



COVID-19 vaccinations – rollout continues

Privacy breach

I want to acknowledge the small team who responded to the privacy breach which was discovered over the weekend, and who continue to work on contacting those impacted and are currently working on an alternative booking solution. This is an extremely unfortunate error and I sincerely apologise to everyone impacted. We have now spoken with, or emailed anyone whose information was in the system last Friday – a total of 714 people.

The issue was due to a coding error in the software used in a local Canterbury appointment system to book family members of border and MIQ workers for their COVID-19 vaccination.

This potentially allowed those invited to make appointments to view details about other individuals also making appointments, including name, gender, date of birth, phone number and NHI number but no personal health information.

At this stage, there is no evidence of any malicious breach, further access to this information or sharing of it. Individuals with questions or concerns about the booking system coding error should call Healthline on 0800 358 5453.

The appointment system was taken offline immediately once the error became known. Importantly, vaccinations are still going ahead for those who have booked.

A national booking system, using different software to Canterbury's interim booking system is currently being developed by the Ministry of Health to support scaling up of the vaccine programme.

The Ministry of Health made two media statements on this issue which you can view on its [website here](#).

A shout out to the wider COVID-19 team

I want to thank our COVID-19 vaccination rollout team for their work in planning for our DHB's implementation programme. An impressive 3971 doses have been given to date. We have vaccinated 3268 people with their first dose and 703 have had their second dose, which means they're now fully vaccinated.

One key team is our excellent public health nurses who have been at the sharp-end of the operation and I thank them for their skill, knowledge and dedication to date.

I would also like to acknowledge that it has taken a much wider team to get us off the ground. This has made the most of clinical and technical expertise as well as a great deal of planning, administration and other support.



Kylie, the partner of a border worker, was thrilled to receive her first COVID-19 vaccination from Public Health Nurse Belinda

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Last week we began the second vaccinations for border and MIQ workers and held our first two vaccination clinics at Burwood for their family/whānau. From mid-April we'll be starting to vaccinate health workers who interact directly with patients or who are at a greater risk of contracting COVID-19, such as lab staff. Māori and Pacific peoples' health providers will have vaccine supplies allocated for older people and those living within and supported by a whānau environment.

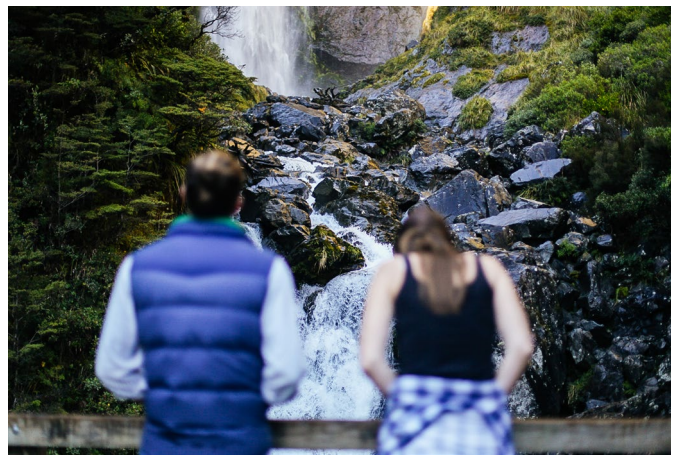
Work continues to increase our activity and build our capacity ahead of the mammoth task of vaccinating our general Canterbury population, scheduled to begin from June and peak at around 35,000 vaccinations a week in Canterbury alone. It's a huge task, but there are few more important than protecting our staff and the people we serve.

Thank you all in anticipation of what is to come!

Taking time to refresh and recharge

We all know taking a break is sometimes easier said than done, however, April is a month where we have two long weekends and school holidays, so if you're able to take some annual leave talk to your manager and get it booked in to make the most of the balmy autumn weather before winter sets in. It's important for your wellbeing to switch off and take a break so even if it's a long weekend, getting out for some fresh air amongst nature will do wonders!

Have a great week.



Getting out into nature is a great way to unwind. We're spoilt for choice here in Canterbury with places like Devil's Punchbowl Waterfall in Arthur's Pass

Ngā mihi nui

Peter Bramley, 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](#).

Canterbury Health System staffing up to manage COVID-19 vaccination rollout

New Zealand's COVID-19 vaccination programme is ramping up and the team planning and managing the various aspects of our rollout in Canterbury is growing as the number of people eligible for vaccination will start to rise significantly over the coming weeks and months.

