# CEO UPDATE,





# **Our financial** position

Recently the Minister of Health announced that the government would be providing \$16 million to Canterbury DHB. It's a huge relief to have this funding as it will almost cover our planned deficit of \$17.8 million.

Canterbury DHB's actual deficit last year (1 July 2014 - 30 June 2015) was \$5.3 million over its planned deficit of \$12.5m. This result was forecast early in the financial year and equates to a variance as a proportion of revenue of 0.38%

Since the \$16 million announcement I have had a number of comments and questions asking where we will be spending our 'windfall'. I want to be clear that this funding supports services that had previously been planned and were incorporated in the deficit - it is all accounted for.

It does however enable us to continue our journey of transformation. We will continue to provide the care our communities need, and we will continue to invest in staff, new technology, new facilities as well as continuing with our ongoing quake repairs.

In response to the announcement, Canterbury DHB Board chair Murray Cleverley stated that our focus remains firmly on making it better for patients.

Our underlying financial performance is strong. The cost of our facilities redevelopments at Burwood and the new Acute Services Building in Christchurch along with the additional

\$380m of earthquake related facility impacts come with additional capital charges (the equivalent of interest on your home mortgage). The impacts of this additional capital spend as a result of the earthquakes creates some unique challenges for this DHB which is different from every other DHB in the country. This is part of ongoing processes working with the Ministry of Health to ensure everyone has clarity on costs and how they are treated (in accounting terms) so we can move ahead with clear expectations and look forward to a solid future.

The key recommendation to emerge from the recent financial review carried out by PriceWaterhouseCoopers for the Ministry of Health is that we review and update the financial information and assumptions in the original facilities Detailed Business Case which was completed in 2012.

You can read the Minister's statement here.

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Longhurst Health was officially opened on Thursday last week by the Rt Hon. Prime Minister John Key.



Dr Philip Jacobs and Dr Sandra Hicks from Halswellhealth at Longhurst Health show Prime Minister John Key and Hon. Selwyn MP Amy Adams through a clinical area at the new integrated family health centre.

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# **Hospital Health Pathways – live** from Wednesday 25 November



I've talked before about our Community Health Pathways which are now used by most general practice teams throughout New Zealand and an increasing number in Australia.

The younger sibling of our Community Health Pathways makes its appearance next week, in the form of Hospital Health Pathways - or HHP as it's frequently referred to.

Accessed from the intranet, HHP will eventually replace The Blue Book, which provides clinical and process guidance for patient management in Canterbury DHB hospitals.

Good things take time, and we have learnt through our experience with Community Health Pathways that it's often the process of developing each pathway which gives it real currency and value for those who come to rely on the pathways for clinical guidance.

With this in mind we are taking a measured approach to the development of Hospital Health Pathways. We have no intention of throwing the baby out with the bathwater. In fact, for the first few months, most of HHP will be made up of content taken straight from the Blue Book. Over the next 12 months however, that balance will change. We will be progressively working through all of the content and it will be reviewed and refreshed or totally re-written if that's what is needed.

After a 12 month transition period, by 1 December 2016 our goal is for all of the content to be updated and we will be switching over solely to using Hospital Health Pathways.

I would like to acknowledge the work of the Blue Book Committee, particularly Chair, John Thwaites.

New pathways are being developed by relevant groups of clinicians and these groups will change depending on the pathway. In addition there is a team of clinical editors who oversee each pathway.

More information on Hospital Health Pathways, including who's involved, can be found <u>here.</u>

Have a great week,

**David Meates** 

Sheet

David Meates CEO Canterbury District Health Board

# **Canterbury Grand Round**

Friday, 20 November 2015 - 12.15- to 1.15pm, with lunch from 11.45am.

Venue: Rolleston Lecture Theatre

Speaker 1: James Young, Sustainability

#### **Wanted: Everyday Canterbury DHB heroes**

Improving environmentally sustainable behaviours in the workplace is the goal of the new Canterbury Zero Heroes campaign. By taking heroically small steps every day we can cut our unnecessary environmental impact to zero. You don't need superpowers to be heroically sustainable

Speaker 2: Jane Goodwin, Advanced Care Planning

#### **Advance Care Planning - An Update**

Advance Care Planning (ACP) is a process that encourages people to think about, talk about and plan their wishes for future health care and their final days of life. In 2013 the Canterbury District Health Board (CDHB) commenced a programme to establish ACP across the region. This session is an opportunity to hear what progress has been made to date and to consider

how hospital based clinicians can initiate and facilitate ACP in the acute environment and how they can best support their colleagues in primary care.

Chair: Matthew Reid

Video Conference set up in:

- · Burwood Meeting Room
- Meeting Room, Level 1 PMH
- · Wakanui Room, Ashburton
- · Administration Building, Hillmorton

All staff and students welcome

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

Next Clinical Meeting – Friday, 27 November 2015

(Rolleston Lecture Theatre)

Convenor: Dr RL Spearing.

ruth.spearing@cdhb.health.nz

## **Facilities Fast Facts**

#### **Burwood**

Two years ago, in November 2013, we had just held a blessing ceremony for the Burwood site ahead of the turning of the first dirt. In November 2015, with the major construction work nearing completion, we are planning internal fit-outs and beginning our migration planning work. The photos show the view from the Theatre block, now looking towards the new wards and, in the background, the new Outpatients facility.





#### Christchurch

Two years ago, in November 2013, preliminary plans for the Acute Services building were being signed off, but major site works did not begin until October 2014.

