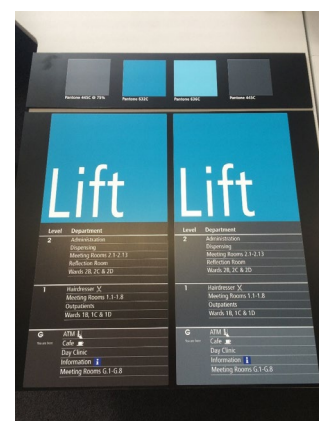
The basic principle of our wayfinding approach is to sign to a point, then to the next point. It's known as progressive disclosure. The new wayfinding strategy breaks locations down into components, which visitors encounter one at a time: Christchurch Hospital – Hagley building – Tower A – Level 4 – Ward A4, and so on.

A full copy of the wayfinding strategy is available on the [intranet](#).

Right: An example of the signage boards that will be alongside the lifts in the new Hagley building



Watch the [video](#) to get a better understanding of how the wayfinding principles work



Meet the Team

This week we profile some more members of the Hagley Operational Transition team and find out what excites them about Christchurch Hospital Hagley.

Kirsten Walsh – Clinical Nurse Specialist Perioperative

Twelve brand new operating theatres with new equipment and new ways of working for our teams.



Wendy Jar – Clinical Nurse Specialist

New facilities, natural light, awesome views. Being involved in developing/supporting new processes and ways of working for all.



Sarah Marshall – Registered Nurse

The brand new equipment and services we will be able to utilise in day-to-day patient care on the ward.



Facilities Fast Facts

Christchurch Hospital Hagley

As the countdown continues to the move into Christchurch Hospital Hagley, more areas within the building are being completed. Here are some photos taken of the Emergency Department, the Helipad and the Progressive Care Unit on Ward A3 (General Surgery).



Patient bays and a staff station



The reception desk in the public waiting room of the Emergency Department



Up on the helipad



Staff station in the Progressive Care Unit on Ward A3 (General Surgery)

You can see more images at <https://flic.kr/s/aHsmcyvnWa>.

The Emergency Services drop-off and mobility parking area outside Christchurch Hospital Hagley is taking shape with the steelwork for the canopy being installed (see below).



The Link

Work continues on The Link bridge that will connect Christchurch Hospital Hagley and Christchurch Women's Hospital. This week's work will include the installation of windows and the start of the cladding.



FIVE WAYS TO WELLBEING



CONNECT
Grab a cuppa, be there,
say 'kia ora!'

Looking after yourself – Connect

It's that time of the week again. Let's talk about one of the Five Ways to Wellbeing – Connect, Me Whakawhanaunga.

As humans we tend to want to connect with people as part of a natural need, so this one should be easy! Let's take this a step further – let's make a little more effort to connect with those outside of our usual bubble. Be kind in connecting with others – you never know when you may stumble across this person again!

You can connect in so many ways. Some of them are as follows:

- › Join a new group – it could be based on crafts, sports, any common interest
- › Host a pot luck dinner – also a great way to warm up this winter

- › Smile or say hello to a stranger – they'll probably smile back!
- › Start a family or workplace joke collection (this one's for the dads – you've got this!)
- › Connect with the whenua – grab some mates, wrap up warm and get into the great outdoors
- › Have a WIFI, TV and text free night, and bring out the old board games – you'll be surprised at how much fun they are!
- › Contact a friend you have not seen or spoken to for a while and talk, talk, talk!

Connecting with others makes us happier. When we're happier, we're generally nicer to be around. Go figure!

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



Collective responsibility in strategy

People from across the Canterbury Health System have teamed up in an effort to tackle alcohol-related harm.

The Canterbury Clinical Network launched the *Canterbury Health System Alcohol-related Harm Reduction Strategy* on 14 May. The strategy recognises the impacts of alcohol on the health workforce and those who use health services in Canterbury.

Community and Public Health – Health in All Policies Advisor Bronwyn Larsen said the vision is to reduce the harm of alcohol and collectively work together across health to address the issue.

“We’re all in this together and we can all contribute to being part of the solution if we know a little more about its reach. That’s the only way we are really going to make a difference.”