This week we welcome Kim Sinclair-Morris to the team. Kim is currently the Executive Director of the [Canterbury Clinical Network](#) (CCN). She will be joining us on a three-month secondment as Programme Lead for the COVID-19 vaccination rollout. Kim will work alongside Ralph La Salle who is the Executive Lead and Senior Responsible Officer for our overall COVID-19 Response.

As the team grows it will function under a structure similar to an Incident Management Team, with clearly defined roles. Going from 1000 vaccinations a week, up to 3,500, then 35,000 a week by July is going to be challenging, however, we are building a strong team to ensure Cantabrians get their vaccinations at the right time. There's going to be enough for everyone, and our plan is clear: we need to first protect those most at risk. The team continues to work methodically through the priority groups.

To date the focus has been on people working in our managed isolation and quarantine facilities and their household contacts. The team has now started providing the second dose of vaccine to this group.

Current planning is focused on those in groups 2a and 2b which includes frontline healthcare workers who could be exposed to COVID-19 while providing care, and then frontline healthcare workers who may expose vulnerable

people to COVID-19. Further details of the rollout are available on the government's [COVID-19 website](#). Equity for our most vulnerable populations is foremost in our planning and we continue to work with our Māori and Pacific partners to ensure there is an equity lens across our vaccine rollout.

Special thanks to Don Elder, Independent Chair for the CCN Alliance Leadership Team who has kindly agreed to loan us Kim for three months. Kim has been in her current role as Executive Director at CCN since 2013 and has links and networks throughout the Canterbury Health System which will prove invaluable in this role.

Don says he's only too pleased to back this high priority national rollout by supporting Kim's secondment, saying: "She's a strong leader who will clear roadblocks to get things done. She is highly regarded among peers and the wider health system, and I know her considerable networks and leadership experience will help ensure a successful rollout as the vaccination programme progresses".

More information on the COVID-19 vaccination rollout is available at www.covid19.govt.nz and on the Ministry of Health website www.health.govt.nz.

Find out when you can expect to get a vaccination

While frontline staff who are at greater risk of getting COVID-19 will be offered the vaccine first, most DHB staff will be in Group 4, and can expect to be vaccinated during the second half of the year. Find out more on the government's [COVID-19 website](#).

COVID-19 vaccine update

Since Tuesday 23 February our DHB vaccination team has been working tirelessly to deliver the COVID-19 Pfizer vaccine to our border workers. About 20 percent of New Zealand's approximately 12,000 border and Managed Isolation & Quarantine (MIQ) workers are based in Canterbury and we are now giving these workers their second dose.

We are now at the exciting time of being able to look forward to our own high-risk frontline staff receiving the vaccine as part of Group 2. We are expecting vaccines to be offered from mid-April. More details of will be confirmed with managers over the coming weeks.

High-risk frontline healthcare workforces are those who are most at risk of contracting and/or spreading COVID-19 through their interaction with patients or COVID-19 samples (such as lab technicians).

For many, the last year has been challenging and receiving the vaccine is a tangible sign of 'light at the end of the tunnel'. Canterbury is well supplied with vaccines and the right people at the right time will receive the vaccine. The Pfizer vaccine offers our staff the best way to protect themselves and their whānau against COVID-19.

High level advice has been prepared for DHB managers to ensure everyone has the information they need to advise staff and respond to questions on the COVID-19 vaccination rollout for health staff. This information has been developed by TAS, an organisation which works collectively with DHBs on matters that impact all DHBs. The latest FAQs on the COVID-19 vaccination programme for health managers and staff can be found on the TAS website [here](#).



Bouquets

Ward B4, Christchurch Hospital

I am writing on behalf of my sister and myself. From the moment of admission to Ward B4, our whānau has been accorded respect and acknowledgement culturally, and kept informed of different stages of my sisters' recovery. Her speedy recovery reflects the excellent medical team, the doctors and the exceptional nursing team. We wish to personally thank the front desk staff as they are the faces that first represent Ward B4 and how you will be received. Also, the people from WellFood are another excellent team.

Bryan Falloon, WellFood

So grateful to Bryan for going above and beyond and always making me feel cared for. He is so obliging, and his presence makes me feel peaceful.

Eye Clinic, Outpatients, Christchurch Hospital

Most impressed with the staff and the treatment.

