



Putting wellbeing at the heart of all we do

Every day I get to meet busy, passionate, and extraordinarily talented people, who are doing all they can to provide Cantabrians with world class health services. It's the best part of my job.

One of the hardest parts of my job can be keeping up with what's happening. There's so much on the go. With facility redevelopments and new and better ways of working constantly being introduced, every day there are new opportunities and challenges to keep on top of as we continue to transform our health system and make it better for patients.

We can all be incredibly proud of the progress we've made over the past few years, especially since the earthquakes. But now more than ever, it's important we take the time to stop and think about our own wellbeing. Reflecting on how we're doing shouldn't be seen as a luxury – it's something we all need to do regularly.

Staff are our greatest resource and I'm sure there's more we can and should be doing to support your wellbeing. Getting our approach right to supporting staff wellbeing is one of our greatest challenges and opportunities. It requires the commitment of people right across our organisation.

The Canterbury DHB Staff Wellbeing Survey starts today and I strongly encourage you to take the time to have your say. The results of the survey will inform the development of a comprehensive Staff Wellbeing Strategy. The more we know, the better we can do.

If it's a struggle for you to do the survey during work time, please talk to your manager about making time available to do it over the next four weeks. It will only take 10-15 minutes.

As an added incentive all staff who complete the survey can go into the draw to win one of four FitBit Heart Rate wristbands (we're giving away one every week so the earlier you do the survey, the greater your chances of winning!). At the end of the survey period we'll also be giving away a fantastic Hanmer Springs Pamper package for two – we'll announce the winner in the CEO update on 15 August.

Please [click here](#) to let us know where you're at and how we can better support you to be your best.

How you can do the survey

- » Go to the link on the intranet home page
- » Check your emails – a link will be in each day's Global Update
- » Click on the link above
- » Ask your manager for a link to the survey



HELP US PUT WELLBEING
AT THE HEART OF ALL WE DO

Go to the intranet &
HAVE YOUR SAY

Canterbury
District Health Board
Te Pori Hauora o Waitaha

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Photography and video recordings in hospitals

We live in a world where a smart phone is often attached to our fingertips.

An amazing advance in technology, smartphones can do amazing things including the ability to take high resolution images anywhere anytime but what are the rules, especially in a clinical setting?

Unsolicited recordings are becoming an increasing issue for District Health Boards and the issue has featured quite a bit in the [media](#) this year.

However, the rules for patients and their families or visitors taking photography or video recordings in hospitals is sometimes unclear and why I want to raise awareness around the associated expectations.

Under 'Private Recordings' in Canterbury DHB's 'Informed Consent' policy it states recordings include any photos, videos and audio made in any of our premises by patients, their families/whānau or support person. While making a recording is generally allowed, it's not in the following circumstances:

- » When making the recording might jeopardise patient safety
- » When the staff involved have not given consent to be recorded and need to continue the caregiving.

Patients, visitors and staff members' rights to privacy of identification are also to be respected. The person wishing to make the recording must seek verbal consent of all those likely

to be included.

So there it is, that's our policy but I understand that it's easier said than done these days.

We've had a case recently where a patient was interviewed by television media, provided recordings including video and photographs of them receiving care while in Burwood Spinal Unit, for broadcasting. The problem was the staff in the images hadn't given consent to the patient to be in the recordings to begin with.

It's difficult when staff are busy concentrating on their job, and therefore might not notice the patient or their relative, or friends recording what's happening.

So I encourage you to try and be more aware of smart phone recordings and if you see what looks like someone recording, remind them politely about our policy. If you don't want to be in a photo, please ask the person recording to stop. If they refuse, call security.

You do have a right to say 'NO THANK YOU', you don't want to be recorded. But if you do agree, then it's also important to be aware that by agreeing you can expect the image may be shared with others, including via social media or with the news media.

Once anything is on social media it is permanently on the internet.

Last week the improvements for Canterbury's care plans were rolled out

Care planning significantly improves patient outcomes by recording and sharing the actions that the patient and their health professionals recommend when they are really unwell or towards the end of life. It provides an opportunity to share information between clinicians who are involved with a person's care, including the individual themselves.

Advance Care Plans and Acute Plans, previously shared in Canterbury through a platform called the Connected Care Management Solution (CCMS), are now incorporated into Health Connect South, accessible to primary care via HealthOne.

This change has improved accessibility. Improved Acute Plan and Advance Care Plan templates were launched that will make it even easier for our clinicians to work together in the care of people.

Benefits include easier to use templates with no compulsory fields and autosave functionality meaning that none of your hard work will be lost. The Acute Plan template is also shorter. For Advance Care Plans the process for clinical review and publishing has not changed. In fact, the changes shouldn't impact on any original planning processes. Clinicians and patients can be reassured that all existing plans will be transcribed across to the new technology, so no information will be lost.

I want to congratulate the team involved in this huge piece of work, including the nursing students who helped with the transition of existing plans to ensure a seamless move for our clinicians. This is a great result for our health system and will only strengthen our progress towards becoming a highly functioning integrated health system.

Click [here](#) for more information.

