



ceo update

Canterbury
District Health Board
Te Poari Hauora o Waitaha

Friday 16 May - how the Canterbury Health System is excelling

Canterbury, like all New Zealand DHBs, has to meet health targets set by the Ministry of Health. Every quarter our performance is measured against these health targets, one of which is faster cancer treatment. Where we do best it is usually down to our integrated approach and the way we use our cross-system alliances to achieve the best possible health outcomes.

Our Faster Cancer Treatment (FCT) programme aims to improve the quality and timeliness of services for patients along the cancer pathway. It also links with other programmes of work aimed at improving our cancer diagnostic and treatment services.

The programme has four main workstreams. They are:

- faster cancer treatment indicators
- patient pathway coordination
- tumour specific standards
- multi-disciplinary meetings.

Our FCT team has recently received some very positive feedback from the Ministry of Health concerning our non-financial Quarterly Reporting. For both DV1 Faster cancer treatment and PP24 Improving Waiting Times – Cancer Multidisciplinary Meetings, our teams achieved an 'A' rating. This is encouraging as we continue working on this very complex and system wide project.

Specific comments from the Ministry include:

Faster cancer treatment: "Many thanks for comprehensive commentary. Canterbury DHB continues to make significant improvements to data capture and quality over the last few months. We note that reporting has now been rolled out to all departments, which is a fantastic achievement. As with the previous submission, your information was received on time, was of excellent quality and the volume of records is again high. All mandatory fields were complete."

Improved waiting times: "Thank you for your report. It's great to hear about your website encompassing Faster Cancer Treatment (FCT), Multi-Disciplinary Meetings (MDM) and cancer nurse coordinators, that you have reviewed the process and progress of your MDM, and that West Coast DHB is starting to join some MDMs."

These forward leaps come through a concerted team effort.

The FCT working group is made up of Clinical staff, Decision Support and IT - Anthony Fallon, Bronwyn Marshall, Dale Gommans, Desma Dawber, Alice Ronald, Jane Waite, John Wilkinson, Karen Francis, Tracey King, Karen Hawke, Kenny Daly, Nadine Peake, Nick Davis, Rob Hallinan, Ron Van Hamelsveld, Scott Maxwell, Timi Boddington and Jane Trollove
MDM Governance Group and staff - Rebecca Hummelstad, Laura Coleman, Evelyn Nelson (fxd term ended and now in P&F), Mark Jeffery, Saxon Conner, Sharyn MacDonald, Martin Whitehead, John Hawkins, Bronwyn Marshall, Jane Trollove and Deb Hamilton.

The FCT programme has many facets – all playing an important part in improving the journey for our cancer patients.

You can look forward to the team highlighting what each part of the team does in future CEO updates.



Cancer Nurse Co-ordinators. From left: Tracey King, Karen Francis, Nadine Peake and Desma Dawber

Friday facilities fast facts

Burwood

Gate 3 at Burwood Hospital has now been closed off temporarily, while roading improvements are made. Gate 2 on Mairehau Road is currently the main way into the hospital during this work, and a diversion is in place.

This week the first precast columns have been erected in what will be the new Back of House building.



Christchurch

C-spaces mock-up: Don't miss your chance to view the Design Lab mock-up of the ward 'C' spaces. The mock-up allows staff to experience and assess the clinical support spaces on wards, areas such as medication rooms, and what's known as the "patient heart space" – a space for patients to interact with their families. Contact Philippa Smith (philippa.smith@cdhb.health.nz) for more details or to book a session for you or your team. More information is available on the [It's All Happening](#) section of the staff intranet.

The mock-up is now available to view at these times:

- Monday 19 May 12 noon to 2pm
- Tuesday 20 May 9am to 11am
- Wednesday 21 May 11.30am to 1.30pm
- Friday 23 May 3.30pm to 5pm
- Monday 26 May 10am to 12 noon.

The design team has been meeting with user groups this week to finalise Preliminary Design Layout plans across the facility. The Haematology and Oncology User Groups have viewed the C-space mock-up and provided feedback. The Haematology User Group has also mocked up and tested a single bedroom and negative pressure bedroom with anteroom to ensure the bed and anteroom access works.

The Amenities group has signed off on the ground floor tea room and emergency department admin areas this week. Only one amenities area remains for sign-off – the radiology conference rooms.

Call for assistance: A healthy Information Technology (IT) infrastructure is at the heart of a modern "digital hospital". As part of the facilities development work, we would like to invite staff interested in forming a new IT user group to focus on integrating our IT infrastructure. If you are interested, please contact Mark Dingle at mark.dingle@cdhb.health.nz

An update on earthquake repair work

Earthquake repair works have been going on across the CDHB for a long time now.

The repairs have been done with staff and patient safety in mind. They are designed to make our buildings comply with new building code standards.

There are other benefits too. For example, new lighting and ceilings are being installed in many places, which has made these areas much brighter and better to work in. Floors and walls have had cracks repaired, rooms have been repainted, and seismic joints have been upgraded.

We appreciate that staff may be beginning to wonder when the repair work will be finished, particularly at Christchurch Hospital, where – because of the huge size of the buildings – each new week seems to bring a new corridor or stairwell closed temporarily, another room being fixed, a ward decanted.

We also appreciate that for staff who live in Christchurch, disruption at work will be an added stress on top of quakes, the recent floods, and all the hassles of getting our homes fixed.

Our main message is: thank you for your patience.

There is definitely light at the end of the tunnel – we are making good progress through our works programme. And we need to keep moving – getting the work done as quickly and efficiently as possible.