Radiology reception, Christchurch Hospital

I am blown away by the reception my father and I received at the main Radiology reception. The two receptionists greeted us with professionalism and genuine kindness. As I waited for my father to have his procedure I overheard their kindness and helpfulness continue with each patient that arrived. These ladies are an asset to the team.

Christchurch Hospital

Lovely student and doctors. Very thorough and great bedside manner for my husband's treatment.

ICU, Christchurch Hospital

My father had open heart surgery and had a stay in ICU. He had complications after his surgery which meant a

longer stay in ICU. The staff were fantastic, very kind and informative. The care my father received during his stay in ICU was unbelievably incredible. My father, myself and all our family will forever be grateful for the wonderful care Dad got and the way I was treated. Unfortunately remembering names isn't one of our fortes so for everyone who cared for him, thank you.

Ear Nose and Throat, Christchurch Hospital

Sarah and Angela were amazing with our two-year-old. What a great team. Thanks.

Plastics Clinic, Outpatients, Christchurch Hospital

Plastics specialist team and outpatients were exceptional. Thank you.

Rheumatology Outpatients

Very prompt and efficient appointment. On time, good explanation of issue, and clear description of medications and plan for future follow up.

Neurology Ward and Physiotherapy, Christchurch Hospital

I'd like to let you know that Charise, Lauren and Ruth (from Ward A5) and Melissa are absolute saints. They have made this whole ordeal so much more comfortable and less scary for me. I used to have a fear of hospitals, but not anymore, now that I know there are absolutely amazing staff like these wonderful women making the experience for myself and others a lot better. They have all been so kind and caring, checking in on me often and sharing their knowledge and expertise in their fields. These people really do make a difference to the experience of this place. I would also like to thank my Physio student (I think her

name is Ashleigh). She's very new, I think two weeks in, but already she's so comfortable and confident with her knowledge and how to interact with people to help them understand and feel comfortable with what's going on. She is definitely in the right field and doing an amazing job, I cannot speak highly enough of her!

When I came into hospital I was terrified. I thought that I wouldn't be able to walk or move confidently again. But all the staff I've interacted with and who have helped me, from the WellFood staff, to the cleaners, have all been so good to me. It restored my confidence and definitely helped me feel a lot better about my recovery. I still have a way to go, but the team you have here have made a surmountable difference in my spirits to keep pushing.

Thank you so, so, much Christchurch Hospital. The selflessness I've experienced from each and every one of your staff members is something I'll never forget and will carry with me for the rest of my life. Thank you, from the bottom of my heart.

Intensive Care Unit, Christchurch Hospital, Spinal Unit, Burwood Hospital and WellFood

I wish to compliment Canterbury DHB on the service I received from the Spinal Unit. I was seriously injured following a mountain bike accident. I was airlifted to Christchurch Hospital's ICU where I spent 10 days. The care I received in ICU was excellent. The staff did their utmost to make me safe and comfortable and treated my family with great respect and compassion, going beyond their formal roles to help them through this distressing time. Within a few days of my arrival at the ICU both the Spinal Unit's senior consultants had made separate visits to see me and discuss my condition with my family. I also had visits from the unit psychologist and a social worker. At least some of these visits were made after hours and I think in their own time.

This pattern of extra effort from the staff was evident throughout my subsequent six-month stay at the Spinal Unit. Everything possible was done to ensure an impossibly

good outcome for the patient, and to make their transition through this complex and difficult time as positive as possible. The staff kept the morale in the Spinal Unit very high through the COVID-19 lockdown which otherwise could have been very difficult. While I can't speak highly enough of the staff performance, there are many features of the Spinal Unit which also contribute to the outstanding experience I had.

The Spinal Unit is exceptionally well led and attracts very high quality, dedicated staff who enjoy being there, and want to be there, right from the consultants to the meal staff. It is on the campus of a very well-equipped and very attractive hospital. The Spinal Unit is modern, well-equipped, well-designed, and kept clean and tidy. In keeping with its good design, the unit has an impressive array of services on site. The Spinal Unit's eight accommodation units allow family and support people to make extended stays during the long periods of hospitalisation. This was very important to me as my children live in Nelson and my wife in Warkworth. We used our stays in the onsite accommodation to ensure we could cope at home on our own.