For a good indication of progress since then, see this video of the final foundation concrete pour, which took place on 7 November 2015.

Outpatients facility information: Round three of the Preliminary Design meetings for the Outpatients facility at Christchurch Hospital will occur next week. The design team is aiming to achieve sign off with the users. This is a fast design

process which is generating a lot of meetings, information gathering and team discussions for the user group members.

By the end of Preliminary Design, the room locations and adjacencies will be locked in. The Developed Design phase will begin in the New Year. The focus of this will be agreeing the contents of each room. As with the Acute Services building, users are being consulted to agree standard layouts for rooms that occur across the building e.g. consult rooms, procedure rooms, beverage bays etc.

# **Changes to the Park & Ride service**

A reminder that the Canterbury DHB's Park & Ride car park is moving from the Metro/Brewery site. It will relocate to Deans Avenue, on land formerly occupied by the Sale Yards, from 1 December 2015. Please note that the shuttle buses are not for staff – they are for patients and visitors to hospital.

More information, including FAQs, is available on the <u>intranet</u>, and on the Canterbury DHB <u>website</u>.





# **Bouquets**

# From the daughter of a patient of Psychiatric Services for the Elderly & Outpatients, TPMH

Thanks again for the superb support you're giving her, enabling her to stay at home (despite advice!!) and retain more stability than she would otherwise have. I just cannot imagine how she (or we) would cope without your help, and each time I read in the paper about the strains on the mental health system in Canterbury and the funding challenges for our DHB, I feel the need to write a letter to somebody expressing my gratitude for the awesome work you and your colleagues are doing at the coalface.

#### **Ward 1A TPMH**

To the wonderful staff of Ward 1A who care for our wonderful wife, mother, Taua (Grandmother) and Great Taua. Thank you so much, it meant the World to us that you all loved her so much.

#### **Convalescent - Rangiora**

I felt blessed to have the chance to recuperate in homely, warm surroundings, where I have felt safe and cared for, and well fed. The staff have been brilliant and all I can say is a HUGE thank you to everyone.

# Gynaecology Ward, Christchurch Women's Hospital

Fantastic care, really made me and my husband feel really looked after. Thanks to everyone for all their wonderful help!

Great treatment from everyone concerned. Good choice of food.

I would like to thank you for all the efficient care that Christchurch Hospital has given to me. I am truly

grateful. Thank you again.

I have had superb treatment both in the operating theatre and on the ward. Two nurses in particular were very special.

Great team. Felt comfortable the whole stay. Thank you everyone.

## Maternity Ward, Christchurch Women's Hospital

I'd like to compliment all the nurses on all shifts and the doctor that helped my daughter. Please look after these people and I hope that other people treat them with respect. Thank you for everything from the bottom of my heart. Bless you all. Never met so many humble people ever.

Fantastic people – a very positive experience with all your staff, really having a focus on the important stuff and being invested in ensuring things went well. Thank you so much.

Lovely midwives, all so helpful and friendly.

I have been at the ward two nights and two days. This is my second baby. In this time we have had an array of excellent, efficient, caring midwives (i.e. Emma, Kylie, Celia, Gay, to name a few).

My thoughts as a first time dad! Thank you to all the paediatric staff and specialist doctors. You were kind, caring and a really big help! Couldn't ask for more or better.

This is a great hospital. The doctors, staff, etc. are very friendly and approachable.

Neonatal Intensive Care (NICU), Christchurch Women's Hospital We would like to acknowledge the care we have received from Maree at the NICU. She is very attentive and even though there were five babies in the room, it felt like we were the only ones in the room. She never sat down which is good to see. Makes you happy to leave knowing your baby is in good care. We love you Maree and wish everyone was like you!! Keep up your good work.

Wonderful staff, very friendly! Beautiful babies, you guys are doing a wonderful job. Keep it up!

Highly accomplished team, fantastic care to our family for which we will be eternally grateful. No complaints from us only compliments. Thank you all again.

#### Ward 22, Christchurch Hospital

Thank you to all staff including ambulance for the amazing care you gave my five year old son. You're all angels.

## Activity Room and Ward 22, Christchurch Hospital

We would just like to thank you for your care and support while we were here. The staff were all very kind and helpful. I would especially like to thank Diane from play therapy for her help with getting our son to take his meds. Her approach was amazing and made our wee one comfortable. :-) From a mother trained as a new entrants teacher and mum of three small children I have to say she is a fantastic asset and I wish I had more

# time with her. **Gynaecology**

Just wanted to express and thank all the staff for the fantastic work they do. Special thank you to Megs, Maria and Sarah who are absolutely fantastic and made a not so nice situation into a comfortable and comforting situation. Megs has a great personality! Maria was like my hospital mum and Sarah was very accommodating and had a real nice way about her. Thanks guys.

## **Emergency Department, Christchurch Hospital**

I would like to thank my nurse who I believe was named Sarah Bothamley (or something like this). She was everything you could ask for in a nurse - incredibly calming and reassuring. Sarah was empathetic and professional. She made what was a scary and painful moment the best it could be. Sarah was constantly returning to assess level of pain etc and interacted well with myself and my family who were with me. We all commented on how awesome she was. Thank you Sarah!

#### **Birthing Unit - Burwood**

Lovely service, very helpful staff. Welcoming and informative. Thank you for everything.

I delivered my second baby at Burwood and was blown away by how professional, calm and patient the staff here are. The facilities have been immaculate which I'm sure is no small task but the staff make it seem that way. The moment I had difficulty or pain there was immediately a staff member at hand helping us. I would recommend to all and everyone to birth at Burwood - the staff are a real asset and such a high level of cleanliness and comfort.