Doing construction work while running hospital services comes with its challenges. We will continue to inform staff about forthcoming repairs – look out for announcements in the daily staff email update.

If you have a query or a suggestion to make, please email itsallhappening@cdhb.health.nz and one of the team will respond.

Canterbury Hospitals' Friday Clinical Meeting (Grand Round)

23 May 2014, 12.15—1.15pm (lunch from 11.50am)

Speaker: Peter Sykes, Gynaecology, Christchurch Hospital

"Research-led improvements in gynaecological cancer care: a case report and review of the recent progress in this area."

The ongoing, steady improvement in outcomes in gynaecological cancer care illustrates why international collaborative studies and clinical research needs to be part of our core business as health providers.

Speaker: Dr Sreekanth Konda, Clinical Analyst, ACC

"Sharing knowledge to improve patient safety."

Overview of treatment injury legislation; Process: How and why to lodge a claim; National treatment injury information; Group specific information where relevant; Service specific treatment injury information; Adverse event notification; Case studies and sharing knowledge to improve patient safety.

Venue: Rolleston Lecture Theatre, Christchurch Hospital

Video Conference set up in:

- Burwood Meeting Room
- Meeting Room, Level 1 TPMH
- Wakanui Room. Ashburton
- Telemedicine Room, Admin Building 6—Hillmorton

Convenor: Dr Ruth Spearing and ruth.spearing@cdhb.health.nz

Key staff changes at Canterbury Health Laboratories

Over the past few weeks, there have been three key staff changes at Canterbury Health Laboratories:



Kevin Taylor

Business Development and Innovation Manager

It is with regret that we announce the departure of our current Business Development and Innovation Manager, Kevin Taylor. Kevin has worked at Canterbury Health Laboratories for the past 15 years within the Haematology Department and the Management and Leadership teams. Kevin has accepted a senior role at Hills Laboratory.



Tarn Donald

Section Head, Molecular Pathology:

We are delighted to welcome Tarn Donald to CHL. Tarn's first day as Section Head of Molecular Pathology was Monday 5 May 2014.

Tarn is a Scientific Officer, who has recently attained the Human Genetics Society of Australasia membership (part 1 exam) and has seven years of experience in molecular pathology and molecular haematology/oncology.

Thanks to Howard Potter who has been Acting Section Head.

Chris Sies

Section Head, Specialist Biochemistry:

It is with pleasure that we announce the appointment of Chris Sies to Section Head, Special Chemistry role. Chris started in the position on 12 May 2014.

Chris has 25 years of experience at CHL as a Scientific Officer within Special Chemistry. Chris brings to the role a strong chemistry background, a wide experience of developing specialist tests and good working relationships with CHL staff.

There will be a handover period with Trevor Walmsley, who has held the Section Head role previously, who has a phased retirement plan in place. I would like to take this opportunity to reiterate our thanks to Trevor for his many exemplary years of service to CHL. Trevor has made a huge contribution over more than four decades and will be greatly missed when he leaves at the end of the year.

Bouquets

Bouquets

Christchurch Hospital

"The Roving Grannies", what a great idea to get the message across. The two ladies were fantastic, they sure made us all aware of what they were up to. A couple of times when I was talking with them I could see the elderly people sitting in the chairs by the main entrance. Their smiles and eyes lit up like a Christmas tree. Then the ladies told them what they were about (falls prevention) and they thought it was a great way to get the message out. Well done.



Ward 23, Christchurch Hospital

Great care, great nurses especially Tara, Georgina, Jan and Roni. My wife was well cared for. Wonderful, caring nurses.

Ward 15 (Gastro Team), Christchurch Hospital

I would just like to say that this ward and team are amazing. They made me feel comfortable during my stay and my needs were well taken care of. If it wasn't for the doctors and the team I would not be here today. I have been to a few hospitals but I have enjoyed my time the most here. I will always be grateful to them. Just want to say a BIG THANK YOU to them all. God bless.

St John Ambulance, Emergency Department, SPCU, Wards 10 and 11, Christchurch Hospital

My wife came in with a perforated ulcer. From the ambulance attendants to the staff in surgery and in the wards we have been informed of the processes all the way through with a smile. The tea ladies and catering staff were marvellous so a big 'thumbs up' to you Christchurch staff and a big thank you.

Emergency Department, Christchurch Hospital

Christchurch is very efficient and fast at looking after patients. Also very friendly and very helpful. Good on Christchurch Emergency Department, you're the best so far. Actually, that's an understatement, you're excellent at what you do!

Ward 12, Cardiac Care, Christchurch Hospital

I cannot emphasise enough the care I have received from all concerned with my admittance. There is a wonderful ethic about this hospital.

Ward 28, Christchurch Hospital

This has been a journey no family should have to go through! We are so appreciative of the kind gestures, the little touches and hugs and words of encouragement. Thank you for allowing us to spend as much time as possible with [the patient] and to Ms Jackson for giving us a second chance.

You are all a great team and we always felt confident being in your care. With grateful thanks for all the support you have given us.

Christchurch Hospital

Thank you so much that my son was cared for so well. Wonderful in fact. We flew in from the US and the staff were so wonderful in helping us with resources and sometimes a shoulder to cry on. I want all to know that despite the circumstances it was a pleasure to be here. Give the staff a HUGE thanks on my behalf, they were all wonderful.