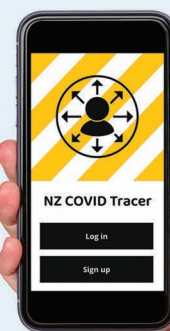
The food at this hospital is very good. I understand the hospital prepares its own food which allows them to maintain a good quality cafe, and provide initiatives such as custom-made omelette lunches, which become very important morale boosters during long hospital stays. The WellFood staff are justifiably proud of their efforts which is great. Everybody in the Spinal Unit maintains, probably unreasonably, high expectations for the patient's progress. I suspect this is part of the reason they get such remarkably good results. I would like to thank Canterbury DHB for providing me with the opportunity to start my rehabilitation in such an exceptional unit. I wish you every success with maintaining and enhancing it even further.

Scan. Scan. Scan.

Everywhere you go, everywhere you can.

All staff should scan in daily using the
COVID-19 Tracer App.

Unite
against
COVID-19





iSupport for ISG – meeting a growing demand

At the beginning of June 2020, iSupport was introduced as a new way to log information technology requests with Information Services (ISG).

Service Desk Team Leader Brent Pizzato says the iSupport portal was the first enterprise portal for Canterbury and West Coast DHBs, incorporating ISG and Oracle Support into one easy to use self-service portal.

“The portal allows the customers of both DHBs to log service requests directly and keep track of the status of their request, with the ability to access relevant self-help and knowledge articles at any time.”

Around the same time, ISG also started piloting Robotic Process Automation to process repetitive tasks that require

a high level of accuracy, such as setting up accounts or processing terminations of access.

Nearly one year on, where are we at and what lessons have we learned?

iSupport is fully operational and the demand is still growing

More than 120,000 tickets have been logged since iSupport went live, with an average of around 11,000 tickets being resolved each month. This represents an increase of more than 2000 tickets resolved each month from the previous year.

Brent says, “Managing the growing demand while ensuring a positive experience for the customers is driving ISG’s



ISG Service Desk Senior Technician Harpreet Viridi and Improvement Specialist Lillian Jackson checking the iSupport dashboards

focus on providing further self-service opportunities. New services, forms and workflows are continuously developed to accelerate request resolutions."

Specific services and forms are a quick way for customers to log their requests and ensure that the information required for a quick resolution is complete and accurate.

There are currently 23 services available, including:

- › Report an issue
- › Clinical document returns
- › Zoom video conferencing
- › Reporting issues with mobile devices.

Robotic Process Automation is progressing

Robotic Process Automation requires consistent information, so services can also be linked to Robotic Process Automation to generate tickets that are automatically resolved without human intervention.

For example, while the current benchmark for the tickets manually resolved is one working day, Robotic Process Automation is resolving them within 15 minutes on average.

More than 4,000 tickets have been processed by Robotic Process Automation since the start of November 2020.

Monitoring and reporting

One of the benefits in using iSupport is the ability to create and access dashboards for viewing and monitoring iSupport data.

From the historical and real-time statistics provided by the dashboards, ISG can now track critical metrics and trends, identify bottlenecks before they occur and make informed decisions.

What's next?

As technical capabilities in iSupport and RPA development keep increasing, there is a greater focus on reducing call volumes and automating common requests to deliver great service experiences.

ISG's next step is to work more strategically, better streamline and prioritise development to ensure the best value.

Accessing iSupport

iSupport can be accessed through PRISM on the iSupport ISG Service Desk tile under My Work Tools, or directly at <https://pldc.service-now.com/isupport>.

all
right?

IT'S
ALL RIGHT
TO TALK
IT OUT.



Conversations key to community pharmacy helping protect against measles

The team at Pharmacy Xtra in the centre of Christchurch city has been busy vaccinating people aged between 16 and 30 against measles and say that the noteworthy vaccination numbers are mostly due to being proactive.

The team says the key to the good response is to start the conversation.

"We know that people in this age range are less likely to have been immunised against measles when they were children, so we aim to talk about measles and MMR (measles, mumps, rubella) immunisation with people in this age group who come in to our pharmacy," says Pharmacy Xtra Pharmacist Terissa Rolls.

The team offers to check the person's immunisation history and, if the records show they haven't had two doses or it's unclear if they have, they let them know it's safe to get an extra dose of MMR. The customer is usually happy with the convenience of being able to get it done here 'on the spot', so to speak, and for free.