The strategy has four focus areas: influence behaviour change and social norms; promote healthy environments; coordinate prevention, identification, treatment and support; and, measure harm and monitor performance.

Addressing the audience at Tuesday’s launch, Community and Public Health General Manager Evon Currie said alcohol is the most widely-used drug in New Zealand.

“It is a potent drug and is causing great harm in our communities, but it’s harm that can be prevented.”

In his powerful presentation, Christchurch Hospital Emergency Department (ED) Senior Doctor Scott Pearson addressed the audience at the launch.

“Every age is affected, right from babies and infants, who are sometimes the victims of foetal alcohol spectrum disorder or alcohol-fuelled violence, through to elderly, who are drinking at hazardous levels. Contrary to popular belief, the reality is ED is not full of drunk teenagers after-hours. More commonly we see people with injuries associated with hazardous drinking.”

He spoke of 21-year-old Sam*, who drank to excess one night and suffered a life-changing injury to the brain; Carol*, who was in a high-flying marketing and media role and turned to excessive drinking when she faced challenging times; and Bill* who drank to excess and cracked his head during a fall.

These cases are the “tip of the iceberg” but indicative of a very widespread issue, which is driven in part by clever advertising campaigns that are hardly ever questioned by society, Scott says.

In New Zealand, alcohol is estimated to contribute to 800 deaths a year, of which nearly half are injuries, almost



Christchurch Hospital Emergency Department (ED) Senior Doctor Scott Pearson addresses the audience at the launch

one-third are from cancer and over one-quarter are from other diseases. In 2011 the wider cost of alcohol-related harm to the Canterbury Health System was estimated at \$62.8 million.

In 2015, Canterbury had the highest number of alcohol-related death in New Zealand at 23. In the same year, Canterbury had 423 hospitalisations due to alcohol harm, the third highest number in the country.

Canterbury Medical Officer of Health Ramon Pink said he hoped youth and the wave of young activists addressing global issues would turn their attention to health emergencies.

“A movement that doesn’t normalise it, by young people who are tired of seeing parents, families and mates impacted by alcohol, and drawing on what we see here today. Change is possible.”

The full strategy can be read [online](#).

**Names were changed in the presentation for privacy reasons.*

Care Capacity Demand Management Nursing Director appointed

This is a joint announcement from Canterbury DHB and the New Zealand Nurses Organisation (NZNO).

It is with pleasure that the Canterbury District Health Board (CDHB) in partnership with the New Zealand Nurses Organisation announce that Janette Dallas has accepted the role of Nursing Director – Care Capacity Demand Management (CCDM) Programme Leader.

This important role will provide operational leadership support and facilitation for the implementation of the CCDM programme at the CDHB. The CCDM Programme was developed by the Safe Staffing, Health Workplaces Unit in partnership with the DHB workforce and the health unions and focuses on achieving quality patient care in quality work environments putting safe staffing levels as a top priority for nurses. It is built on a foundation of

governance, patient acuity and partnership. It is an exciting milestone for the CDHB to be appointing into this role and to be working in partnership with the unions to enable this important work to get underway.

Janette has previously held the role of Nurse Manager – Professional Practice Development, has strong collegial relationships with clinical teams across the Canterbury DHB and has led a number of important initiatives, including the establishment of healthLearn. Janette will be forming a team shortly to lead this very important project and will report to Executive Director of Nursing Mary Gordon as well as work closely with the union representatives, the Directors of Nursing, and staff at each campus.

Nursing Excellence Award

Registered Nurse Cindy Qian is this year's winner of the annual Haematology/ Oncology Nursing Excellence Award.

Cindy was nominated by her peers for her excellence in cancer nursing. She was one of many nurses from the Medical Day Unit, Oncology Outpatients, Ward 26, and the Bone Marrow Transplant Unit who were nominated by their peers.

This year saw a record number of nominations which made the final decision difficult, says Nursing Director, Haematology/Oncology/Palliative Care/Ambulatory Care & Afterhours, Deb Hamilton.

"This is the fourth year the award has been presented to celebrate our nurses' hard work, dedication to quality and excellent care for our patients' at the coalface."

Cindy has worked in the Cancer Service arena for seven years and currently works between the Medical Day Unit and Oncology Outpatients.