Thank you to all the staff, students, housekeepers, cleaners and especially our midwife, Coral Moir, and Jan whom helped us through this journey to birth a wonderful healthy baby boy. The staff helped our recovery to be wonderful set and managed well in a warm, peaceful, friendly environment. Thank

you Burwood Hospital and CPIT Students.

#### **Birthing Unit - Lincoln**

Fantastic service and care given. We were made very comfortable and the room was nice and warm. Staff were brilliant and the meals are superb. Thanks again and we will always give positive feedback if anyone asks how our experience was at Lincoln Hospital.

Love the new layout of rooms. Awesome helpful midwives.

Fantastic help for my little one. :-)

#### CHOC

I had a very nice stay. Can't wait to go home to my mummy. All of the nurses are very nice. Thank you all.

#### CAAU

Nurses lovely and helpful.

#### Rangiora - Convalescent

I have nothing but praise for the treatment received in my two weeks at this hospital. The staff so helpful, always obliging and so cheerful. The meals very enjoyable and varied.

#### Ward 21

Brilliant!

I would like to thank Ward 21 (in particular Sasha and Catriona), the ENT theatre team and the recovery nurses for making our daughter's day and overnight stay in hospital so easy. The Ward 21 personal toy bag on arrival was a massive hit, as were the friendly faces and yummy food. Our daughter says she likes hospital.

# **Eye Clinic and Day Surgery Unit, Christchurch Hospital**

I wish to express my sincere thanks and appreciation to Doctors Simpson and Chow and all the nursing staff at both the Christchurch Hospital Eye Clinic and the Day Surgery Unit. The expertise and professionalism shown me is outstanding.

Their very prompt and competent attention to the glaucoma and

operation to my right eye has been exceptional and I just want to place on record how very grateful I am to have my vision protected for the future

Please be kind enough to pass on my sincere gratitude to all involved.

#### **Security, Hillmorton Hospital**

Just a note to say my thanks to staff at Hillmorton on Saturday evening (Kevin security staff). After I was assaulted by a male client, my colleagues and I had dealt with the situation and as I was completing the various paper work Kevin came back to the ward before heading off home at the completion of his shift to check if I was ok. This simple caring query reinforced the importance of "empathy of team members and not losing sight of the effect a physical threat takes on us."

His kindness was refreshing and ensured the ongoing stress of the event was minimal.

Some times in our busy professional lives we do not take time to care for each other as well as we may but it is important to remember that a small gesture has a major impact. Kathryn Brankin, Registered Nurse, Te Awakura, Hillmorton Hospital, CDHB

#### Sue Burgess, Resource Information Co-ordinator, Community and Public Health

Sue coordinates the distribution of health information pamphlets. Recently I was talking to a group of women at a community course and needed some pamphlets to take with me. Sue was incredibly helpful and was able to supply the information in a very short time. She was very professional, cheerful and a pleasure to deal with. A big thanks to Sue!



# **Antibiotic Awareness Week 2015**

This week, from 16 to 22 November, Canterbury DHB is participating in Antibiotic Awareness Week 2015. The week is observed around the world and highlights one method of minimising the growing problem of antibiotic resistance – handling antibiotics with care.

Antibiotic resistance is particularly topical after recent communications around three local colonisations (not infections) of CRE (Carbapenem-Resistant Enterobacteriaceae). These communications were designed to heighten awareness of this issue, and to help us focus on the importance of thorough hand hygiene and environmental cleanliness.

We took the perhaps unusual step of engaging with media, in part to ensure misinformation and speculation didn't detract from our clear messages to the public, which were: Wash your hands, take antibiotics only when prescribed (and finish the course), and don't push for antibiotics 'just in case' or for things they cannot help like viral infections.

In the past Canterbury DHB has had similar scares over VRE (Vancomycin Resistant Enterococci) and Extended Spectrum Beta-Lactamase (ESBL) producing organisms. Methicillin resistant Staphylcoccus aureus (MRSA), commonly known as the hospital "superbug", has become such an all-pervasive threat that we have been testing all new clinical staff for more than a decade.

Infections with these resistant organisms often fail to respond to standard treatment resulting in a more prolonged illness, increased mortality and higher healthcare costs.

Antibiotic resistance represents one of the greatest threats to human health today, and inappropriate and over use of antibiotics is a major driver for antibiotic resistance. As antibiotic resistance is increasing, the development of new antibiotics is declining. Few new antibiotics have been developed in recent years, meaning many of the medical advances that rely on antibiotics to control infection (such as organ transplantation, surgery and neonatal care) are also under threat

If we don't take the appropriate action now, we face a nightmarish future where common infections become untreatable and potentially fatal.

"Antimicrobial resistance is not a future threat looming on the horizon. It is here, right now, and the consequences are devastating."

- Dr Margaret Chan, Director-General of WHO

2015 marks the first World Antibiotic Awareness Week, which is being endorsed by the World Health Organization. The theme for the week is 'Antibiotics. Handle with care' – look out

for the colourful posters and screensaver from this week on.

The Canterbury DHB Antimicrobial Stewardship Committee wants to draw your attention to readily available resources that help guide antibiotic prescribing decisions. These include the Pink Book Antimicrobial Guidelines, which are available electronically on computer and mobile devices (refer to the Pink Book "welcome" page on the intranet for further information). We are also fortunate in having a number of specialists in Infectious Diseases, Microbiology and Pharmacology who can provide advice to help ensure that the right antibiotic is selected and given at the **right dose**, by the **right route**, and for the **right duration**.