Oncology Ward 26, Christchurch Hospital

What an absolutely awesome team of people. Every single person that I had the pleasure to meet during my stay just made my stay that much easier to deal with. I had a rollercoaster few days, tears one minute and full of the joys of spring the next. And no matter what I was like, the nurses, aides, cleaners – just everyone, was so supportive and understanding. You guys are absolutely fabulous and thank you so, so much. That also includes those people that I met at the Emergency Department, especially Sue and Ollie.

Canterbury input into international nursing blog

CDHB's Nursing Director, Older People, Population Health, Kate Gibb, and CDHB Director of Service Improvement, Brian Dolan, have contributed to an international blog celebrating International Day of the Midwife and International Nurses Day.

Brian was involved in arranging the recent visit to Christchurch of Jennifer Kenward who leads patient experience work in the National Health Service (NHS).

The visit led to an invitation to Brian and Kate to each write a blog for the NHS on the theme of a day in their lives and the 6Cs (compassion, courage, care, commitment, communication and competence) as set out in the English national nursing strategy.

Kate says writing the blog was a great opportunity to reflect on her journey as a nurse, and experiences of working with inspirational nursing colleagues, particularly with the challenges faced in Christchurch over recent years.

"It was also potentially an opportunity to speak directly to UK nurses and talk about what a great health system we have here in Canterbury, in the hope some may want to come our way in the future."

Brian says, like many, he and Kate both share a deep and enduring pride in both their profession and the Canterbury Health System.

Jennifer says it is fantastic to be able to include international nurse perspectives as part of the NHS's 6Cs Live! Blog series.

"One of the aims is to highlight and celebrate the wide context in which care is delivered by nurses, midwives and care staff," she says.

CDHB Director of Nursing, Mary Gordon, says it is great that Canterbury blogs were included.

Read the full blogs here:

A Day in the life and what the 6Cs mean to me – the 6Cs 'downunder' in New Zealand

http://www.6cs.england.nhs.uk/pg/cv_blog/content/view/115551/95584

The 6Cs of an international nurse

http://www.6cs.england.nhs.uk/pg/cv_blog/content/view/115381/95584?cview=113904&cindex=3



Canterbury
 District Health Board
Tā Pōari Hauora o Wairarapa

West Coast District Health Board
Te Pōari Hauora a Rōhe o Tai Poutini

CHOOSE A REWARDING CAREER

Medical & Dental Nursing & Midwifery Allied Health Corporate & Support

132403	Information Analyst
132553	Registered Nurse - Paediatric Outpatients
132645	Medical Secretary – The Bone Shop
132518	Registered Nurse – Ward 23
128849	General Physician
132813	Facilitator – Child Health Service Level Alliance & Palliative Care Workstream

[Click here to see more opportunities on the careers website](#)

Kaikoura Integrated Family Health Centre

Construction of Kaikoura's long awaited new Integrated Family Health Centre finally kicks off this month after the appointment of Arrow International as the building contractor.

Site clearing works, demolition and minor alterations to the current hospital building, are scheduled to start almost immediately. However, because this site is on the ancient Takahanga Pā there will be a ceremony next week to farewell the mauri (life-force) of the land to allow for the work to get under way.

CEO David Meates welcomed Arrow International's appointment and says new health facilities have been a long time in the making. "It's a milestone worth celebrating. To finally reach this point where we can start construction is a fantastic achievement and it's all thanks to the remarkable efforts of everyone involved."

The new \$13 million Kaikoura Integrated Family Health Centre will replace the old hospital facilities and provide facilities for primary care, aged care, acute care, maternity care, radiology services and trauma stabilisation.

The \$13 million build will be a staged and complex development to ensure as little disruption as possible to the day-to-day activities at the hospital.

The mauri farewell ceremony will take place on the hospital grounds on Friday, 23 May at dawn (starting 7:15am). CDHB staff are welcome to attend.



Think winter – think road safety

Winter can be the most dangerous time of the year for road travellers.

Wet weather, fog, ice and snow can have serious consequences and these conditions can hit anywhere at any time during winter. You need to drive to the conditions.

Snow can be unpredictable, occurring suddenly in areas like the alpine passes in the South Island. It only takes a little bit of snow in mild climates to make roads treacherous.

Be prepared for snow and carry tyre chains that you know how to use and fit.

Take the time to find out and practice how to fit tyre chains before you experience -2° and snow.

If the weather is poor, consider if you really need to travel. You get to make the decision.

As you know health is a 24/7 essential service and the expectation is that when there is an adverse weather event, such as snow, staff should come in to work if they are scheduled to work and can do so safely. If you can't make it in to work, you should speak with your manager.

For more details check out CDHB's Adverse Weather Policy [here](#).

You'll find a pamphlet with winter driving tips to help you stay safe on the road [here](#). It makes sense to familiarise yourself with its content before the bad weather hits.

If you need an updated road report or additional information, call 0800 44 44 49 or go to www.highwayinfo.govt.nz

CDHB will also post any weather related news or travel advice that might affect staff [here](#) when the need arises.

Small Collabor8 project makes a big difference

Lean thinking Collabor8 workshops are continuing to yield good ideas and this one proves that a small change and working smarter together can make a big difference.

Nurse Maude's Community Palliative Care team Clinical Nurse Specialist, Raewyn Robinson, took part in a recent Collabor8 course after seeing it advertised at Nurse Maude. She and her team realised that not having the name and phone number of a patients' general practice team on the ID sticker on their files was creating inefficiencies.

"There are patient files that we take into the patient's home. Often we need to contact their GP while we are there. Not having the details on the file meant we would have to ask the patient for their GP's name, then ask for a phone book and look the number up," Raewyn says.