Community pharmacy and general practices across Canterbury are working to immunise 15–30-year-olds against measles as part of a national MMR catch-up campaign.

As of mid-March, 1966 people in the target age group have been vaccinated in Canterbury, with 166 given by pharmacy. Of those provided by pharmacy, more than half have been provided by Pharmacy Xtra.

As well as taking the time to have the conversation, the team says it helps that the pharmacy is in a handy central location, directly across from the Ara Institute of Canterbury campus, and near major shopping outlets.

Pharmacy Xtra is one of 66 participating pharmacies across Canterbury offering MMR to people aged 16 and over.

Unichem Cashel pharmacist Annabel Turley says the team there has had a good uptake of vaccinations thanks to their work to upskill all staff about measles and MMR facts, which encourages them to start a conversation about it. March has been their best month and they continue to promote it as much as possible.



Celebrating their success – the Pharmacy Xtra team (Terissa, Rick, Gaye and Adrienne) has provided more than half the MMR vaccinations provided by pharmacies to 16–30-year-olds in Canterbury

Unichem Medical Corner and Life Pharmacy Barrington are just some examples of other pharmacies seeing a good response from their promotion.

A list of all the MMR participating pharmacies is available on [this map](#) on Canterbury DHB's website.

Successful assessment of chest pain patients “the future of medicine”

An improved assessment process developed at Canterbury DHB is behind a drastic reduction in the number of patients admitted to Christchurch Hospital with unspecified chest pain.

The numbers now are what they were in the 1990s, despite a big increase in the population since then.

About 50,000 people turn up to hospitals in New Zealand each year concerned they are having a heart attack. About 15 per cent actually are. Admitting patients when it's not necessary is inconvenient for the patient and their family and uses health resources that could be used elsewhere.

Over the past decade incredible progress has been made in this area in the Emergency Department (ED) thanks to a collaboration between ED staff, the Cardiology department, the University of Otago Christchurch Heart Institute, General Medicine, Canterbury Health Laboratories, Decision Support, senior management and a host of others, says University of Otago Research Professor John Pickering.

“I like to call what's been achieved augmented Intelligence because the data and data analysis merely augment the combined intelligence of the clinical, administrative, and managerial staff. This is the future of medicine.”

The Accelerated Diagnostic Pathway (ADP) for chest pain patients tested and developed in Christchurch has been adopted by all New Zealand EDs, been put in place in all Queensland hospitals, and many other hospitals throughout the world, he says.

John presented his inaugural Professorial Lecture on 3 March on the topic.

“This was a once-in-a-lifetime opportunity and I used it to highlight the importance of a ‘whole-of-team’ effort to generate and analyse data with integrity and to use the insights to make incremental, but meaningful, change to clinical practice. My keystone example was the work to improve the assessment of patients presenting to the ED with possible Acute Coronary Syndrome,” John says.

More than 10 years ago Christchurch Hospital ED Specialist Martin Than wanted to do something about the huge

admission rate – 93 percent – for patients presenting with chest pain. Only 10 to 15 percent of these were ultimately diagnosed with a heart attack, most were discharged after the next day with a diagnosis of Unspecified Chest Pain.

“Martin assembled a team from within Canterbury DHB and internationally – in particular Canterbury DHB Cardiologists Sally Aldous and Richard Troughton, who continue to be integral to the process.”

It began with an observational study to establish baseline data. In a world first in this area, the first ADP (named ADAPT-ADP) was then developed and trialled. As a result, seven percent more patients were able to be safely discharged home from ED without safety concerns (about 400 people a year).

“This gave the patients early reassurance and reduced stress on the health system,” John says.

Then, a novel risk assessment tool (EDACS) was developed and the EDACS-ADP became ‘usual care’ after it identified more patients as low-risk (42 per cent) than the ADAPT-ADP.

The next step, adopted in 2018, identified very low risk patients who could be safely discharged home after only one troponin measurement if it was very low. High troponin concentrations indicate damage to heart muscle and possible heart attack.

This led to a 30-minute per patient reduction in ED length of stay and the single troponin heart attack rule-out process also became ‘usual care’.

“With the imminent influx of COVID-19 patients expected early last year, because we had the data, the analysis tools, and the multidisciplinary team in place (by now expanded), we were able to rapidly introduce another modification whereby a second low-risk group were identified who could be discharged from ED after one troponin measurement.”