Have a great week,



David Meates
CEO Canterbury District Health Board

Facilities Fast Facts

Fast Facts – Burwood

Date change

Dan Coward's next staff forums will now be held on Tuesday 19 July at 10 am in Meeting Room 2.3 at Burwood Hospital, and on Thursday 21 July at 3 pm in the Riley meeting room for staff at TPMH.

A reminder that the staff entrance via the container walkway (the old temporary main entrance) and a small area of the adjoining car park is now closed for a few days, to allow the demolition of the old Birthing Unit to begin. The photo to the right shows one of the containers being lifted away.

Fast Facts - Christchurch

The Acute Services build has picked up pace in the past week. About a quarter of the steel required (1600 tonnes) is now on site – and a further 600 tonnes is arriving over the next few days.

A concrete pour for the third floor of the western tower took place during the day on Thursday 14 July. This pour is the first of many for the building's floors, although none will be as large as the foundation pours that were done in 2015.



The photo to the left shows a view from level 3 of the western tower, with contractors preparing the steel flooring system to receive the concrete.



The photo to the right shows trucks in position at ground level to deliver the concrete – 195 cubic metres were poured in total.

Steel framing is about to start on the eastern tower, and the contractors estimate that the framing on the western tower will be assembled up to level 6 by the end of next week.



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Outpatients news

A site blessing and ground-breaking ceremony was held on the Outpatients site today.

Early this morning CDHB Kaumatua Maurice Gray led a karakia/blessing and ground breaking ceremony to mark the start of construction of the new Christchurch Outpatients building. This is a very exciting time for many of the CDHB outpatient services as it brings years of planning and dreaming of new, state of the art facilities in one location a step closer. Staging works are expected to begin towards the end of July and involve erecting fencing around the site and then a surface scraping.



Above: CDHB kaumatua Rev Maurice Gray blessing ground of Christchurch Outpatients.



Above: CDHB Kaumatua Rev Maurice Gray leads a group of chaplains staff and project team at the blessing of Christchurch Outpatients.



Chaplain Rev Alex Evenden, Anthony Leighs, Leighs Construction (obscured), Guy Cleverley CCM Architects, Steve Wakefield, CDHB Deputy Chair, Murray Cleverley CDHB Chair, Chaplain Rev Hilary Barlow and CDHB CEO David Meates were all on hand to help.



Above: CDHB Chair Murray Cleverley breaks the ground for the new Christchurch Outpatients.



Reminder – Name the Cranes!

Christchurch Hospital's youngest patients (and children of staff members) have a chance to get involved in the Acute Services building project by choosing a name for each of the tower cranes on site. Look out for the posters with more details, ask your charge nurse manager for information, or download an entry form from cdhb.health.nz/itsallhappening

The closing date for entries is 28 July.



Bouquets

Christchurch Hospital

To absolutely everyone involved with my surgery and post-operative care, many, many thanks. From my admission, biopsy, surgery, recovery, and physio – I have been treated with the utmost respect, integrity and compassion from an amazing team. Words cannot say enough.

Child's Activity Room, Christchurch Hospital

Awesome service, very helpful and I love how they inform the children of what's going to happen in a child safe and understanding way. Our stay at the hospital wouldn't have been as great without them!

Birthing Suite – Christchurch Women's Hospital

You ladies are fantastic! We very much appreciate your caring and professional approach. Many thanks.

Birthing Suite – Christchurch Women's Hospital

My family and I would like to acknowledge Mona who cared for us during our stay. Seriously - what an amazing woman! She is kind, compassionate, respectful, and caring. We felt so comfortable in her care and so happy to have met her. Under such difficult circumstances we couldn't have wished for someone better than Mona. We will be forever grateful. Thank you Mona.

Birthing Suite – Christchurch Women's Hospital

What an awesome team of midwives here - Mona, Jo and Fiona. Thank you

to every one of you for your loving care during my stay. This experience has been the most difficult time in my life and your utmost respect and loving support has been a huge help for me. Thank you so much.

Children's Acute Assessment Paediatrics (CAAU), Christchurch Hospital

Wonderful staff! Our daughter got here because of her asthma and our stay in hospital was just awesome! Really appreciate! Thank you.

Convalescent Care – Rangiora Hospital

The care I received at Rangiora Hospital was superb. All the staff were so kind and considerate of my needs at all times. I am sure the care I had here has greatly helped in my recovery.

Gynaecology Ward, Christchurch Women's Hospital

Thank you millions to the staff on Level 2 at Christchurch Women's Hospital. You have all been amazing during this wrenching time. Woman who kept in contact via phone was such a huge help - made my situation a whole lot easier. Thanks all!

Volunteers, Christchurch Hospital

The "Can I Help You" people are a great idea. Good to send them up to the ward to help push wheelchairs or carry stuff for mums who have more than one child. Thank you.

Ward 21, Christchurch Women's Hospital

My daughter was admitted to Christchurch Hospital with burns. I am

so grateful for the care we have received since being here. The nursing staff have been great, along with the different paediatric teams who've been looking after her. I know she really valued and enjoyed the talks with Rebecca from the Activity Room - she helped her deal with her thoughts and feelings and prepared her for surgery and dressing changes. Radio Lollipops was something she looked forward to in the evening. We've had a great experience here - thank you!