As well as being time consuming it also did not look professional. Raewyn liaised with the receptionist who got IT to help and the patient labels were redone to have the name, phone and fax numbers of the general practice.

"It was a tiny, tiny project but made life much easier, we don't have to go hunting for a phone book," she says.

Raewyn estimates that over a year the new labels would potentially save Nurse Maude about \$5000 in staff time.



Collabor8 places still available

There are still a few places on Day One of this month's Collabor8 course which will be held on Wednesday 28 May. Day Two will be held in July. Collabor8 is a non-consecutive two day programme with the purpose of further enhancing leadership capacity and capability among our workforce using the concepts of lean thinking.

We have broadened the scope to include ALL CDHB staff as well as opening it to other valued members of the health community, including Pegasus, Nurse Maude, Healthcare NZ, NGOs, private health sector and other primary care providers. This inclusive approach is proving to be a great success with our previous cohorts, enabling people to network and share with others from across the health sector. There is no charge to attend Collabor8.

A key element of having two non-consecutive days is the expectation that a service improvement project will occur in between. On the morning of Day Two, there is the opportunity for participants to share their results and experiences with colleagues and their managers. David Meates, Mary Gordon and Director of Allied Health, Stella Ward have also been invited and anticipate attending.

There are a total of 28 places available on each day. The days are co-facilitated by Lynn Davies, BDU Project Manager (who has a physio background) and Brian Dolan (nursing).

Please can you send names of participants through to [Collabor8](#) - collabor8@cdhb.health.nz.

Positive legacy in Emergency Department and beyond

At the top of a white wall in an otherwise unremarkable conference room in Christchurch Hospital's Emergency Department (ED) there is a row of four special black and white photos.

Each one is a formal framed portrait of the hospital's previous ED Clinical Directors (CDs).

Soon there will be a new addition— a second photograph of Angela Pitchford, who retires on May 23, after an impressive 40 year career in emergency medicine, including 22 years as CD at Christchurch Hospital's ED. Angela is the only woman in the row of photos and will be the only CD so far to be featured twice.

"I'm a double flyer," she says, having had the role from 1986-88 and from 1994 to now. The photos include two men Angela describes as mentors, Shailer Weston and Duncan Scott.

"I loved working with them. When you are a newcomer to a country and a health system it's very important to understand how people live and practice medicine. They both gave me a fantastic introduction to New Zealand."

She is also proud to have worked closely with experienced Charge Nurse, Jan Neilson.

Angela says being a good emergency medicine practitioner requires "enjoying the action, the sense of hustle, and the unexpected, and having the ability to make careful but quick decisions".

"Your day is never really planned because you don't know what's coming through the doors."

The job of CD has been very rewarding, she has enjoyed the organisational aspects of running a department efficiently, learning about systems and quality frameworks and the close contact with nursing colleagues. She sees creating a stable team as one of the highlights.

"I am also so proud of the way the whole team, clerical, medical, nursing, and allied health handled the earthquakes, it was like watching a well-rehearsed orchestra performing."

Angela was born in the small city of Moncton, New Brunswick, Canada, and grew up on the edge of the Canadian prairies in Western Canada in the city of Winnipeg, where she completed her medical training and worked as an Emergency Physician until 1983. She left for Christchurch with her former husband, a Kiwi, and their two young children. Angela liked the city from the start.

"Arriving in Christchurch was like stepping through a time-warp – but a nice one. There was a certain civility to life here," she says.

However it was a city and country where emergency medicine was in its infancy. The garden city's ED had just six house surgeons and two part-time general practice registrars. Out of hours it was only staffed by house surgeons.

"Dr (Duncan) Scott said to me, you look like you can do the job but I don't know what we would do with you."

Despite that, within four months Angela was deputy CD and in 1986 was appointed CD. She attended the foundation meeting of the then yet to be established Australasian College of Emergency Medicine and became involved with it shortly afterwards.

In conservative 1980s-era Christchurch Angela was one of the few women in senior roles but says she has never been a feminist and has just "done what I wanted to do" – which was have a full-time career alongside being a mother to two sons and a daughter.

Family took Angela to Auckland in 1988 where she worked at Auckland Hospital's ED and became Head of Emergency Medicine. She describes her six years there as "one of the toughest jobs" and a maturing time, working in a big city hospital with a high number of trauma patients.



Continued on the next page...

"I learnt so much and I became interested in the whole area of clinical risk management, an interest I maintain today."

Angela says she has never missed Canada but yearned for Christchurch while she was away.

"I used to see the Anchor milk ads which showed scenes of the South Island and the mountains and get a pang."

Christchurch ED staff greeted her with a large welcome back banner on her return to the role of CD in 1994.

"I felt tremendously welcomed," she says.

Angela holds a Fellowship from the Australasian College for Emergency Medicine. Among numerous roles she is the Chair of the Clinical Support Services Cluster and a member of the Christchurch Hospital Management Group. For many years he was a medical surveyor for Quality Health New Zealand.

General Manager, Medical, Surgical and Women's and Children's, Christchurch Hospital, Pauline Clark, says Angela is an esteemed medical leader and her contribution has been outstanding.

"That contribution extends beyond the direct care provided to patients, through her leadership in improving overall standards of care provided across this campus. Her willingness to get involved, to advocate for patients and for appropriate conditions and workforce leaves a positive legacy in the ED and beyond."

Pauline says it has been wonderful to have a strong, positive female role model for women across the campus.