Her peers say she works efficiently and has a high level of skill: one of her major strengths is cannulating with "impeccable accuracy".

As a valuable resource within both departments she is often requested to help others in their work while still managing her own workload. Cindy does not hesitate to

assist and teach other nurses and always puts the patient's needs first.

The award artwork was originally commissioned by Lloyd Ellison, a patient well-known to the cancer service. Entitled "Circle of Life", it represents "Arohanui" which means "of nurturing, caring and love". The winner has it on loan for the year.



From left, Nursing Director, Haematology/ Oncology/Palliative Care/Ambulatory Care & Afterhours, Deb Hamilton presents the Nursing in Excellence Award to Registered Nurse Cindy Qian

A closer look at the new PRISM intranet home page

We've mentioned a couple of times that you can personalise your home page to suit your own work requirements, but that's a bit like saying anyone can juggle – everyone gets it in the theory, but it isn't until you try that you find out how much work you need to put in.

You'll be pleased to hear we have step-by-step instructions in production ahead of the go-live date of 10 June but, in the meantime, here is a series of close-ups of the options you can personalise. Note, these are the current options; new ones can and will be added over time.

This screenshot below of the News and Notices shows the kind of information that might feature there, and highlights the campus (by location) notices tab and the organisational calendar tab.

News & Notices	
News and Notices	Campus Notices
MRI #2 Service Outage in Radiology	16 November, 2018
Linen shortage - Please monitor usage	16 November, 2018
Friday Grand Round	Monday
Fire Alarm Test - Friday 7pm	Monday
Riverside Rear Entrance	Monday
New menu for Great Escape Cafe	Sunday
STAFF COMMUNICATIONS UPDATE - Thursday 9 May 2019	9 May
CEO Update - Monday 6 May 2019	6 May
CEO Update - Monday 29 April 2019	29 April
All news and notices Help	

Here's the My Favourites section, but there will be nothing showing under the My Links tab until you choose some links.

★ My Favourites	
My Links	Career & Education
Edit Help	
Seeing our System	

These are the options currently under Career & Education.

★ My Favourites	
My Links	Career & Education
CDHB Education resources	
Education organisations	
Professional associations and unions	
Professional councils and boards	
Help	
Seeing our System	

And this is what you would see if you expand the CDHB Educational Resources list for example.

★ My Favourites	
My Links	Career & Education
CDHB Education resources	
Canterbury Medical Library Catalogue, e-Journals and Databases	
CDHB Post-graduate nursing	
Dedicated Education Unit (DEU)	
Education and Development	
eMeds Training	
Health Essentials for Leadership and Management (HELM)	
healthLearn	
Medical Education and Training Unit (METU)	
Medical Vocational Training at CDHB	
Nursing Entry to Practice Programme and to Specialist Practice programme (NEtP / NESP)	
PDRP	
Professional Development Unit	
Resident Doctors Support Team (RDST)	
Resuscitation Training	
Education organisations	
Professional associations and unions	
Professional councils and boards	
Help	

In the My Work Tools section, the blue boxes are examples of the 10 tools you might choose as the ones you use more frequently. The grey boxes are the ones everyone might need, and consequently they will appear on everyone's home page.

My Work Tools

HCS	MedChart	PatientTrack	SCOPE	Seeing our System
Hospital HealthPathways	Safety 1st	Up-To-Date	FloView	Lippincott Procedures
Email	max.	Policies	Phone Book	Service Desk

+ 26 More WorkTools available...
Edit Help

And finally, here's what you will see when you click on the edit button (as above), picking your favourite 10 is as simple as a drop down menu, and you can order them as you want them.

Edit My Work Tools

Personalise up to 10 Work Tools on your homepage using the list below.

- HCS
- MedChart
- PatientTrack
- SCOPE
- Seeing our System
- Hospital HealthPathways
- Safety 1st
- Up-To-Date
- FloView
- Lippincott Procedures

Save
Cancel

Many changes overseen in long career

Emergency Department (ED) Administration Manager Carol Le Beau retires on Wednesday after a career at Canterbury DHB that has spanned 50 years and included overseeing many changes.