Urology, Christchurch Hospital

We wish to compliment our nurse Lou MacLean. She is amazing. Made us both feel at ease at such a difficult time for my husband. She also was so informative and helpful in regard to what we had to deal with. She told us more information than the surgeon did! She shines above everyone we have dealt with over the last seven months. She is a credit to the hospital and the urology team. She deserves a pay rise!

Christchurch Outpatients

Helen was very helpful and caring and the procedure this time was a lot better than the one six months ago. Well done to the two staff members.

Ward 20 (Plastic Surgery), Christchurch Hospital

All the nurses and nurse aides and all other staff are amazing. I thank them for their help, time, effort and patience. Especially their patience. I am so grateful. Made my long time here easier.

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Ward 15 (General Surgery and Gastroenterology), Christchurch Hospital

Great care from nurses Laura and Courtney in Ward 15. Very proactive and good patient advocates, keeping patients up to date. Thank you.

Ward 16 (General Surgery), Christchurch Hospital

To all the nurses, thanks also for making my stay in hospital great. Annabel, Victoria, Debbie and Bianca and to

everyone else, you girls rock.

Ward 16, Christchurch Hospital

To all the nurses that took care of me and the missus, thanks a lot. Should all give each other a pat on the back, thanks team.

Ward 27 (Endocrine and General Medicine), Christchurch Hospital

I would like to express my great thanks to all the staff on Ward 27, caring for me. While the ward appears to be a very busy place, this was gratefully received.

The days that I was there seeing them so busy, but still made time to help me. I want to say thank you very much, please pass on my thanks.

Ward 27, Christchurch Hospital

Fantastic care of my father in a difficult time for our family. Nurses were great and always kind and caring. Ward was always clean in the 10 days we spent visiting. Thank you to everyone on Ward 27.

What you need to know about the upcoming DHB elections

About the role

The New Zealand Health Strategy has recently been refreshed to give direction to the health sector for the next ten years. DHB Boards serve for three years at a time and have a critical leadership role to play in the New Zealand health system and in the delivery of that strategy.

Board members are accountable to the Minister of Health for their DHB's performance in planning, funding and delivering health services to our communities, and are responsible for promoting their health status.

Candidate attributes

Boards need people with:

- » strong business skills with a focus on value for money
- » strong and collaborative leadership skills
- » an understanding and passion for social investment
- » an understanding of their communities, particularly those with high health needs
- » a willingness to build health services as part of the wider social sector
- » an ability to work within a complex sector with many competing demands

Candidate eligibility

Candidates must be enrolled on a parliamentary roll somewhere in New Zealand and be a New Zealand citizen.

DHB employees can stand, providing they meet the eligibility criteria. They should however, discuss their intentions with their manager prior to submitting a nomination, to create an opportunity to discuss how potential conflicts of interest might be managed.

As a DHB employee

The first thing you should know is that we are already in what is known as the 'period of restraint' – essentially this is the

three month run up to the election. During this time additional protocols apply, so that DHB employees must not promote, or be perceived to be promoting the election prospects of any sitting Board member or other prospective candidate.

DHBs are required to be cautious about publicity - including events, engagement with the media, or placing adverts that might raise the profile of an election candidate. DHB resources may not be used to promote any individual candidate from now until after the election.

For this reason, profiles of existing Board members have recently been removed from our website.

Key dates

- » Friday 15 July: Nominations for District Health Board candidates opened
- » Noon on 12 August: Nominations close
- » 16-21 September: Voting documents are issued
- » 8 October: Election Day
- » 5 December: The new Board takes office.

More information

Visit our website: [Canterbury District Health Board elections 2016](#)

Canterbury Grand Round

Friday 22 July 2016 – 12.15pm to 1.15pm

with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker one: Adib Khanafer, Consultant and Nedal Katib, trainee surgeon, Vascular Surgery

“Endovascular surgery – a new keystone in arch repair”

Conditions such as aneurysm and dissection affecting the ascending thoracic aorta and aortic arch traditionally require open surgical repair. This carries a high risk of procedure-related mortality and major morbidity including a high risk of stroke. Endovascular approaches in the management of the ascending aorta and aortic arch appear to offer a viable alternative but also significant technical challenges.

Speaker two: Dr Ignatius Chua, Consultant Immunopathologist and Clinical Immunologist

“Making Sense of Allergy: Perspectives from the Immunology laboratory and adult clinic”

Allergy is a common medical condition and is one of the most frequent subjects in the media. The laboratory / clinic face a major challenge in the sheer number of requests that are not

related to allergy. Indiscriminate use of allergy testing leads to many false positive results which can have a detrimental effect on the patient.

Chair: Peter Ganly

Video Conference set up in:

- » Burwood Meeting Room 2.3a and 2.3b
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton
- » The Princess Margaret Hospital (Please note the level three F block VC is no longer available and the level 1 F block VC has moved to the Riley Lounge.)
- » Pegasus, 160 Bealey Ave, Room 3

All staff and students welcome

Talks will be available within two weeks on the [intranet](#).