"An ED without Angela is hard to imagine."

Emergency Medical Specialist, Mike Ardagh, who has worked with Angela for more than 20 years, says it cannot be overstated how important Angela has been for Canterbury and for Emergency Medicine in general. She has led the ED through the formative decades of the speciality, including through "some very difficult times".

"In addition to her clinical skills Angela's expertise with people and her understanding of complex systems have enabled the success of our ED and have contributed to the improvement of others."

She leaves a department which is clinically and academically excellent, and with strong relationships in the hospital and with primary care.

"I regularly visit EDs throughout New Zealand as part of my role with the Ministry of Health and the contrast has emphasised the value of Angela's leadership in Christchurch," Mike says.

Angela retires next Friday 23 May, and is looking forward to new adventures, including travelling and spending more time honing her cello playing skills.



The ED team working by torchlight during the February earthquake

One minute with...Maree Thomas, Receptionist, Community & Public Health

What does your job involve?

All the usual reception stuff – quite full on dealing with a wide variety of visitors and inquiries of all types! Many people (including CDHB employees) have little idea of the area of work covered within Community & Public Health.

Over 100 staff are involved in Health Promotion and Protection of the population of greater Canterbury: ie safety of recreational and drinking water, investigation of notifiable communicable diseases, smoking cessation and enforcement of Smokefree and alcohol legislation, healthy food and exercise choices, Wellbeing/Allright campaign, Health Promoting Schools, environmental/ asbestos/ hazardous substances issues, healthy housing, to name but a few.

Why did you choose to work in this field?

Most of my employment has included a customer service component and I know that reception is a comfortable fit for my skills and personality.

What do you love about it?

The constant variety.

What are the challenging bits?

Learning to refer the many and varied inquiries to the appropriate person for answer/action.

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

I am privileged to work with an amazing group of talented, compassionate and fun colleagues who make it a pleasure for me to come to work each day – I could not choose any one over the others.



The last book I read was...

Russka by Edward Rutherford – an epic journey through Russian history 100AD to post WW2 – utterly absorbing and informing!

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

Whitianga - spent a few days there recently and would love to return to the warmth, sunshine and glorious beaches!

My ultimate Sunday would involve...

Sleep in, beach walk and sharing a family meal together.

One food I really dislike is...

Melon of any kind.

My favourite music is...

Anything to sing along with, dance to or relax to.

If you would like to take part in this column or would like to nominate someone please contact

Naomi.Gilling@cdhb.health.nz

Metro Bus Services Review May 2014

Metro is currently reviewing some bus routes to help keep our city heading in the right direction. The review proposes improvements to city and Selwyn bus services. It reflects input from the previous consultation and customer feedback on the changes made in 2012. The aim for the planned improvements is to get more people using buses. The plan proposes providing frequent, reliable services in popular areas. Less than 50% of operating costs are covered by fares and are subsidised by local rates and taxes. Services have to be economically viable and Metro are trying to improve them without increasing fares or rates. The first review looked at services in the north and south of the city, and in Waimakariri. It introduced the successful high-frequency Blue Line. The following information explains proposed changes to the current routes, the proposed new routes and a map showing the proposed network.

[Our Plan](#)

[Proposed Changes to Current Routes](#)

[Proposed Bus Routes](#)

[Proposed New Bus Routes Frequency Table](#)

[Proposed Christchurch Network Map](#) (pdf 8.9 MB)

[Proposed Selwyn District Network Map](#) (pdf 3.1 MB)

[Feedback Form](#)

To check Metro have their thinking right, they want to hear what their customers and the community think about their current proposals before the final decisions are made. Services in Waimakariri District will be further reviewed at a later date. Please take time to view the information and provide them with your feedback by filling out our online form above. **Submissions close Monday 16 June.**

If you have any questions regarding the review or the proposed routes email metroreview@ecan.govt.nz

ONE STOP Submissions Shop

If you or your division are interested in preparing or contributing to a submission on a proposed regulation, policy, or other document that has been notified for public consultation, please email submissions@cdhb.health.nz

A submission coordinator will be able to help identify others who may be interested in submitting, and will make you aware of the appropriate approval mechanism within CDHB.

A coordinated and consistent approach will help ensure all submissions contribute towards the CDHB vision of promoting, enhancing and facilitating the health and wellbeing of the people of Canterbury.

Canterbury

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Next Phase of App-V installation pending

Following the successful deployment of Phase one of the App-V installation, we will start phase 2 on **Monday 19 May**. You will see the following steps as the deployment process rolls out.

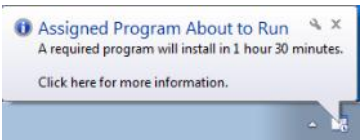
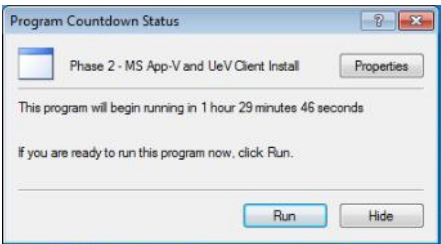




Phase 2 (week 21)

These software items will be installed a week after "Phase 1"