You can find more information and links to videos covering the three key topics of hand hygiene, hospital acquired infections, and surgical site infections <a href="here">here</a>.

Please take some time to discuss prescribing and use of antibiotics in your team or department, and consider the ways you can further your knowledge and that of others, and help raise awareness during Antibiotic Awareness Week.

"The true cost of antimicrobial resistance would be \$100 trillion US and 300 million premature deaths if no action is taken between now and 2050."

- Jim O'Neill, Goldman Sachs.



# **Get Tough Clean Your Stuff**

The bright poster below came from a Children's Rehabilitation Hospital in Toronto, Canada.

It was developed for a campaign to enhance patient safety by decreasing the chances for transmitting pathogens through equipment use.

The Canterbury DHB Infection Prevention & Control Service loved the concept and obtained permission from the Holland Bloorview Hospital to put the Canterbury DHB logo on it. Infection Prevention & Control used the theme Think Global Act Local during the recent International IPC week. This was one initiative that encouraged staff to improve the cleaning of patient monitoring equipment and therefore decrease the risk of cross

infection.

Samantha Watts, IPC link representative for the Gynaecology Ward, CWH took up the challenge. She has encouraged staff to clean their equipment between patients by making it easier to achieve it in a busy ward. Using plastic



ties she attached the wire brackets to hold the detergent wipes onto the monitors. The posters were a bright reminder in areas the patient monitoring equipment sat in the corridors.

# Want to Get Tough and Clean Your Stuff?

The posters are on the intranet and the wire brackets are free from any of the Clinical Nurse Specialists in the Infection Prevention and Control team.



# Helping patients through transplant journey a "fantastic job"

Bone Marrow and Stem Cell Transplant Coordinator, Ali Trengrove, retired last Friday after 15 years in the role and a nursing career that goes back to the early 70s.

Ali trained as a Registered Nurse at Christchurch Hospital, starting in July 1972. She worked as a theatre nurse at Christchurch Hospital before leaving Christchurch for 20 years to look after children and farm in South Canterbury.

While in South Canterbury she continued nursing in various

fields, in Timaru Hospital in assessment, treatment and rehabilitation, as a theatre nurse in Bidwell hospital, and was a district nurse for the SCDHB in the Geraldine, Peel Forest, Temuka area, for 13 years. As a Hospital trained Registered Nurse Ali did a Bachelor of Nursing in 1998-99.

She started in her present role at Christchurch Hospital in June 2000 and in that time has been involved in organising and coordinating 678 adult and child patients with leukemia, lymphoma or myeloma and other diseases and preparing them for transplant.

"It's been a fantastic job, helping patients through their

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transplant journey. I have really appreciated the opportunity to work in this role."

The role had entailed long days "but I am lucky I was in a position to be able to do it", Ali says.

The team she has worked with are "absolutely fantastic".

"The nurses are brilliant and the haematologists are all very approachable and supportive."

Though not 65, Ali is retiring. She plans to do more fishing, diving and biking and hopes to occasionally courier for the Bone Marrow Transplant Registry and collect stem cells for transplant patients. There are 22 million people on the international bone marrow register and for some transplant patients the perfect DNA match could come from any of those around the world. As a live product it has to be collected and infused into the patient within 48 to 72 hours.

The Senior Nursing and Medical Teams across the campus would like to thank Ali for her time and dedication to the Transplant Service, our patients are very fortunate to have been managed by a team of staff with an obvious passion for their jobs. We wish Ali well for her future and she has left the service ensuring that the Bone Marrow Transplant Coordinator role has been handed over to the very capable hands of Jen Roberts and Sarah O'Brien.



# **Emergency Procedures Training Christchurch Hospital**

Venue : Padua Lecture Theatre, Lower Ground Floor Parkside East

No Bookings being taken - just turn up and sign the Registration Form

Enquiries to Paula Nicolson, Fire & Emergency Evacuation Advisor, Ext 80845



Monday 23 November	Tuesday 24 November	Wednesday 25 November	Thursday 26 November	Friday 27 November
1000 - 1045		1000 - 1100		1000 - 1045
1100 - 1145		1100 - 1145		1100 - 1145
1300 - 1345	1300 - 1345	1300 - 1345	1300 - 1345	
1400 - 1445	1400 - 1445	1400 - 1445	1400 -1445	
1500 - 1545	1500 - 1545	1500 - 1545	1500 - 1545	

# A link to the latest newsletter from Lippincott New Zealand

http://www.sialliance.health.nz/UserFiles/SouthIslandAlliance/File/PDFs/SIRTH/Newsletter%202%20-%20Lippincott%20New%20Zealand%20Instance.pdf



# Smile, you're on the Smile Couch

A new campaign called 'Start with a Smile" aims to get New Zealand-born Kiwis talking to the city's newest residents, many of whom have come to work here as part of the Canterbury rebuild.

The Canterbury Employers' Chamber of Commerce is leading the project, which aims to nudge Cantabrians towards more frequent and meaningful social exchanges with new migrants to our region.

"One of the hardest parts of settling into a new country," says Lana Hart, project manager for 'Start with a Smile', "is finding the social connections that you had in your home country.

"Our research for this project shows it is often a simple gesture, the desire to talk, or just a smile that can instantly make newcomers to Canterbury feel like they're at home."

One of the fun features of the project is a couch in the shape of a large smile that, together with two oversized balloons, looks like a smiley face.