Next Grand Round is on Friday 29 July 2016 in the Rolleston Lecture Theatre.

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

New Clinical Director in Mental Health



Above: Erik Monasterio

We welcome Erik Monasterio to the position of Clinical Director of the Regional Forensic Psychiatric Service.

Erik had been acting in the role for a year while Ceri Evans was on leave. Ceri has resigned to pursue his interests in high performance sports psychology.

Erik trained at the University of Otago. He did his specialist training in Christchurch and has worked at Canterbury DHB since 2000 as a consultant psychiatrist.

Erik says he is very grateful to be given an opportunity to lead the forensic service and in particular to continue Ceri's work.

“It is a time of considerable challenge for forensic services throughout the country as there is a concerning, ongoing increase in the number of people detained in custody and appearing before the criminal courts, many of whom suffer from serious mental illness and/or substance related problems,” Erik says.

As well as medico-legal work Erik's interests include: personality characteristics, morbidity and mortality in climbing and BASE (Building, Antenna, Span and Earth) jumping populations; off-label use of antipsychotic medications (the use of pharmaceutical drugs for an unapproved indication or in an unapproved age group, dosage, or route of administration); metabolic complications associated with antipsychotic medications and the impact of trade agreements and access and cost of healthcare.

Erik is well known for his work on the implications of the Trans Pacific Partnership Alliance for health in New Zealand.

Chief of Psychiatry, Sue Nightingale, congratulates Erik on his appointment.

“Erik did a great job in the acting role for 12 months and we are very pleased that he has agreed to take it on for the longer term.”

Disability Action Plan launch confirms our commitment to equitable care



Whoever it was that said never to work with children or animals was at least half wrong. Children, or more accurately young people, have a way of reminding you of what's important – He tangata, he tangata, he tangata.



Above: Nicky Wagner with two Jammers.

Reminding us that people must always be at the centre of what we do is just what Star Jam did last Tuesday evening at the launch of the Canterbury and West Coast Health Disability Action Plan.

The 'Jammers' are a non-profit organisation that empowers young New Zealanders with disabilities to achieve their full potential through music and performance workshops. On Tuesday they sang and danced up a storm in a stunning performance that radiated joy and a love of life.

The Minister for Disability Issues, Nicky Wagner, added mana to the occasion and spoke about the twin successes of project 300 and Enabling Good Lives. Both initiatives are great examples of affirmative action working, providing and supporting opportunities for people with disabilities or long-term health conditions into employment.

The final component to the evening was the screening of some short but poignant videos that provided an insight into the challenges disabled people and their families face, featuring Margaret Woollett – a retired teacher on the West Coast, and the Andrell family which includes two daughters with microcephaly.

Ben Lucas, Chef de Mission for the New Zealand Paralympic Team also talks about the involvement of disabled people in the design process for Burwood Hospital.

All three videos can be viewed [here](#) and will shortly be posted on the DHB's website.

Setting aside for a moment the importance of good talent in making an event, the launch itself sent a really important message, and confirms our TransAlpine commitment to truly equitable care.

A lot of people have been involved in the making of the plan, not least of which is the community themselves.

As David Meates candidly put it "Creating a cohesive and collaborative plan has been a long time coming."

"This launch comes after more than a year of consultation with disabled person's organisations to refine the plan and define priorities for the next few years. Rather than responding in a more ad hoc way, as we have in the past, this plan maps our way forward and outlines what we plan to do differently from now on," David says.

The consumer councils on both coasts have also been instrumental in making this an inclusive plan. Their motto of "Nothing about us without us" has never rung truer. Thanks to them, to the community, and to the tenacity and dedication of Planning and Funding's Kathy O'Neill.

We've only just fired the starting pistol. The task itself - delivering better care for our community, has just begun.



Above: David Meates speaking with Jeremy Borland signing.

University of Otago
Research Radar
 Christchurch

Partnership limiting spread of whooping cough in infants

Canterbury researchers, with essential support from Canterbury DHB, are enabling the vaccination of pregnant women to prevent infectious diseases in their infants.

Dr Tony Walls is a paediatrician, infectious diseases expert, and researcher with the University of Otago, Christchurch.

He and his colleagues conducted the first New Zealand trial of a vaccine for pregnant women, aimed at protecting their infants against whooping cough, or pertussis.

Small international trials had found no apparent safety concerns for vaccinated mothers, but the data available on their infants was very limited.

Walls and his colleagues closely monitored infants in Canterbury who had been exposed to a tetanus, diphtheria, and pertussis vaccine during pregnancy for between six and twelve months after birth. None of the infants got pertussis despite high rates in their community at the time and no adverse effects were found.

Walls says Canterbury DHB was 'pretty active in the whole process'.

"They were the first DHB in the county to introduce Tdap vaccine in pregnancy, months in advance of it becoming funded nationally ... They also provided generous funding for us to do it (the trial) which allowed us to do this work independently of any vaccine company money."

Walls says the 'new thinking' internationally is that immunising pregnant women is a safe and effective way to give children immunity against some highly contagious and dangerous infections.