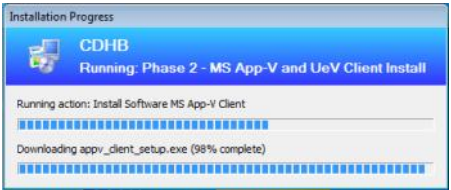
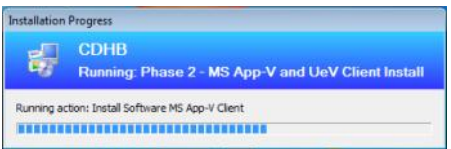
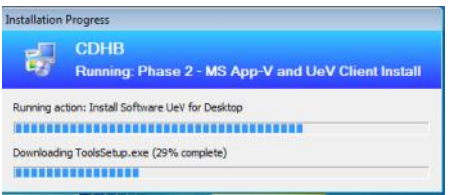
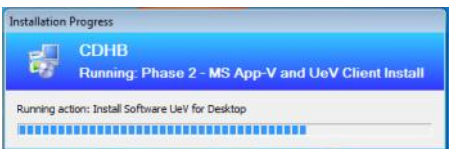
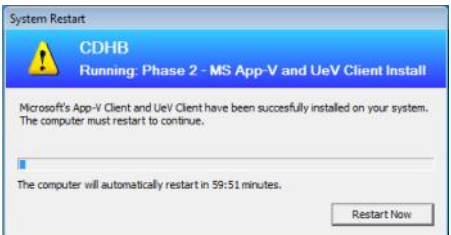
- Create CDHB folder
- Create Temp folder
- Set permissions on Temp folder
- Install BackGround info
- Install Windows 7 x64 Maori Language package
- Install Sophos Webgateway Root Certificate for Internet Explorer
- Install App-V 5.0 SP2
- Install UeV 2.0

For Desktops

For Laptops: requires two reboots of the machine to finish the installations completely

Screenshots of what you can expect	
1.	 <p>Taskbar balloon message will pop up to indicate software is ready to be installed. Maximum time (90 minutes) to allow you to install software. When no action is taken, software will be installed after 90 minutes.</p>
2.	 <p>When you click on "Click here for more information" on the screenshot above, you will see this window.</p> <p>Here you can choose to "Run" if you are ready now to install software. Or you can choose to "Hide" this window and choose a more convenient time to install software, within the mentioned 90 minutes.</p> <p>The taskbar balloon will pop up every 10 minutes to indicate software needs to be installed.</p>
3.	 <p>Progress bar about downloading Toolkit Package. This software will query your machine for installed hard- and software items.</p>
4.	 <p>Progress bar about installing Toolkit Package.</p>
5.	 <p>Query your machine for installed hard- and software items.</p>
6.	 <p>Progress bar about downloading Windows 7 Maori Language Package.</p>

Continued over page

7.		Progress bar about installing Windows 7 Maori Language Package.
8.		Progress bar about downloading and installing Sophos WebGateway Root Certificate.
9.		Progress bar about downloading Microsoft App-V client software.
10.		Progress bar about installing Microsoft App-V client software.
11.		Progress bar about downloading Microsoft UeV client software.
12.		<p>Progress bar about installing Microsoft UeV-V client software on desktop computers.</p> <p>Similar progress bar will show for laptop computers. For laptop computers it's necessary to restart, to activate some services. After restart it will continue Microsoft UeV client software installation.</p>
13.		Close all your applications and click on "Restart Now" to reboot your machine. You have 60 minutes.

Spotlight on Your Development



The Learning & Development Team has crafted some great courses to support you in the workplace. Read what some of our recent participants have to say:



Understanding Budgets

Anja Werno: Medical Director, Microbiology

What inspired you to do this course?

The desire to undertake the course came from identifying a gap in my knowledge and understanding of principles.

What did you value the most?

It was valuable to have a fairly broad overview of the topic to begin with. Sharing with other participants the individual challenges opened up my mind to the breadth and variability of our work environment.

How has it changed the way you work?

A better understanding has enabled me to question current practices in an informed manner and will enhance a collaborative approach with our finance team.

Why should a colleague do this course?

Most of my colleagues in Clinical leadership roles have had no formal training in budgeting and would benefit from increasing their knowledge in the field.



Leading a Team

Keryn Burroughs - Women's Health Social Work Team Leader

What inspired you to do this course?

I'm always keen to learn and have a strong commitment to my professional development. I hoped to gain the opportunity to explore the core values of teams and what qualities I can bring to the leadership role.

What did you value the most?

The 'team' approach of the course. I appreciated the discussions with the other Team Leaders, self directed learning, and the collegial approach to learning. Importantly we learnt about the value of taking the time and effort to build a team. That team members need an understanding of their role and what is expected of them and they flourish when they have a clearly defined objective.

Has it changed the way you work?

Most definitely, I'm a reflector so have spent a lot of time thinking about the development of a team, how to form a team objective, our team tools, our purpose and what we are going to achieve. The training has broadened my focus and I have a clearer understanding of my Team Leader role now.

Why should a colleague do this course?

It's a great opportunity to connect with other leaders and to discover your strengths and an understanding of leadership skills.

The [Development Calendar](#) is for ALL staff

[Click on this link or check out the HR intranet home page to search our courses.](#)

The Florence Nightingale Recycled Wearable Arts Awards

Nurses celebrating International Nurses Day on Wednesday put their creative talents to the test by using recycled and reusable items to make either a piece of art or a wearable piece of clothing. A wide variety of apparel was modelled at the Rolleston Theatre during the Nursing Showcase.

The category winners were (see photos below):

Gallery Artwork: Christine Pithie with a New Zealand Nurses badge

Wearable item : Ward 28 DEU



"May the force of collaborative care be with you" created by Canterbury Clinical Network Collaborative Care Liaisons – Annie Hofmeester and Donna Hahn. All materials used are recycled from various iterations of Collaborative Care engagement packs, pamphlets and hand outs that are no longer used due to changes within the system.