Newcomers and New Zealand-born residents of Christchurch can share the seat, pick up a conversation starter card, and start talking. These interactions not only make Christchurch's new arrivals feel more welcome, but Cantabrians can learn about the countries they come from, the similarities and differences between cultures, and hopefully have a bit of a laugh. If you see a smiling couch, hop on and get talking!

Lana says that when the couch arrived at The Princess Margaret Hospital there were 'a bunch of seniors milling around bored'.

"As soon as the couch arrived at the café area several overseas born staff and older Kiwi-born people started taking notice. Within no time there were two ladies chatting, picking up the cards, and giggling. They said, 'We don't need cards to talk to strangers, we can start our own conversations.'

"So they did! Next thing we knew there were people sitting on it from different backgrounds having a yarn!"





Left: Rashi Singhania, Richard Dale, and an All Rightie get to know each other on the Smile Couch, which was at Christchurch Hospital on 6 November.

# One minute with... Nod Ghosh, Medical Laboratory Scientist, Canterbury Health Laboratories

#### What does your job involve?

I work in the Surface Markers Laboratory at Canterbury Health Laboratories (CHL). Contrary to popular belief we don't surf the internet and play games all day! (We have received Christmas cards in the past addressed to "surfers' markers".) Our role contributes to the diagnosis of haematological cancers such as lymphoma and leukaemia.

We use two analysers called flow cytometers. One is named "Florence" (otherwise known as a Beckman Coulter FC500). The other (a Beckman Coulter Navios) is so new we haven't given him a name yet.

We attach coloured dyes onto patients' cells (from their blood, bone marrow or tumours etc). The dyes are designed to stick to certain parts of the cell, and help us identify whether they are abnormal. Add laser lights from Florence, and a little bit of magic from our team (Andrea, Ang, Elaine, Michelle and me) and we produce reports that help our medical colleagues diagnose and monitor these diseases.

#### Why did you choose to work in this field?

I attended a lecture on Flow Cytometry in the UK in the 1980s by Dr Steve Richards, one of the experts in the field. I was mesmerised by his description of the smoke and mirrors inside a flow cytometer. I took every opportunity to find out more about "Flow" after that seminal moment. It took almost 20 years to secure my first post in a flow lab. That was at CHL in 2005. Prior to that I worked in general haematology and blood bank.

#### What do you like about it?

I like to think we are an important cog in the wheel, helping obtain rapid, accurate diagnoses for our patients.

On a personal level, I enjoy the challenge of problem solving. No two days are alike in the Flow lab. Sometimes we'll put out heads together to identify small abnormal populations of cells that are masked by other things. Other days, we might do detective work to problem solve at a pre-analytical level, or read papers about unusual disorders to ensure we haven't missed any additional testing.

We work in a culture of constant improvement. The whole team contributes to help decide how we can "do things better". Surface Markers is an area that is always developing, so we need to keep up to date reading scientific journals, attending conferences etc. The ongoing learning stops me getting bored.

#### What are the challenging bits?

Patients present with symptoms that need urgent investigation regardless of how busy we are. In a small department, fluctuations in workload have a major impact. Combine a day when you get four times as many samples as normal with



reduced staffing due to holidays or sickness, and it's chaos. It becomes critical to prioritise according to clinical need. We can't delay too long. Doctors are waiting for the results to make treatment decisions, and the integrity of the cells in samples is compromised after twenty-four hours.

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

I am impressed by the chain of people at all levels who work together to produce a quality result.

These include phlebotomists and our colleagues in laboratory "registration", who need to know about thousands of different tests, the correct sample(s) required and the optimum way to treat them.

At the other end of the chain, our medical colleagues have to keep abreast of developments in the field of haematology, and juggle a very heavy workload.

I admire the way people at all stages of the process liaise together to produce the best outcome for the patient.

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?

Hopefully what I've outlined above shows how the Surface Markers laboratory applies the DHB's values of care and respect for others, integrity in all we do and responsibility for outcomes.

I mentioned the culture of continual improvement. Other key factors include taking a proactive approach in trouble shooting, safety, and error management. We should work in a blame free environment, examining the processes, to see that they are robust, thereby helping to reduce the level of human error.

Professional development is of vital importance for any scientist within the organisation. We operate in an environment where communication is encouraged. We share experiential learning outcomes by discussing unusual cases and attending

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multi-disciplinary result review meetings.

Finally, morning coffee at "Medici" is a vital part of our team building experience. (There have also been parties including one where we dressed up as animals and played air-guitar, but the less said about that the better).

#### The last book I read was...

"Various Pets Alive and Dead" by Marina Lewycka.

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

Muri Beach Rarotonga, with my partner and kids.

#### My ultimate Sunday would involve...

Indulging in one of my hobbies. These include making jewellery using dichroic glass. This material is used in flow cytometers to split light of different wavelengths to separate different coloured

signals. It also happens to be very pretty.

Then there would be a glass of Pinot Gris!

One food I really dislike is...

Glace cherries. Yuk.

My favourite music is...

Sixties and seventies pop.

If you would like to take part in this column or would like to nominate someone please contact <a href="Maomi.Gilling@cdhb.health.nz">Naomi.Gilling@cdhb.health.nz</a>

# A feast of entertainment at Canterbury Neonatal Unit Trust Fund's Raceday Luncheon

10 years ago it was proposed by Dr Michael Kerr (the father of Angie Batt, a Neonatal Nurse within the Christchurch Unit), at a meeting of the Committee for Canterbury Racing, that the Canterbury Neonatal Unit Trust Fund be considered as the Charity of choice for the race day Luncheon held in The Showgate Lounge.