"We now recognise that this vaccine (against pertussis in pregnant women) is the best way to prevent infants too young to be vaccinated themselves from getting whooping cough. This is very important because rates of whooping cough are rising in the community presently and unvaccinated children are at the highest risk of getting severe disease."

Walls and his team are now trialling the effectiveness of a vaccine for pregnant women that protects against a virus that causes bronchiolitis, pneumonia and other serious respiratory illness in children.



Above: Dr Tony Walls



working with

Canterbury
 District Health Board
 Te Pōwhiri Hauora o Waitaha

We're making a change to how you use DHB vehicles

We're switching to a new software system - SMARTRAK- this will affect all CDHB vehicle fleet users (and WCDHB fleet users at a later date).

If you use a DHB fleet car then you'll need to do things differently when the SMARTRAK fleet booking system comes to your team. The new system is already being used by our Adult Community Therapy Service and Rangiora staff. Here's an example of how the new system may affect you.

John* works in a unit that has a small group of cars exclusively for their use. The team uses the cars most days and has an in-house system where everybody in the close knit team knows who has the cars.

John doesn't feel he needs to use the CDHB Electronic Booking System, his team knows what is going on and besides sometimes he's in a rush and doesn't have time to log on and book a car. He only needs it for 15 minutes anyway.

Jane* is in a different team at the same location. She rarely uses a fleet car but when she does, it's urgent. On one of these occasions she books one online and rushes out to get to her meeting. But the car is not there. She has to hurriedly book a taxi or take her own car.

Because John doesn't book the car online:

- » We have no record of how much John's team uses the fleet. This will influence how these resources are allocated in the future.
- » Jane is late to her meeting.
- » CDHB has to pay the taxi fare.

When SMARTRAK comes to your team, if you don't book the car online you won't be able to use it. The new SMARTRAK Booking system makes booking a car easier and quicker than ever before. Once John has logged onto www.smartrak.co.nz and booked his car, the system auto confirms his booking as well as updates his Outlook calendar.

Because John books his car online:

- » We know how much his team depends on the vehicles and can make sure they have enough for their use.
- » John gets an email reminder about his car booking.
- » Other teams get to use the vehicles when they are free or know to make meeting times for when the cars are available.

More details are available on the [intranet](#).

*John and Jane are not actual staff members



Recruitment - General MIT Team Leader, Radiology

Permanent/Full Time

It's an exciting time at the Canterbury District Health Board and our Radiology Services need a skilled Team Leader to join us on our journey of delivering the best quality medical imaging service.

Based at Christchurch Hospital, the General Medical Imaging Technologist (MIT) Team Leader, Radiology, has a range of important tasks which include ensuring an efficient and effective CDHB medical imaging service is delivered and that the medical imaging team is smoothly integrated within the wider Radiology Service. This will include participation in the operational planning of the service and managing a small team to optimise productivity and meet the demands of a busy service.

As a forward thinking health practitioner and NZ registered MIT with radiology clinical experience, you will be bright, energetic, motivated, and will have the flexibility to keep up with the changing demands of our service.

You have an open and approachable management style, combined with excellent interpersonal and organisational skills enabling you to work collaboratively within the team and across the sector. You will have a high level of competence with planning, problem solving and proven experience in working under pressure.

Your commitment and vision for continuous quality improvement as you strive to gain the best outcomes for our service users will see you succeed in this challenging and rewarding role.

Learn more about this opportunity by downloading the position description available now on our Careers Website. Further enquiries should be directed to Heather Ewing, Recruitment Specialist on email heather.ewing@cdhb.health.nz.

Applications are only accepted on our [Careers Website](#) so please click the "Apply Now"

Supporting the sustainability of Oxford's health services



A workshop was held last week to explore the opportunities and challenges for Oxford's health services.

Representatives from the District Health Board and Primary Health Organisation joined Oxford health professionals, health consumers, police and education at the workshop held on Wednesday 29 June at the Oxford Town Hall.

Rural Health Project Manager, Shona Urquhart-Bevan said the work forms part of the Canterbury Rural Sustainability Project, a health system initiative aimed at supporting rural communities to lead the modelling of their health services.

"The Oxford community already has an advantage with excellent social fabric and great initiatives already in place. This opportunity will help build on the great work already occurring.

"We want to make sure the people of the wider Oxford community have access to the most appropriate and sustainable health services to meet their specific needs.

"The aim is to develop a model of care that aligns with the Canterbury Health System as a whole, yet takes into account the unique differences of the Oxford community.

"This will help safeguard the sustainability of the area's health services into the future.

"We recognise that the people of Oxford know what's best for their health system."

The feedback from this workshop will inform the next stage of the process, which will be guided by a locally-led workgroup.



GovHack, Christchurch, 29-31 July

Forty-six hours to take government data, hack on it, mash it up with awesome people and take home some prizes!

Free weekend hackathon with great food, prizes and cash to win! Meet new people, make contacts, make a difference to Christchurch. Come along as a team or join a team on the day to win nationally and locally.

Register at: www.govhack.org.nz
Places are limited.



Green Prescription can improve quality of life

If you are inactive or worried about your health a Green Prescription (GRx) could be a great way to improve your health and wellbeing.