This group have a repeat troponin test the next day in the community. Patients were reassured earlier, length of ED stay was further reduced, and fewer patients with unspecified chest pain admitted overnight. The EDACS-COVID ADP is now the standard of care in ED, John says.

Growing our Māori and Pasifika workforce

This year there has been a significant increase in the number of new graduate Māori and Pasifika nurses successfully applying to the Canterbury Health System's Nursing Entrance to Practice (NETP) programme.

NETP supports nursing graduates as they begin their careers in clinical practice.

The NETP intake starting 21 February had a deliberate focus on recruiting Māori and Pasifika nurse graduates into the Canterbury Health System, says Executive Director of Nursing Becky Hickmott.

"The Directors of Nursing and our NETP team guaranteed an interview for all Māori and Pasifika nurse graduates who applied. As a result, 13 Māori and five Pasifika nurses started working with us last month – the highest number we've had in any single NETP intake."

Nurses have been employed into Mental Health and Addictions, Urology, Intensive Care, Managed Isolation and Quarantine facilities, District Nursing, Operating Theatre, Medical and Surgical, Aged Residential Care, and General Practice in a rural community.

It became apparent some time ago that there were a number of Māori and Pasifika nurses who were not being successful in getting recruited, Becky says.

"We looked at the data to see what our equity balance is and what the numbers coming through were going to look like. Without any judgement, the numbers who had applied and not been successful were shared with the directors of nursing and charge nurse managers."

Work was carried out with People and Capability and training sessions held on perceived and unintentional bias. How new graduate Māori and Pasifika were being recruited was carefully examined.

"We have managed to turn this equity issue around and will work at continuing to drive the message home. Equity is now much more front of mind for everyone, I'm very excited about it," she says.

Looking after our Māori and Pasifika populations is a priority for Canterbury DHB and Māori and Pasifika nurses contribute a unique understanding of the Māori and Pasifika whānau healthcare journey and are excellent at helping whānau navigate health system challenges.



From left, NETP nurses Adi Sher and Kiri Manihera at their graduation last week

"We appreciate the support, guidance and understanding they provide, and I hope we continue to be open-minded and challenged about, not just recruitment, but the ways we are currently working. We need to be thinking about the services we are delivering and our models of care because we know that health outcomes for Māori and Pasifika in many areas are inequitable," Becky says.

Executive Director Māori and Pacific Health Hector Matthews says he is delighted to see the efforts over many years by nursing leaders in the Canterbury Health System lead to significant and tangible increases in the number of new Māori and Pasifika nurses recruited in this year's NETP intake.

"Well done all. Ko te pae tawhiti, whāia kia tata. Ko te pae tata, whakamaia kia tina – seek out the distant horizons, while cherishing those achievements at hand."

Nurse Coordinator Projects, Nursing Workforce Development Team Jo Greenlees-Rae says the cultural support available for Māori and Pasifika nurses in education programmes such as NETP, the Enrolled Nurse Support into Practice Programme and post-graduate funding is important.

"We value our Māori and Pasifika colleagues who are instrumental in providing cultural supervision and cultural mentorship, all supported by Hector, Executive Assistant Jenna Manahi, and others from Canterbury DHB, and our community and primary care partner organisations."

High participant numbers in Canterbury's National Bowel Screening Programme

The National Bowel Screening Programme (NBSP) team has been kept very busy since the rollout of the long-awaited programme in Canterbury at the end of November last year.

The programme is for people aged 60 to 74 years and involves participants taking and sending a simple faecal sample, which is tested for blood. If no blood is detected in the sample, the participant receives a letter advising them of a normal result. They will be recalled in two years' time to repeat the process. If blood is detected in the sample, the participant will be notified by their general practitioner and referred to the NBSP team for a colonoscopy.

Canterbury is fortunate to have a very engaged and health literate population, resulting in high participant numbers, which has kept the NBSP team very busy since the programme's roll out, says Nurse Co-ordinator Nikki Baird.

Approximately 16,700 participant invitations have been sent out to Cantabrians and 368 participants have returned positive tests. Some of these patients have not needed further investigation, however, for those that have, 150 colonoscopies have already been completed. There are another 112 participants booked to have their colonoscopy over the next four weeks.

"In the first four months of the programme 16 participants have been diagnosed with bowel cancer. Sadly, there are often no symptoms or warning signs of bowel cancer until the disease is well advanced."