Carol's first role as a 17-year-old straight out of school, was as a booking clerk in the Waiting List department (as it was formerly known). She stayed until 1977, before leaving to have children. Carol returned in 1991, joining the IT department to scope and implement the Homer patient management system.

For the past 18 years she has led the ED Administration team.

ED Service Manager David Brandts-Giesen says Carol has seen and overseen many changes in her 50-year career. This included overseeing changes to patient information management systems – in 1995 the Homer Patient Management System and in 2018 the South Island Patient Information Care System and 'ED at a Glance.'

She also provided support and training for the Year 2000 millennium compliance testing and co-led the 2008 ED expansion.

"We thank Carol for all she has contributed to the department, and wish her a happy retirement."

Carol says she will miss her team of "girls" in ED administration.

"It's been a very interesting career and I have enjoyed all three areas I have worked in."



Carol Le Beau

No day is ever the same in ED and she's enjoyed the teamwork of working closely with the nursing and clinical teams. In retirement Carol is looking forward to spending more time in her large garden.

More time for urgent mental health calls

Today Canterbury DHB's Specialist Mental Health Services begins a pilot project that aims to strengthen the way it responds to mental health calls after hours.

All phone calls to Canterbury DHB's free mental health hotline (0800 920 092) between 4.30pm and midnight, seven days, will now be answered by Homecare Medical, a national digital telehealth service.

If a caller requires urgent mental health assistance, Homecare Medical will put them through to someone from the Crisis Resolution team who will ensure they receive the timely care they need. If the call is a general enquiry, advice and information will be provided by the registered nurse from Homecare Medical answering the call.

The mental health hotline receives an average of 35 calls per day during this after-hour period. Mental health consumers, family members, general practitioners, and community services all rightfully make use of the service. However, many of the calls are general enquiries and do not require emergency attention. The new triage system will increase the time that Crisis Resolution staff are able to dedicate to the urgent enquiries.

Overall, each caller will have a better experience as they will be listened to and supported, irrespective of the degree of need.

The first responders from Homecare Medical are all registered nurses with mental health experience. They are known for providing warm, friendly, and professional phone support. All staff are fully supported by their management teams and clinical leads on a 24/7 basis. This includes ongoing coaching, training, and de-briefing with team managers.

Homecare Medical manages health calls around the country, taking DHB mental health calls for 11 DHBs, the 1737 line, and Healthline.

Calls from midnight to 8am will continue to be answered by our Clinical Team Co-ordinators or our Crisis Resolution staff, and the Single Point of Entry (SPoE) Service will take calls between 8am and 4.30pm.

New recliner chairs donated to Neonatal Intensive Care Unit

When Alicia Gainsford's niece Lilly was in Christchurch Hospital's Neonatal Intensive Care Unit (NICU) last year, she built a close bond with the tiny premature newborn baby, spending hours telling her stories – and making her two promises.

Lilly required a blood transfusion and the first promise Alicia made was she would start donating blood.

"Something I have always planned to do but never got around to. I'm now doing that. My second promise was that I'd find a way to ensure as many parents as possible have a comfortable and suitable chair for their long, hard days in the unit," she says.

That has now been fulfilled after Alicia spent months organising a fundraising dinner and auction evening, 'A Night Out for Neonatal', which raised more than \$43,000 for new recliner chairs and to support neonatal research.

Alicia says after Lilly was born at 30 weeks weighing just 910 grams she spent many days in the NICU and observed "beautiful babies like Lilly fight to survive and grow".

"I noticed and heard many parents discuss the lack of comfortable chairs, especially recliners, for use for cuddles with their babies," she says.

Research has shown that premature babies improve when they're being held by their parents, especially skin-to-skin. So once well enough, they are taken out of their incubators and placed on their parent's chest. This is best done in a recliner chair.

Neonatal Nurse Manager Debbie O'Donoghue says some of the current recliners are 15 years old.

"We do have more recent additions which have kindly been donated, but in view of the number of parents and babies, we need to increase the fleet and also replace some of the original chairs."

The new ones, made in Motueka, are upholstered in a hospital-grade hard-wearing vinyl.

They feature locking swivel castors, for ease of movement around the NICU, and are easy to put into recliner position. This is particularly important for women who have just given birth, especially if they have had a caesarean or a difficult birth.