Modelled by Donna Hahn.



NZ Nurses badge wall hanging – by Christine Pithie, CNS Gerontology, The Princess Margaret Hospital (TPMH). The wall hanging depicts the NZ Nurses badge constructed from expired medications, wood recycled from TPMH and old nail polish.



"Something old, something new, something borrowed, something blue" created by Department of Nursing, Burwood Hospital.

Trish Leith, Emma Lanyon and Lyn Brice describe this as 'a uniform of uniforms', showing how nurses can be a force for the future while still embracing what is good and useful from the past. The gown was made from recycled uniforms and discarded theatre staff cover gowns. It was trimmed with silver epaulettes and a belt made from new/ recycled pharmacy cold packaging material.

Modelled by Emma Lanyon who accessorised with delightful silver shoes.



Left: The winning team from Ward 28 DEU: Di Hudson, Academic Liaison Leader for the Nursing Students; Ali Watkins, Charge Nurse Manager; Judi Jessop and Lisa Gillatt. Modelled by Jae Abecia. Two other designers not in the picture were Jackie McDonnell and Glenis Birch.



**Department of Psychological Medicine
University of Otago, Christchurch
And the
Specialist Mental Health Service
Canterbury District Health Board**

Clinical Meeting

Tuesday 20 May 2014
12:30 pm – 1:30 pm

Venue: Beaven Lecture Theatre,
7th Floor, University of Otago, Christchurch School of Medicine Building

"The likely negative consequences of the Trans Pacific Partnership Agreement (TPPA) on mental health care".

Presented and chaired by: Dr Erik Monasterio

SPECIAL NOTES:

These meetings will be held on a weekly basis (except during school holidays) and the details of the next meeting will be emailed to you in advance.

[A light lunch will be served at the School of Medicine venue from 12 noon.](#)

Psychiatrists can claim CME for attending these meetings.

The sessions will be broadcast to the following sites:

For TPMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at TPMH.

For Hillmorton attendees the venue is the Lincoln Lounge, Admin Building, Hillmorton Hospital

The dial in address is: **Psych Med Grand Round.**

Staff Wellbeing Programme: Play Challenge starts 19 May – New Weight Watchers programme starts soon!

Play Challenge – Register now! Starts 19 May. To register, simply go to www.tracksuitincline.co.nz and enter the Company Code: dhbstaffwellbeing. More information available on the Staff Wellbeing Programme intranet page

Weight Watchers @ Work – new 13 week programme starts the week of 26 May. More information available on the Staff Wellbeing Programme intranet page

Zumba – new class/instructor at TPMH Wednesdays 1630hrs in the Riley Gym. No need to register – just turn up

Yoga – new class at Community & Public Health Mondays 1715hrs in the Aoraki Room. Contact Nadia to secure a place

nvbartholomew@googlemail.com

Staff Wellbeing Programme intranet page!!

<http://cdhb.intranet/corporate/HealthandSafety/SitePages/Staff%20Wellbeing.aspx>

Check out this page for information on yoga, Zumba, Pilates, mindfulness, 30 minute walk 'n workout groups, Earthquake Support Coordinators, Finance/Retirement seminars, Employee Assistance Programme (EAP - free counselling for staff), and more...

Updated **Something for You employee benefits** – recently updated on the Staff Wellbeing Programme intranet page. Contains a large number of discounted products and services for CDHB Staff.

INTRODUCTION OF THE COOK® PICC

Following a successful 12 month evaluation of the COOK® Turbo-Ject™ PICC in haematology/oncology we are now rolling these out across the CDHB. This PICC will replace the current ARROW brand PICC.

There is an excellent variety of PICC configurations in the COOK® range that meets both the clinical and patients treatment requirements. Interventional radiology staff can help advise and select the correct PICC for your patient.

There are some subtle differences between the new COOK® PICC and the previous ARROW PICC (detailed below) which you need to be aware of to safely manage a patient with a COOK PICC.

The CVAD insertion & maintenance form still needs to be used with the COOK PICC.

WHAT YOU NEED TO KNOW ABOUT COOK® PICCs:

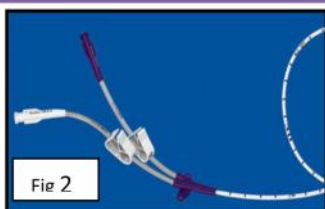
- The tip of the PICC is trimmed, on insertion by the IR staff; to suit the patient's size therefore there is less external catheter under the dressing. This minimises the risk of inadvertent catheter migration during dressing removal and changes
- Expect the external measurement to now be approximately 4cms only
- The PICC has a reverse taper which assists in preventing inward migration (i.e. the PICC increases in diameter from the 4cm mark to the purple wings see fig 1)
- The centimetre markings are clear, do not rub off, and begin from the purple wings at '0'cms enabling you to measure exactly how much PICC is external to the patient in a logical order (i.e. 0-5cm etc see fig 1)
- The PICC has Roberts clamps making it easier to open and close the clamp and these clamps cannot be removed by patients or staff (see fig 1.)
- The double lumen PICC has lumens exiting at the same point. The single lumen PICC also has the same configuration refer to the section 'IMPORTANT INFORMATION' (see fig 2)
- The COOK PICC allows higher flow rates and can be used in some circumstances for CT bolus contrast injections

IMPORTANT INFORMATION:

There is **NO PURPLE** marking 2cm from the insertion site on this catheter (these marks were added by IR staff on the previous Arrow catheters but are not needed on the COOK product because it is already clearly marked in 1cm increments (as above)

On removal there is **NO BLUE TIP** on the end of the COOK® PICC

Following the removal of a COOK® PICC remember to measure the length and compare it to the documented insertion details on the CVAD Insertion and Management form (If the form is not available contact Interventional Radiology on the following ph number: 81410)



Red circle indicates the area of the dressing where the purple wings sit



Completed dressing



New 13 week series begins on the week of 27th May 2014

With our know-how and your Incredible, there's nothing you can't achieve... and we're here to show you how

Weight Watchers is a **LIVEABLE, FLEXIBLE AND SENSIBLE PROGRAM** about food education...so no meal replacements and no food or drink is 'off limits'

NOTE: To run at each location a minimum of 12 is required. Please email your contact person below to secure a place ASAP

For More Information Contact:

Burwood	Dale Baillie	x 99827	Dale.Baillie@cdhb.health.nz Tuesday 27 th May to 19 th August 3.00pm
Christchurch Campus	Michelle Paenga	x 86571	Michelle.Paenga@cdhb.health.nz Wednesday 28 th May to 20 th August 12.30pm
Hillmorton	Sharryn Sunbeam	x 33933	Sharryn.Sunbeam@cdhb.health.nz Wednesday 28 th May to 20 th August 12.30pm
TPMH	Karyn Wallace	x 66330	Karyn.Wallace@cdhb.health.nz Thursday 29 th May to 21 st August 12.15pm

Price: \$232.70 per person

*The programme fee of \$232.70 can be paid **in full** to the Weight Watchers leader at your **first** meeting.*

Or you can arrange payment by direct debit (4 payments throughout the 13 week programme). This must be arranged at the first meeting so you'll need to bring your bank details.

Due to additional administration/bank fees the total cost of the direct debit option is \$249.15



On Saturday **May 24th 2014**, 250 scooterists will attempt to conquer the Southern Alps riding 250 gruelling kilometers coast to coast from Christchurch to Hokitika to raise funds for the New Zealand Cancer Society.

The Safari is not a race – it's an awareness-raising and fundraising event for survivors, families of those with cancer and those committed to making a difference.

Support ... Donate ... Spectate

Find out more by visiting our website.

www.ScooterSafari.co.nz



Like us on Facebook

AIR NZ ENGINEERING • KIRWEE RUGBY CLUB • SHEFFIELD PIE SHOP • CASS • ARTHURS PASS • KUMARA RACECOURSE • BEACHFRONT HOTEL

QUIT & WIN IN MAY

To celebrate World Smokefree Day on 31 May, Smokefree Canterbury are giving smokers who want to quit the chance to win a \$250 grocery voucher.

To enter just go
www.smokefreecanterbury.org.nz



The competition for the \$250 grocery voucher will be drawn on 3 June 2014.
To be eligible people must reside in Canterbury and be regular smokers.



PARTICIPANT GUIDE

DURATION

The Play Challenge runs for one week (5 days, Monday – Friday)

START DATE

The challenge begins on Monday 19 May 2014

WHAT IS INVOLVED?

The Play Challenge is a one week team challenge designed to engage you in the lost art of play. Play connects us to others; it fosters our creativity, stimulates our imaginations, makes us happy, helps to trump feelings of loneliness, isolation, anxiety and helps to develop our social skills. This challenge will involve being creative using both your body and your mind, so be ready to smile, laugh, and have fun!

PRIZES

Every participant who enters each daily activity will be entered into a final individual prize-draw to win a \$1000 travel voucher and every team of four who enters all daily activities will be entered into the final team prize-draw to win a \$150 Red Balloon voucher, each!

You can also play 'Spin the Wheel' each day of the challenge to be in to win some other great prize opportunities throughout the challenge also including restaurant vouchers, fruit and vegetable hampers, iPod shuffles and Rebel Sport vouchers!

SIGN ME UP!

Gather your team of four*, come up with a clever team name, nominate a 'Team Captain' and register from Monday 5 May on tracksuit-inc (please go to the Staff Wellbeing Programme intranet page or www.tracksuitincive.co.nz and enter the company code: dnbstaffwellbeing). Enter your email addresses and you will all receive a confirmation email with your individual username and password.

Register your team before Friday 16 May and your team will automatically be entered into the prize-draw to win a \$50 prezzie card, each!

*Teams of four: Please remember, family members are welcome to participate in the challenge and can make up your team!

CHECK IN

Log on to the Health Challenge website (www.healthchallengelive.co.nz) on the day that the challenge begins (19 May) to get the details of your first activity and then log on every day thereafter for the five day duration. Each team member is to enter their responses to the activity each day onto the site to score points and get feedback.

CHECK OUT

Log on to the website each day to check out:

- The challenge calendar – flick back through the days to enter your scores for previous activities.
- The noticeboard for any special messages including prize opportunities and winners.
- The leaderboard – check out where your team is sitting within the ranks!

CHECK YOUR EMAIL

Every day we will send you an email which will include a link directly to the Health Challenge website and updates on the activities and regular prize-draws! Check your inbox each day from 19 May for more info.



VOLUNTEERING CANTERBURY PRESENTS

CELEBRATING VOLUNTEERING

DIVERSE ☆ DYNAMIC ☆ DAMN GOOD FUN

Wednesday 18th June 2014

10am - 5pm

.....
Civic Offices
Worcester Boulevard
.....

www.volcan.org.nz
03 366 2442