The Canterbury Neonatal Unit Trust Fund jumped at the opportunity. The first year we had 68 people attend but since that first year, the numbers have continued to grow. Our 10th year Raceday Luncheon was held last Saturday with 281 people attending.

Each year the event has been held at the Showgate Lounge at Riccarton Raceway and features a fashion show that is now coordinated by Angele Stone and an excellent luncheon.

Trust Chairman Paul McEwan says that this year the Trust wanted to acknowledge Dr Kerr's vision in offering us the event.

"Who would ever have thought that for the past 2-3 years we would have managed to sell out the event weeks before?"

"Over the years we have been very fortunate to have had the support of many sponsors to which the Trust is truly grateful. This has allowed the Trust to run a raffle and auction with all proceeds going to the Trust. The event is a lot of fun enjoyed by all. Long may it continue," says Paul.

The money raised supports the Neonatal Unit at Christchurch Women's Hospital and helps to buy additional items for the unit to help the parents of the sick and premature babies that the very dedicated and special staff look after. The profits from this years' event will enable the Trust to purchase 4 Rad-5 Signal Extraction Pulse Oximeters.

"To celebrate 10 years our dedicated nurses put on their own fashion parade, with all the garments being made up from

things from the Christchurch Neonatal Unit. The whole event was MC'd by Carole Spencer from the NICU. It was brilliant!"

See for yourself: Video 1 and Video 2

"Thank you to all who supported this event."









# Bishop commissions Christchurch Hospital's new Pastoral Chaplain

The Roman Catholic Bishop of Christchurch, Most Reverend Barry Jones commissioned Angela McCormick as 'Pastoral Chaplain' in the hospital Chapel on November 6.

Ted Te Hae, the Canterbury DHB Kaumatua, welcomed the Bishop and led a Mihi Mihi, to which the Bishop responded in te reo Maori.

Along with family and friends those attending included representatives from different groups within the hospital as well as former colleagues from the hospice.

Although in the role for a few months (after taking over from Sister Mary Hanrahan), in the rite of Commissioning, Angela committed to serving patients, their families and staff.





## Helping new mothers a career highlight

Helping new mothers become confident looking after their babies has been the highlight of Pam Truscott's 40 year-plus midwifery career.

"I am honoured to be part of a woman's birth journey and still feel humbled by that. But I have always particularly loved the post-natal part of midwifery, educating women, and their families, so they can go home confident in feeding and looking after their babies," she says.

Pam retires as Burwood Birthing Unit (BBU) Charge Midwife Manager on November 20th after seven years in the role. Prior to that she was a Core Midwife at BBU and Christchurch Women's Hospital (CWH). She has been employed with Canterbury DHB since 1974, with an eight month break following the birth of her son in February 1977, and four months maternity leave after the birth of her daughter in October 1979.

Pam had wanted to be a nurse for as long as she can remember. Her first job was as a Hospital Aide. She did her Registered Nurse training in Timaru in 1967 and worked as a staff nurse in Timaru on the Jean Todd maternity wing.

She moved to Christchurch, after getting married, and worked at the Essex Maternity Hospital in Essex Street, near Fitzgerald Ave

"It was right next to the Essex bread factory and we were a bit naughty, we used to go and buy the delicious freshly baked

bread from there."

Pam graduated as a Midwife, from Christchurch Women's Hospital, in 1971. She worked at Essex Maternity Hospital until it closed down in 1980 and then at CWH and Burwood Birthing Unit. Working at a primary care maternity unit was a "big learning curve" after coming from a secondary/tertiary hospital, she says.

The BBU team are an "amazing group of women who are very passionate about primary care birthing units", she says.

"I have been very well supported, in my current role, by the BBU, and Women's Health team. I would especially like to pay tribute to Suzanne Salton, Natalie King, Jane Waite and Sam Burke, from Women's Health. I am going to miss everyone immensely."

Acting Service Manager, Women's Health, CWH, Natalie King, says it's been an honour to work alongside Pam who is passionate about providing woman centred care.

"Her warm personality, dedication, guidance and leadership will be missed by us all.

Pam will stay on as a casual midwife until March next year. In retirement she will continue her "fitness kick" which includes going to the gym, swimming, aqua jogging, walking and working in her large garden.

# 'Wanted' campaign - a success

Thank you to everyone who handed back in unused security tags. The campaign netted more than 100 cards – that's equivalent to a saving of \$2000 and 100 more people who can have a security card issued.

We hope that you will continue to send these in when you find any that are 'spare'.

The morning tea winner for the four week campaign is Elaine Ryan, Switchboard manager at Christchurch Hospital. Elaine, a morning tea shout is coming your way.



# **Christmas Card orders**

Here's the printed Corporate Christmas Cards on offer this year – please place your order via <a href="mailto:communications@cdhb.health.nz">communications@cdhb.health.nz</a>.

An electronic card suitable for emailing is currently being created – check out next week's update and daily global emails for details about this.



## A plea from Safety 1st to all staff

Currently there are 269 Incident forms sitting in Safety 1st that have been started but not completed and submitted. No-one can see these forms except for the person who started to write the form or maybe was just practising on Safety 1st.

Would everyone please check their 'My Incomplete Files' widget in Safety 1st and complete and submit, or delete the form.

To do this follow this process.



Thank-you for your assistance.

- · Go to the CDHB Intranet.
- Then find 'Safety 1st Incident Management and Reporting' under 'Workday Essentials' on right of screen.
- · Open and click once on



 Enter 'CDHB' in Application Account, then your Username and Password.