"We are very grateful to Alicia for making a difficult time that bit easier for neonatal families," Debbie says.



Alicia Gainsford with one of the recliners she fundraised to buy



Alicia visiting her niece Lilly in the Neonatal Intensive Care Unit

The money will pay for 18 recliner chairs, and six have so far been purchased and placed in the unit.

The Neonatal Trust Operations Manager Justine Brooker says what Alicia has done is "incredible".

"We are completely overwhelmed with the amount of money raised and acknowledge the massive time and effort involved."

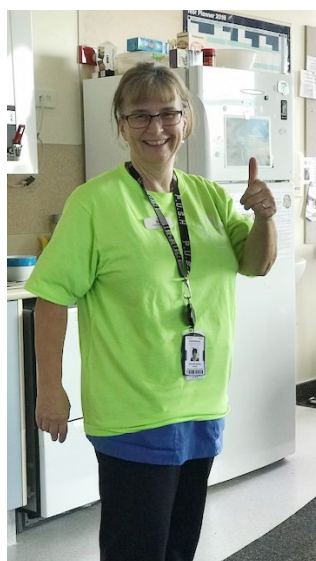
Take a moment to spot our Hand Hygiene Gold Auditors (wearing these, they are hard to miss)

Keep a look out for staff in your services wearing the T-shirts supporting the Hand Hygiene campaign! They will be happy to discuss hand hygiene practice with you. In the future, you might spot Gold Auditors wearing these T-Shirts while collecting audit data.

Celebrating our staff in the "[5 Moments](#)" T-shirts (kindly sponsored by Schulke NZ).



Sarah Berger, Nursing Director Infection Prevention & Control
– Moment 3



Sue den Hartog, Nurse/
Midwife, Christchurch Women's Hospital
– Moment 1



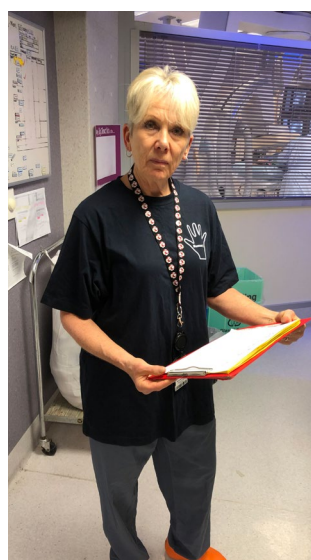
Kerry Winchester, CNS General Medicine, & Jo Laws, Nurse Educator, Ward 26 Christchurch Hospital
– Moments 2 & 4



Jill Gerken, Infection Prevention & Control Clinical Nurse Specialist, Ashburton & Rural Hospitals – Moment 1



Caroline McCulloch, Nursing Director Older Persons Health & Rehabilitation – Moment 1



Rona Buttimore, RN, Radiology, Christchurch Hospital – Moment 5

It is great to see staff participating in the [Multi Drug Resistant organisms](#) and [Micro Organism identification](#) quizzes and testing their knowledge.

Flu myths busted!

In the past seven weeks more than half of our people have received a free flu vaccination.

Thank you to everyone who has taken one for the team and got your flu shot. For those who haven't had your flu shot yet... there's still time. Providing free flu vaccinations to such a large and diverse workforce raises a lot of challenges, and would be impossible without the commitment and tireless work of our authorised vaccinators – they do an amazing job.

There's quite a bit of misinformation about the flu vaccine, and our authorised vaccinators hear a lot of it! Here are some of the most common myths about the flu vaccination:

The flu is the same as common cold

Influenza can cause nasty cold symptoms, like a sore throat, runny nose, sneezing, hoarseness, and coughing. But unlike a cold, the flu can lead to hospitalisations and deaths. It is a very serious illness – just ask anyone who has had it.

I'll catch the flu if I get the flu vaccination

The influenza vaccines available in New Zealand do not contain a live virus. These vaccines contain fragments of inactivated influenza viruses and cannot cause disease.

I won't get the flu because I wash my hands a lot

Hand washing and avoiding people who are coughing and sneezing are not enough to prevent you from catching an airborne virus if you are exposed.