Canterbury National Bowel Screening Programme team, from left, Speciality Clinical Nurse Megan Ensor, Nurse Co-ordinator Nikki Baird, Clinical Lead – Consultant Gastroenterologist Teresa Chalmers-Watson, Endoscopist Consultant Gastroenterologist Michael Burt and Specialty Clinical Nurse Nichola Olds-Read

"By finding these cancers early, before symptoms develop, we increase the chance of successful treatment. Of the numerous participants seen, many have had polyps removed, which if left undetected can develop into cancer over a number of years."

By identifying cancers early and removing polyps, the NBSP will, in time, reduce both the incidence of bowel cancer and the mortality associated with it, Nikki says.

The NBSP team's hours are Monday to Friday 7.30am to 4.00pm. They can be contacted on DDI phone line (03) 364 1571 and two mobile numbers, 021 194 8142 and 021 903 317. Further information about the NBSP is available on the Ministry of Health's [Time to Screen website](#).

Quiz night raises money for child and youth mental health project

Koha Fitness and Health Club recently held a successful quiz night, raising \$1,285 for Māia Health Foundation's child and youth mental health project.

Tarina and the team at Koha are dedicated to helping people stay fit and well and are ideally situated at 48 Hereford Street, close to the health precinct.

They're proud to support the health and wellbeing of Canterbury District Health Board staff through Something For You, with a \$33 weekly membership deal. Find out more on the [Something For You site](#) on Prism.



From left, Zoe, Alyssa and Tarina from Koha Fitness and Health Club, with Anna and Michael from Māia Health Foundation

“Outstanding contribution” of nuclear medicine technologist

Staff at Christchurch Hospital's Nuclear Medicine department are wishing Nuclear Medicine Technologist Barb Ovenden a fond farewell as she retires this week after 49 years of dedicated service.

Barb is an amazing friend and colleague, whose knowledge, wealth of experience and dedication will be missed more than she will know, says Team Leader Nuclear Medicine Lynda Murray.

“Her passion for Nuclear Medicine, along with her natural leadership, determination, professionalism and organisational skills came to the fore in several tenures as charge technologist of the department.”

Barb has been integral to the development, training and mentoring of nuclear medicine students and technologists throughout the years. This includes being a member and

examiner of the New Zealand training board, through to her role of Clinical Assessor for the current University of Auckland Nuclear Medicine course, she says.

Barb started as a trainee Nuclear Medicine Technologist at Christchurch Hospital's Nuclear Medicine department in December 1971. She gained qualifications in radioisotope and radioassay techniques from the New Zealand Institute of Medical Laboratory Technology and a Diploma of Medical Nucleography via correspondence from the Royal Melbourne Institute of Technology.

“Throughout Barb's time in Nuclear Medicine at Christchurch Hospital, she has seen the service evolve from working with New Zealand's first gamma camera, then Australasia's first gamma camera computer system, right through to the SPECT/CT hybrid systems of today.



“At every stage, Barb has embraced mastering the technology and systems required and her interest and intellect have contributed immeasurably to creating the excellent department we have here today.”

All her Nuclear Medicine colleagues thank Barb for her outstanding contribution and support throughout the years and wish her all the best for her well-earned retirement, Lynda says.

One minute with...

Angela Deken, Coordinator, Universal Newborn Hearing Screening and Early Intervention Programme



Angela with a wombat at a rescue centre in Tasmania, Australia

What does your job involve?

Coordinating the programme for Canterbury DHB, including rosters and budget management. We screen up to 6500 babies a year. There are 14 in our amazing team and we cover from Kaikōura to Ashburton.

Why did you choose to work in this field?

As a midwife I wanted to progress my career and gain some management experience, and this was perfect as I was working alongside midwife colleagues and had an excellent understanding of the maternity system. It helped a lot while it was being set up that people knew me. I was able to advocate for the programme as an excellent public health initiative and introduce the screeners to the maternity system. As a midwife, I use a lot of my clinical knowledge in this role and the job of manager is awesome. I get to screen every now and then so I'm working with families and babies which is my happy place.

What do you like about it?