Open the Info Centre icon on left of screen.



- Under the Widget 'My Incomplete Files' either complete and submit the form, or delete it.
- Submit and Delete are in the bottom right corner.



Delete





# **One For The Blokes Workshop**



#### Facilitated by Pete Roe & Trish Knight

Including personal accounts from 2 men who successfully manage their mental health

Two hour workshop designed to raise awareness of mental health issues facing men...

What are the key issues What signs to look out for What support is available

How can family/friends and colleagues provide support

Location	Date	Time
CHCH Campus	Thurs 19 November	1130-1330
Great Escape Lounge		

This workshop is restricted to 25 participants. Attendance is free of charge and registrations will be accepted on a first come, first served basis. <u>Click here</u> to register for a workshop.

For more information contact Andy Hearn andy.hearn@cdhb.health.nz or 027 218 4924

Supported by:





# NUTRITIOUS NIBBLES NOVEMBER

https://give.everydayhero.com/nz/nutritious-nibbles-november https://www.facebook.com/nibblesforhealth

Over 20,700 people have diabetes in Canterbury. It can be either Type 1 (approximately 11%), Type 2 (approximately 86%), or Gestational and another 20,000 have Pre Diabetes.

Blindness, stroke, heart attack, kidney disease, tooth and gum disease, foot ulcers and amputations are some of the complications of diabetes.

Our campaign focusses on healthy eating as this key factor can help prevent or delay the onset of type 2 diabetes and is an important part of the effective management of all types of diabetes.

This key factor along with education and understanding on diabetes can help in the fight against diabetes and the complications. For more information go to: www.barnabybee.com



**#NNN** 

Act today to change tomorrow

Eat only nutritious nibbles in the month of November

Help support people living with diabetes in Canterbury and the community

Get healthy for summer and support a great cause

Learn great ideas and recipes. Be in to win some great prizes

JOIN the team at everydayhero or like our Facebook Page, it is never too late to join in. Help us spread awareness, support, fund research and education programs.

# DIABETES CHRISTCHURCH INC SOCIETY

Ground Floor 550 Hagley Avenue Christchurch 8011

barnabybee.com

03 378 6266



For employees of the Māori health and disability workforce. Applications are being accepted for approval for study, at Level 2-7 on the National Qualifications Framework, for courses commencing in Semester 1. Study can be from any education provider who meets the HWNZ provider criteria.

Funds are available from the Hauora Māori Health Workforce New Zealand and are for:

Fees charged by the approved training provider

Travel subsidy if required to travel further than 50kms by road one-way

Māori support/cultural supervision

#### Who is eligible?

- ✓ Must be employed by the CDHB, or by a health and disability service that is funded by the CDHB
- ✓ Demonstrate a commitment to and/or competence in Māori health and/or disability studies
- ✓ Have whakapapa and/or cultural links with Te Ao Māori and Māori communities
- ✓ Be a New Zealand citizen or hold a New Zealand residency permit
- ✓ Have evidence of support by their current employer to meet the training requirements
- ✓ Meet the entry criteria required by the training provider

#### Trainees are not eligible for this funding if:

They receive scholarships or other funding from the Ministry of Health that covers any of the same components as this specification.

They are employed in mental health or addictions services.





FOR AN APPLICATION FORM

**Corporate Support Services** 

corporatesupport@cdhb.health.nz



#### **CHRISTCHURCH UPDATE 2**

Welcome from Peter Whitcombe, Christchurch Children's Team Director



Haere mai – Welcome to the latest update from the Christchurch Children's Team.

Momentum for the Christchurch Children's Team is now rapidly building as we get closer to our anticipated go-live date. I'm pleased to confirm that Hon Anne Tolley, Minister for Social Development, will officially launch the Christchurch Children's Team on **Thursday 3 December**. As soon as the event details are confirmed, invitations will be on their way.

We've had a very exciting time over the last few weeks with the first of the orientation and training workshops for the Christchurch Children's Team Panel Members and Lead Professionals taking place. These mark a major milestone in the journey and development of the Christchurch Children's Team.

This first major gathering of this wider Christchurch Children's Team began appropriately with a Powhiri and Cultural Training hosted and held at Tuahiwi Marae near Kaiapoi. Ninety guests including agency service managers of Children's Team Panel Members and Lead Professionals, gathered to meet for the first time and others to renew longstanding relationships. We were privileged to hear from Lynne Te Aika, a Trustee of Tuahiwi Marae and Chair of of Te Ngai Tuahuriri Runanga, who provided some of the cultural and historical context to help with the work of the Children's Team. She gave a presentation highlighting the importance of interconnectedness, relationships and working together to ensure the flourishing of children, whanau and community, and how this has been important to Maori. I would like to thank Tuahiwi Marae for hosting us and providing an enriching experience for the start of the next phase of growth for the Christchurch Children's Team.

I'm pleased to say that 20 Children's Team Panel members and 60 Lead Professionals have been undergoing their first training sessions. This means we will be well-placed when we go-live to take referrals and support vulnerable children in Christchurch. I would like to thank the organisations who have enabled their professionals to be involved in the Christchurch Children's Team, and to those individuals who are willing to manage multiple responsibilities to take on this important work.

Finally, I'd draw your attention to the **safety checking requirements** that have recently been implemented. There is more on this in this Update. If you have any questions in regard to what is required or the necessary forms, then please get in touch with Shane Whitfield, Workforce Lead on the Christchurch Children's Team.