I'm young and healthy so I don't need to worry about getting vaccinated

Although the flu particularly affects the elderly and the very young, every year people in every age group catch it including healthy young adults. It is often a serious illness and can sometimes be fatal.

The vaccine makes me sick and sore

Influenza vaccines have an excellent safety record. Some people may feel a little unwell for a day or two following vaccination, and the site of injection may be a little sore.

These are normal responses to immunisation.

The vaccine is not effective

Vaccination is your best protection against the flu. This year's quadrivalent vaccine covers the four major types of seasonal influenza virus. If you have been immunised and then get the flu, it's likely that you won't get it as badly and you'll recover quicker.

I work in healthcare – I have a great immune system!

Influenza can strike anyone. Healthy people can get the flu and pass on the virus, even before they are aware that they have it.

The annual flu vaccine is free for Canterbury DHB staff. To get your free flu vaccine either attend a clinic or see the authorised vaccinator for your work area.

Details of free staff flu vaccination clinics, and a list of authorised vaccinators, can be found on [Max](#) and the [intranet](#).

Help our community be flu-free this winter

Visit our [flu-free website](#) for information, flu facts and myths, and resources you can share on social media or through your social networks, be it a sports club, social club, church group or iwi. To update your email signature to the one pictured here:

- › Download the [email signature from this page](#) and save it to your desktop or preferred folder
- › Open Outlook and select File > Options > Mail > Signatures
- › Select and delete the image in your current email signature
- › Select the image icon and navigate to where you've saved the flu-free email signature
- › Select Insert and OK.



This Friday is World Smokefree Day

World Smokefree Day is about celebrating and working towards smokefree/auahi kore lives for New Zealanders.

Nearly 84 percent of New Zealanders are smokefree, and having smokefree whānau, where, workplaces and public spaces is worth celebrating.

We are making progress towards the goal of a smokefree New Zealand by 2025, when fewer than 5 percent of New Zealanders will smoke. According to the Health Promotion Agency, and for the first time ever this year, the number of smokers in year 10 (14 and 15 years old) dropped below 2 percent and encouragingly more than 80 percent of young people have never even tried.

World Smokefree Day also provides an opportunity to encourage people to quit smoking and support friends and whānau to quit. There are more resources than ever available to help.

World Smokefree Day, and any other day for that matter, is about modelling the behaviour you want to see – children and young people copy what they see and are less likely to become smokers themselves if the role models around them don't smoke.

Creating environments where our children aren't exposed to smoking is important too. Increasing numbers of councils are declaring public places, spaces and events

smokefree, including playgrounds, sports grounds and outdoor eating spaces.

One smokefree initiative is taking place right now in Hanmer Springs. The village is halfway through a six-month trial of a [Smokefree and Vapefree Zone](#). In addition to playgrounds and reserves, the trial encourages people to keep other key public spaces such as the main street, Amuri Avenue and Conical Hill Road both Smokefree and Vapefree, and is supported by the Hanmer Springs Community Board, Hurunui District Council, Cancer Society and Canterbury District Health Board.

The [Fresh Air Project](#) is about cafés voluntarily making their outdoor spaces smokefree. From an original pilot programme launched back in 2014 and involving 18 Christchurch cafés, the Fresh Air Project now has 60 venues in Canterbury alone!

To recap, we have achieved a lot and there's much to celebrate, but as is so often true in health, there's still work to do. To find out more, visit the [World Smokefree Day website](#).



One minute with... Jan Ipenburg, Clinical Nurse Specialist, Rheumatology

What does your job involve?

Coordinating the care of rheumatology patients, developing protocols and guidelines, educating staff and patients and providing nursing input into service development. I have nurse-led clinics and a telephone advice line as well. I also offer support to the Medical Day Unit (MDU) in the care of our patients having infusions, including biologics (medication manufactured in living cells rather than by combining different chemicals). These medications are used to treat a number of rheumatological conditions. I assist the nursing staff in MDU with any concerns they have regarding a person's health prior to the administration of biologics or if they have concerns during the infusion.

Why did you choose to work in this field?

I have always loved working with patients with chronic illness to help manage their condition. I have been working in this position for over 15 years now and have appreciated the autonomy in developing the role that I have been given by the rheumatology team.