A Green Prescription offers you ongoing support and encouragement to help you become more active. This is done through one on one consulting or over the phone and also in a group or community setting.

And, you can have as many Green Prescriptions as you need to reach your goals.

Sharon lost 27kg in six months due to Green Prescription.

"The first time I used a GRx it didn't work, for a range of reasons, but the second time I was determined and the relationship I had with my GRx mentor really helped."

When Sharon's weight plateaued her mentor encouraged her to keep going.

"She believed in me, and suggested how I could keep my fitness and diet approaches fresh. They suggested things such as a phone app called My Fitness Pal and a Fitbit which I now wear everyday."

Recording everything she eats and her activities in these two phone apps really helped.

"I feel amazing and have more energy. I

no longer have food cravings and I have lost 27kg in six months. I am aiming to lose another 10kg. The way to make it work is to fit life around your fitness and health, not the other way around", Sharon says.

Sharon is adamant she is not going back to her previous weight and lifestyle and has happily given away the clothes that no longer fit her. She is enjoying buying new clothes which are "not tents".

Green Prescription is a smart and cost-effective way to help people stay healthy.

Research published in the British Medical Journal found that a Green Prescription can improve a patient's quality of life over 12 months, with no evidence of adverse effects.

Research published in the British Medical Journal on the cost-effectiveness of physical activity in primary care stated that 'community walking, exercise and nutrition, paired with brief advice on exercise on prescription (Green Prescription) were the most cost-effective with respect to cost-utility.'

» The GRx Patient Survey 2015 discovered that six to eight months after receiving their Green Prescription: 58 per cent of patients are still more active than they were before getting their GRx

- » 72 per cent have noticed positive changes in their health
- » 47 per cent are generally feeling better
- » 51 per cent feel stronger and fitter
- » 43 per cent have lost weight
- » 67 per cent have made changes to their diet (22% of these stating they have decreased portion sizes).

How to get involved?

Fill out a self-referral form on the link below

Watch this space for a 'Be Active' programme to come

[More information about Be Active.](#)

[Register for Be Active starting 2 August.](#)

For more information contact Lee Tuki, Staff Wellbeing, Canterbury and West Coast DHB

Phone: 03 378 6855 | Ext: 82855 | Mobile: 027 689 0285

lee.tuki@cdhb.health.nz



Staff Wellbeing Programme: New Be Active CDHB programme, Wellbeing Workshops, Opportunities on your site

NEW: Be Active CDHB programme

Opportunity to re-establish or restart physical activity. The 'Be Active' initiative aims to provide staff who want to be more physically active with opportunities to try different forms of activity. The programme is run at the YMCA across the road from Christchurch Campus so it's easy to get to and it's cheap (\$3 for a one hour session!). Look for the poster later in the update.

Wellbeing Workshops – 11 more workshops planned for 2016

Fourteen workshops have been completed across CDHB and WCDHB. Be in quick to secure your place in one of the remaining workshops as we have limited places for both.

NEW strengths based workshop, limited numbers – available to managers / supervisors. [Click here](#) for more information and [click here](#) to register. Participant comment ... "The most engaging facilitator I have experienced in a long time. Learned a lot and had a lot of fun doing it". We are also running another series of the very popular Staff

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Wellbeing Workshops – this is the same workshop offered in 2014 / 2015. [Click here](#) for more information and [click here](#) to register – available to all staff. Participant comment ... “Excellent workshop. Highly recommend that other staff attend. Will definitely send the rest of my team that haven’t been yet. Great opportunity to ‘connect’ with others. Thank you”.

Opportunities for staff transitioning to new sites

Quick update regarding staff wellbeing initiatives being held on your site. Currently we are awaiting confirmation of rooms at both Burwood and Oxford Terrace to finalise the Staff Wellbeing initiatives we can offer. Watch this space.

Lee Tuki
Staff Wellbeing
Canterbury and West Coast DHB
Phone: 03 378 6855 | Ext: 82855 | Mobile: 027 689 0285
lee.tuki@cdhb.health.nz



PDRP new portfolio submissions for the end of year



Due to the very large number of portfolios received during this time of the year, we have had to limit the portfolio intake for the last three submission dates for 2016.

If you are not currently on the Professional Development Recognition Programme (PDRP) and if you are wanting to submit a portfolio within this time, it is important that you make a booking.

The final three submission dates for the year are 8 September, 6 October and 2 November 2016.

Please note that bookings are only required for NEW portfolios. Re-submissions DO NOT require a booking in the final three dates of the year.

Submissions are filling up fast, so be quick if you don't want to miss out. If the bookings are full, your submission will automatically be placed into the February submission for 2017.

If you need to make a booking, please contact the PDRP office on (ext 68835) or email Adriana.Humphries@cdhb.health.nz

Resource person training

The next PDRP resource person training session will be held on 15 September 2016.

Becoming a Resource Person

PDRP Resource People are integral to the success of the PDRP and are valued highly. They form the backbone of the Professional Development and Recognition Programme and are located throughout the organisation.

Their role is to be a source of information for nurses applying for the PDRP. PDRP resource staff are trained to answer questions relating to the programme, and to be available to applicants for portfolio coaching and/or recommendations.