I look forward to updating you again in the coming weeks as we head towards go-live!

Peter Whitcombe Email: Peter.Whitcombe@childrensactionplan.govt.nz

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# THE RELEVANCE OF INTELLECTUAL PROPERTY IN CLINICAL RESEARCH AND PRACTICE

MONDAY DECEMBER 7 2015
BEAVEN LECTURE THEATRE,
UNIVERSITY OF OTAGO,
CHRISTCHURCH
4.30PM – 6PM
REFRESHMENTS
AFTERWARDS



#### **OVERVIEW**

This free workshop is designed for people working within the regional health system, who have an interest in exploring the relevance of intellectual property in clinical research and practice. The workshop is open to all (i.e. both clinical and nonclinical CDHB staff and University staff are encouraged to attend). It will cover considerations related to IP capture for commercialisation leverage through to freedom to operate and potential infringement of third party IP rights – pitfalls and traps to look out for. Garth will draw on practical and theoretical examples derived through his experience in managing the IP portfolio for Otago Innovation Limited – the University of Otago's commercialisation entity.

#### ABOUT GARTH HENDRY

Garth is a patent attorney with 15 year experience in providing strategic IP advice in the commercialisation of life science technologies. He has particular expertise in protecting diagnostic, therapeutic and medical device technologies and has represented many national and international companies/organisations in achieving registration of IP rights fundamental to commercialisation activity. Garth holds a PhD in biochemistry/biophysics and thoroughly enjoys working with clinicians and researchers who develop new, cutting edge science.

For further information and to register for this workshop please email <a href="mailto:charlotte.robson@cdhb.health.nz">charlotte.robson@cdhb.health.nz</a>















# NEW GRADUATE MIDWIFERY PROGRAMME

The South Island – exciting, artistic, thriving urban areas surrounded by national parks in a spectacular natural environment supporting a large variety of outdoor activities.

South Island DHB's all support professional development opportunities, embrace evidence based practise to provide safe, high quality midwifery care and celebrate the key role midwives have in partnership with women to promote maternal and infant health and wellbeing.

#### **SOUTHERN DHB**

## Queen Mary Maternity Centre Dunedin Hospital

One position at 0.7 FTE on a 12 month fixed term contract.

#### Southland Hospital Invercargill

One position at 0.7 FTE on a 12 month fixed term contract. Please contact Milair Ryalls: milair.ryalls@southerndhb.govt.nz for further information or check out www.southerndhb.govt.nz/careers

#### **CDHB**

#### **Christchurch Women's Hospital**

0.8FTE positions working in all midwifery areas on a 12 month fixed term contract.

Please contact Nicki McNeill, Nurse Specialist Recruitment: 03 3641569 or email nickim@cdhb.health.nz

For more information please check out www.cdhbcareers.co.nz/



#### **Greymouth Hospital**

Two positions at 0.8 FTE on a 12 month fixed term contract.

Please contact Clinical Midwifery Manager, Chris Davey at chris. davey@westcoastdhb.health.nz or check out:

www.westcoasthealthcareers.co.nz CLOSING DATE: 24/12/2015



Email: Lisa- aljwood@clear.net.nz Sarah- yogasavitri@hotmail.com
Please notify instructor before attending a class

## Join Lisa and Sarah at

Christchurch

Campus

(Lounge of the great escape)

Monday (Lisa)

4.45pm - 6pm

Monday and

Wednesday (Sarah)

12.30-1.30pm

Only

\$10

Concession cards available

Please bring a yoga mat, your drink bottle and comfortable clothing.



Health =.

investina



# CANTABRIANS TAKE A HI-VIS BREAK STAND TOGETHER AGAINST VIOLENCE

CATHEDRAL SQUARE, WEDNESDAY 25 NOVEMBER 2015, 12:30PM - 1:30PM

Partnered by Canterbury District Health Board, Canterbury Family Violence Collaboration, Canterbury Police, Christchurch City Council, Ministry of Justice and Ministry of Social Development



### ASSOCIATE DIRECTOR OF ALLIED HEALTH

Health services in the West Coast continue to transform. We have an exciting opportunity to reshape the way we operate, developing Allied Health services that will sustain us well into the future.

The Associate Director of Allied Health is a newly created role, to redefine and assist in the lead delivery of integrated health care across the West Coast Health system.

Reporting to the General Manager of Grey | Westland, you will work in partnership with the Director of Nursing, Medical Directors, General Managers of Grey/Westland and Buller Health, fostering excellence in clinical standards and professional practice of the Allied Health professions

You will be accountable for the operational and professional leadership of the Allied Health work force across the West Coast District Health Board and the operational management of the Allied Health workforce in Hospital and Community Services.

Working with key stakeholders to strategically develop service models of care that meet the needs of the patients and their families, you will participate in the negotiation of service contracts

westcoastdhb.careercentre.net.nz/ Search: Allied Health and fiscally manage resources within budget.

As an expert in leading service and/or professional change, you will be accountable for leading quality programmes, innovation and research, guiding Allied Health professionals forward and break down clinical and knowledge silos to ensure that patients benefit from quality, coordinated and timely care.

We are seeking an experienced leader, with a qualification in an Allied Health profession and current practising certificate, who is innovative, outcome focused, and driven to achieve professional and operational excellence. You must be able to clearly articulate a vision that resonates with others, and have a deep commitment to working in collaboration across disciplines.

The future is clear, the frameworks are in place – what we need now is your passion and expertise to achieve our vision of quality integrated health services.