What do you like about it?

Working in a small team, I like the way we work together to provide better care for our patients, with each person valuing the role of the other. I like the ability to develop the role in response to the changing needs of the patient and the health climate that we work in.

What are the challenging bits?

Time. There never seem to be enough hours in the day and it is so important to balance work with home life. Now I have three small grandchildren, time with them is precious as they grow up fast.

Who inspires you?

I get inspired by my patients. I am amazed when I see a patient who has active arthritis with pain, swelling and stiffness hobble into a room with a smile on their face. They seem to cope with so much but stay positive in the face of it.

What do Canterbury DHB's values (Care and respect for others, Integrity in all we do and Responsibility for outcomes) mean to you in your role?

I feel these core values are integral in providing individualised care and support for people with chronic illness. It is about finding out what the individual wants

from treatment and making a plan with an aim of achieving their goals.

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

While I don't have a LinkedIn profile, something that wouldn't be listed would be that, although I ski, I am scared of heights.

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

Out on our boat, in the Marlborough Sounds. Enjoying some family time fishing, cruising and reading with a nice glass of wine.

What do you do on a typical Sunday?

Sunday is family time when I try to spend time with my grandchildren who are aged two, one and three months. Otherwise I am generally working on our house which we bought as an 'as is where is' and are slowly doing up. Everything seems to take longer than you think it will, we have been working on it for around two years now.

One food I really like is...

I am afraid I have quite a sweet tooth so I would have to say liquorice.

My favourite music is...

I like listening to Cat Stevens or U2, but often I prefer the peace and quiet rather than having music playing.



Jan at a recent Ara Institute of Canterbury/ Asia Pacific League of Associations for Rheumatology conference in Australia holding a baby reptile. The local zoo brought in animals and reptiles to promote Australia.

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

Canterbury Grand Round

Friday 31 May 2019 – 12.15pm to 1.15pm, with lunch from 11.50am. All staff and students welcome.

Venue: Rolleston Lecture Theatre

Speaker: Dr Jan Bone, Emergency Physician
"You Me Us"

How do we look after ourselves and each other in medicine? It's a rewarding, stimulating career and yet demanding on our time, our compassion and our sustainability. A topic most of us think about often but rarely speak about. This is a story of two friends and colleagues – one or both may be known to you.

Chair: Peter Ganly

It is requested out of politeness to the speaker(s), that people do not leave half way through the Grand Rounds.

This talk will be uploaded to the staff [intranet](#) within approximately two weeks.

Video conference set up in:

- › Burwood Meeting Room 2.6
- › Wakanui Room, Ashburton
- › Administration Building, Hillmorton
- › The Princess Margaret Hospital, Riley Lounge

Next Grand Round is on 7 June 2019, Rolleston Lecture Theatre.

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

New deals for you!

We've been working on updating Something For You so that not only do we have great new offerings but they're now easier to find.

To celebrate this, we've got some exclusive giveaways for this week only!

Keep an eye out in the daily notices, on the [intranet](#) and [max](#), for more details.

To kick things off Flex Fitness has free 10-day passes when you email them on riccarton@flexfitnessgym.co.nz. This will also get you into the draw to win a three-month membership! This offer is available until 7 June 2019.



Bonnie Steetskamp: Flu Fighter

“It's about doing my bit to help stop the spread.”

Canterbury
 District Health Board
 Te Pori Hauora o Waitaha



New end of year tax process – information for staff

From Monday 20 May, the first end-of-year income tax assessments will have started going out to all tax payers.

Someone will generally receive an assessment if their income is from:

- › salary or wages
- › schedular payments (including ACC Attendant Care)
- › income-tested benefits
- › interest or dividends
- › taxable Māori authority distributions
- › benefits under an employee share scheme
- › superannuation (NZ Super)
- › student allowance
- › Accident Compensation Corporation (ACC).

The end-of-year income tax assessment finalises the end-of-year information for the annual tax year ending 31 March 2019. It uses employer and bank information and shows an individual how much they've earned, how much tax they've paid and their tax calculation.

If an individual has a myIR account, they'll be notified by email when their tax assessment is ready to view. If they don't have a myIR account, their tax assessment will be posted to them.