PDRP resource staff are nominated by their line managers and will regularly attend education sessions and updates. They are not assessors.

A PDRP resource person will have:

- » Successfully completed their own PDRP submission;
- » Received approval from their nursing line manager to be a resource person; and
- » Signed up to attend a PDRP resource person training day.

If you are interested in attending this PDRP session, please contact the PDRP office on (ext 68835) or email Adriana.Humphries@cdhb.health.nz

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The next PDRP New Assessor Training session will be held 9-10 November 2016.

The PDRP New Assessor Training session is a two day course which is facilitated by the Open Polytechnic.

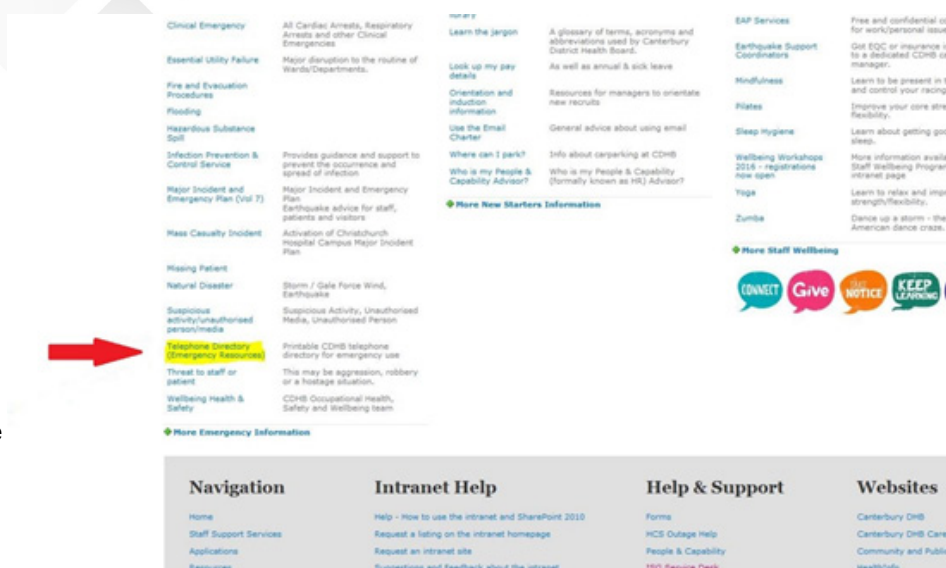
New assessors need to be nominated by their peers and supported by their Line Managers.

For information on becoming a new assessor and supporting forms to complete, please refer to our [PDRP Intranet site](#).

We look forward to receiving nominations from interested parties.

Standby phones – Christchurch and TPMH campuses

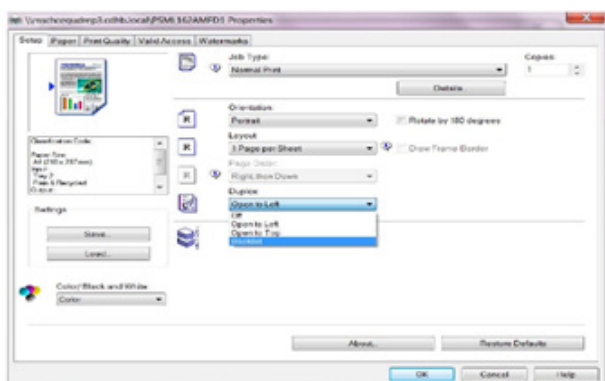
The list for the standby (back up) phone system for Christchurch Hospital Campus and The Princess Margaret Hospital (TPMH) has been updated and is available on [intranet](#). See image to the right.



Also available is the user guide (2013) explaining the standby phones. Please print off the current phone list and a user guide and place them next to the stand by phones. See image below.

Emergency Resources: CDHB Staff Telephone Directory and Stand-by Phones

- ▶ Stand-by Phones: **user guide** and **list**
- ▶ Please print the **CDHB Staff Telephone Directory** into an A5 format booklet.
 1. open the document
 2. Ctrl + P
 3. select "properties"
 4. select "Booklet" under duplex
 5. OK



The phones at Christchurch Hospital Campus are coloured blue. At TPMH they are black with a blue “Standby Phone System” sticker

The standby phone system in the past has proved its worth in the rare event the main phone system fails. It provides the ability for services to continue to communicate with each other without major disruption.

The list will be changed and updated on a regular basis but the most up to date copy for people to use will always be available on the intranet.

Thank you

Bruce Hall (Emergency Planner)

One minute with... **Alison Cain,** Programme Manager, Information Services (IS) Projects

What does your job involve?

Managing Information and Communications Technology (ICT) change projects, working with a variety of stakeholders to implement new improved ways of doing things. From planning through to execution and handover of new systems to the business. It's much more than installing a device it's understanding all aspects of the change to ensure we are working in more efficient and innovative ways.

Why did you choose to work in this field?