Knowing how much impact our programme has in the outcomes for babies and their families for the rest of their lives. The programme provides opportunities for parents to choose different intervention methods, from sign language and hearing aids, to cochlear implants, for their babies. Accessing these things early mean that babies can develop normally. We work in a large collaborative environment. This includes professionals in audiology cochlear implant surgeons, advisors on deaf children, the Van Asch Deaf Education Centre and consumers. We have identified over 180 babies with moderate to profound hearing loss so far. I love being part of the programme.

What are the challenging bits?

The budget and getting the IT requirements sorted!

Who inspires you and why?

My mum, aged 90, who is the most amazing loving person who accepts everyone and is still involved in all her family, which now equates to close to 40 members.

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?

As a manager it is my role to support my team as much as possible so that they can excel in their role. Working with new families is such a privilege at such a sensitive time. We need to be the best we can be every day at work.

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

I went to India on a youth group called YETI at the age of 16 for three months. That was life-changing and made me so grateful for all that we have in New Zealand. It opened my eyes up so much to other cultures and ways of living. Another thing is that I love animals and have been involved in fundraising for the care of Australian wildlife injured in bushfires.

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

Port Douglas on the Great Barrier reef snorkelling with my buddies.

What do you do on a typical Sunday?

Go for a beach walk and just hang out with my partner and family. If they are lucky, make a nice dinner (I hate cooking!).

What's your favourite food?

Mangoes from Australia.

And your favourite music?

I have a wide eclectic taste as my dad was a big stereo guy. We had surround sound before anyone else. Deken discos each Sunday to practice our moves, so we all love dancing as well.

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



Something For You

Something For You is the Canterbury DHB employee benefits programme. The deals offered are from the Canterbury business community to say thank you for all that you do.

If you are based at another Canterbury DHB campus and are interested in a demo day, please get in touch with the Something For You team by emailing somethingforyou@cdhb.health.nz.


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RICHARD STRATFORD | 027 512 7620 | RICHARD.STRAFORD@EVOCYCLES.CO.NZ

Child Well-being Research Symposium



The University of Canterbury Child Well-being Research Institute is excited to present the 2021 Child Well-being Research Symposium.

This symposium brings together world-renowned researchers across education, children's language development, psychology, Pasifika, nutrition, quality sleep, pre-term baby support, public health, and speech-language therapy to highlight the exciting interdisciplinary developments in facilitating young children's success and well-being.

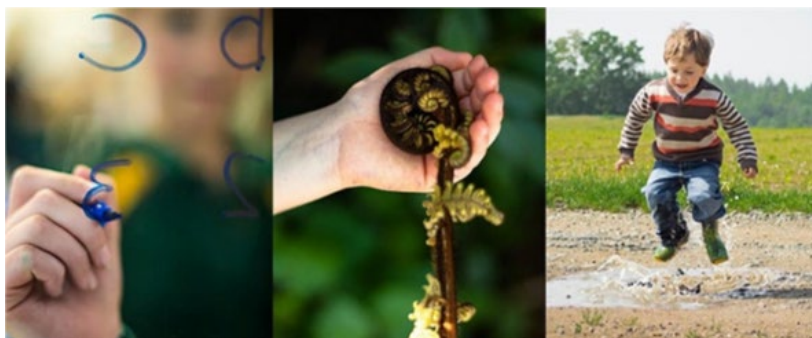
Date: Thursday 8 – Friday 9 April 2021

Time: 8.30 am to 3 pm

Location: Central Lecture Theatres, University of Canterbury, Ilam Campus

To register, please visit the [EventBrite website](#).

To view the Child Well-Being Research Symposium programme, visit the [University of Canterbury website](#).



Note: If you wish to attend this event, but the cost or teacher release is an issue, please get in touch with the organising committee, who may be able to support you.

For more information, visit the [University of Canterbury website here](#).

MAKE THE SWITCH

IN 2019 OVER 350,000 WASTE ITEMS FROM BEVERAGES ALONE WERE SOLD THROUGH CANTERBURY DHB CAFES

131 K
PLASTIC DRINK BOTTLES



213 K
TAKE AWAY CUPS



2/3 of all hot beverages sold

WHAT YOU CAN DO:

Use your own water bottle



Use your own reusable coffee cup



CURRENTLY TAKE AWAY CUPS CANNOT BE RECYCLED OR COMMERCIALY COMPOSTED LOCALLY. ALL WENT TO LANDFILL – OVER 3000 KGS OF WASTE.

SWITCHING TO REUSABLE CUPS WOULD SAVE 88 TREES WORTH OF CARBON

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