Not everyone will receive an automatic tax assessment

Those who have other sources of income, are self-employed, or do their own tax return won't receive an automatic tax assessment. They'll still need to file an income tax return (IR3). Inland Revenue has made it easier and faster to file online. Income that already has tax deducted, like investments or salary and wages, will pre-populate.

Automatic tax refunds

If Inland Revenue calculates that an individual paid too much tax during the year and is due a refund, Inland Revenue will automatically pay the refund directly into their bank account.

Bank account details need to be up-to-date as Inland Revenue will no longer issue refunds by cheque except in exceptional circumstances.

Tax to pay

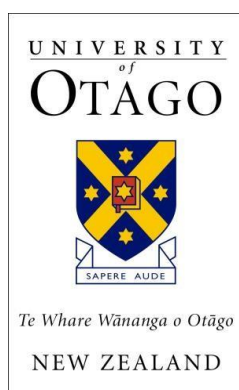
If an individual has not paid enough tax, Inland Revenue will let them know how much they owe and when it has to be paid.

In general, they will have until February of the following calendar year to pay any owing tax, unless they have a tax agent or a non-standard balance date.

A range of payment options are available, including payment plans.

The assessments are one of a number of changes that took effect from 1 April 2019, to simplify the end-of-year tax process.

For more information about this new process, visit www.ird.govt.nz and search 'Income tax assessments'.



Healthy Volunteers Wanted for Constipation and Irritable Bowel Syndrome (IBS) Research

If you are aged between 18 and 65 years old, healthy, currently live in Christchurch, have no issues with your **puku** (gastrointestinal health) and are interested to be part of the study please get in contact with the Research Team for more information.

This research aims to test a new approach for the treatment of gastrointestinal issues with kai (food). We are looking at different aspects of your everyday life and how they affect your puku (tummy) as well as treatment outcomes over time.

We are looking to recruit whānau (people) who have constipation and constipation-predominant IBS to be part of this feasibility trial as well as people who have no tummy symptoms at all. This research is very important as there is very little knowledge about how kai (food) affects constipation and IBS.

This study involves filling out questionnaires about your current health and quality of life, keeping food and symptoms diaries, eating kiwifruit and psyllium, and collecting some samples (blood, urine, faeces and breath) at multiple times over the course of 16 weeks. There will be 6 meetings with the research team at our office at 40 Stewart Street for 15 minutes during the study.

Your mahi/ help will be rewarded with a \$20 supermarket voucher for the initial meeting, and additional \$50 vouchers for each meeting if you decide to participate.

For more details please contact:

COMFORT-PSYKI Research team
University of Otago, Christchurch
comfortcohort@gmail.com

Phone: 021-279-1519 or (03) 364-1788

This project has been reviewed and approved by the HDEC. Reference: 18/STH/154



Christchurch Hospital Chapel is seeking contemplative photos

Are you willing to share an image with us?

It could include people, something from nature,
or an urban landscape.

*This image should either depict a time you felt blessed or
grateful, or symbolise what spirituality means to you.*

You may choose to have your name displayed or remain anonymous.
Please write a caption along with a couple of sentences about the photo.

Selected images will be enlarged and
displayed in the corridor near the
Chapel at Christchurch Hospital.

Your photo will not be used for any other project.

Please send a high quality, high resolution image to Angela the
Chaplain at angela.mccormick@cdhb.health.nz

For more information, please contact Angela on extension 89554.



Matters of the heart – Living with Atrial Fibrillation

Join us for a FREE community information series brought to you by the Heart Foundation and Christchurch Heart Institute, a University of Otago Research Centre.

Murray Hart, Clinical nurse specialist in cardiology from Christchurch Hospital will discuss AF symptoms, causes, risk factors and common triggers. You will also learn about treatment and ways to manage the condition.

You will also have an opportunity to ask questions. Friends and family are welcome to come along.

When: Thursday 13 June 2019, 6.30 pm – 8.00 pm

Where: New Salvation Army Building, 853 Colombo Street
(Corner Salisbury Street)

Register: Please register at afheartchch.eventbrite.co.nz
or by contacting Helen on 03 3662112 or email
helenc@heartfoundation.org.nz