I'm passionate about providing the best quality health services for people and I think health Information Technology (IT) is fascinating, it's fast moving and complex and makes a difference. Health is something that impacts all of us and our families at some point. My daughter spent time in the Neonatal Intensive Care Unit (NICU) and so I experienced first-hand how both new technology that wasn't available several years ago combined with the dedication of skilled clinical staff to ensure she made a full recovery. That is motivation for me to keep challenging the way we currently do things.

What do you like about it?

Variety. I also like working in a role that demands that I am agile, keep learning and I love getting out and about and working with such a diverse range of talented and dedicated people.

What are the challenging bits?

Sometimes it can be difficult to move at the pace I would like but equally it's so rewarding when you work as part of a team that delivers something that is well received.

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

Too many to mention. I really admire clinical staff who have the ability to remain calm in emergency situations and make quick decisions.

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?

The values in my day to day work mean that we listen and value our colleagues and patients, we are professional and honest in the way we do things and we take responsibility for doing our jobs to the best of our ability.

The last book I read was...

The Social Animal, by David Brooks.

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

Snorkelling in the Maldives.

My ultimate Sunday would involve...

Brunch with friends, a nice afternoon walk or trip out to the beach and then a bbq dinner outside with good wine, music and my family.

One food I really dislike is...

Seafood – gumbo type dishes with pincers poking out – eugh!

My favourite music is...

Eclectic ...anything from Elton John to Justin Bieber!



Above: Alison Cain

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

In brief...

News from the Canterbury Clinical Network

In this issue:

- » Transformation of Oxford's Health Services
- » Introducing Better Breathing
- » 2016-17 Work Programme
- » New Lab Coordinator
- » [Read here](#)

Māia newsletter

The Māia newsletter is available to read [here](#)

eCALD® 10th News Edition

If you would like to read the latest Culturally and Linguistically Diverse groups newsletter.

[View online here](#)

RURAL CANTERBURY Primary Health Organisation Te Roopu Hauora Matua O Waitaha Taiwhenua

Independent Chairperson Rural Canterbury Primary Health Board

The Rural Canterbury Primary Health Board (RCPHO) is a limited liability company with charitable status, funded by the Canterbury District Health Board (CDHB).

The primary role of the RCPHO is to provide essential primary health care services to those people who are registered or enrolled patients with General Practices within the Territorial Local Authorities of Hurunui, Waimakariri, Christchurch (Banks Peninsula) and Ashburton.

Applications are invited from suitably qualified persons for the above position. The successful applicant will be responsible for the overall governance of the RCPHO, and will promote the vision, culture and values of the organization.

The applicant should have a good knowledge of primary health care, governance experience, and good communication and relationship skills and be experienced in strategic planning.

The time commitment for this position is 20+ hours a month involving Board meetings together with attendance at various meetings on the Board's behalf.

The term of appointment is for a period of three (3) years.

Applications close Friday 5th August 2016 at 4.00pm at the address below.

An application package including application form is available from:
Dianne Walker
Executive Administrator
Rural Canterbury PHO
P O Box 14021
CHRISTCHURCH 8544
Phone 0800 800 743 ext 203

Further details may be obtained by contacting the acting chairperson, Peter Allen on 027 410 3325 or allenp@xtra.co.nz

Canterbury Collaborative Simulation Interest Group (CCSIG)

Date: 24 August. 2016

Time: 1300-1700hrs

Venue: Clinical Skills Unit, 5th Floor, Riverside, Christchurch Hospital

Registration fee: No charge

Draft Programme: This will be an interactive afternoon, please dress comfortably.

- » "Around the world in 4 International sim challenges" - Brendan Wood, Senior Lecturer/Military Programme Leader Paramedicine. Auckland University of Technology
- » The Hartwell Simulator – Dan Hartwell, Simulation Lead, Anaesthetics, Christchurch Hospital
- » Virtual Simulation – James Hayes, Senior Medical Imaging Lecturer. Ara institute of Canterbury

To register contact email [Professional Development Unit](#).

Rongoā Kākāriki
GREEN
PRESCRIPTION

Canterbury
District Health Board
Te Poari Hauora o Waitaha

sport
canterbury

BE ACTIVE



Be Active is an eight week programme for people wanting to establish or restart their activity, and have fun along the way.

CDHB Be Active
Specific program for CDHB staff
City YMCA
12 Hereford Street
Tuesday 3:15 – 4:15pm
Starting Tuesday 2nd August

For more information and to register please contact:

Anna Wilson
P 03 373 5045
E anna.wilson@sportcanterbury.org.nz
www.sportcanterbury.org.nz

Suitable for all ages (18+) and levels of ability. Join us each week to try a range of low-impact activities, e.g. circuit, badminton, Tai Chi and Zumba. Discuss ways of maintaining a healthy lifestyle, and enjoy the support of others in the group. Cost is \$3 per session.



To register online scan here or go to this link.
<http://bit.ly/1qYxuQq>



Together supporting an
active
CANTERBURY

NAME THE CRANES COMPETITION

Help name the two cranes that are being used to build the new
ACUTE SERVICES BUILDING



Entries open to all children and young people aged 16 and under who have a parent on staff, who are inpatients, or who attend outpatient clinics, at Christchurch Hospital. See your Charge Nurse Manager or download an entry form from cdhb.health.nz/itsallhappening