

# It's official - Kaikoura Health Te Hā o Te Ora is open - a community effort

With waiata, karakia, speeches, ribbon cutting and cake, Minister of Health Hon. Dr Jonathan Coleman officially declared Kaikoura Health Te Hā o Te Ora open on Friday.

The new \$13.4 million, 2800m<sup>2</sup> state-of-the-art facility enjoys views over the Kaikoura ranges and out to the bay. It provides primary, aged, acute and maternity care, radiology services and trauma stabilisation and replaces a 100-year old hospital.

The new health centre also features multi-purpose general practice rooms, physiotherapy, community dental, optometry, and space for visiting health specialists. There are a number of flexible spaces to ensure the facility will meet the needs of the community today and in the future.

What makes this new health centre extra special is the fact that the community played such a big role in fundraising to ensure the project went ahead.

The government put in \$10 million and the remaining \$3.4 million has come from the community.

I would like to acknowledge the many hours of work put in by Joe van Rooyen and other members of the Fundraising Trust and the countless hours given by members of the local community. Without people prepared to put their hand up and do the hard yards, this facility would not have happened.



Above: Minister of Health, Hon Dr Jonathan Coleman speaks at the official opening.



Above: The commemorative cake was cut by Kaikoura's oldest resident, 99 year old Margaret Edgar and Aunty Phyllis Papworth as she is known to the locals. Fundraising included an opp shop, a polo match, applying for grants and a host of other events.

Four local people took part in the opening ceremony:

The ribbon to Kaikoura Health Te Hā o Te Ora was cut by two future health professionals Hineari Kahu and Tammy Smith-Kerr. Hine is in her second year of medical school in Otago and is determined to return to the health centre as a GP. Tammy is a Year 13 pupil at Kaikoura High School and plans to train as a nurse, having spent time over the past two years working in Kaikoura Hospital supporting the nurses and healthcare assistants as part of the school's Gateway Programme.

A commemorative cake was cut by Kaikoura's oldest resident, 99 year old Margaret Edgar, who was born in the former Kaikoura hospital. She was ably assisted by Aunty Phyllis Papworth as she is known to the locals.

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The magnificent voices of the Kai-Chorus entertained the 500 plus crowd of locals and officials who turned out to celebrate the opening.

After so many years in the making, days like last Friday, where we can celebrate a project that was delivered on time and on budget with the full backing of the local community are one of the highlights of my role.

**David Meates CEO Canterbury District Health Board** 





Hineari Kahu and Tammy Smith-Kerr, two promising young health care professionals in the making help to cut the ribbon to the new facility with the Minister of Health.



Left: The Minister of Health chats with a 90 year-old resident of the Kaikoura's Health Centre's long-stay ward. She credited the secret to her longevity as keeping active every day. The Minister said this was good advice for people of all ages and wished



Children from Kaikoura's five local primary schools grew plants for the landscaping around the new health centre.







From L-R, Programme Director, Construction & Property Brad Cabell, David Meates and Former National MP for Kaikoura Colin King

From L-R, In full voice singing a waiata, Manager Takahanga Marae Karen Starkey, Director Māori and Pacific Health Hector Matthews and CDHB Board member Edie Moke.



Above: The opening of the Kaikoura Health Te Hā o Te Ora on 15 April 2016.



Above: The opening of the original Kaikoura Hospital in 1912.



# **Facilities Fast Facts**

## Fast Facts – Burwood

Dan Coward, GM Older Persons' Health & Rehabilitation, has been appearing in a weekly migration mini-series on the screens in the cafes at Burwood Hospital and The Princess Margaret Hospital. In case you've missed an episode or two, the clips are also on the <u>Burwood migration intranet pages</u>. With around six weeks to go until the big moves begin, Dan's recently been talking about library services and how to rationalise your books and journals ahead of the moves, and about the proper procedures for posters and noticeboards in the new facilities. The next episode is an outside broadcast on sustainable transport options.

An MRI (magnetic resonance imaging) scanner is being installed in the new Radiology department at Burwood Hospital this week. An MRI scanner is a complicated piece of equipment to install, not least because it weighs several tonnes. (Photo to the right.)



# **Fast Facts Christchurch**

The Acute Services building's offsite laydown yard, where building materials are stored until needed, is now filling up (see photo).

On site, the base isolators have been installed under what will become the western tower of the new hospital building, and preparation for the tower crane installation is ongoing.

The Acute Services building site has two entrance/exits. One is the Rolleston Ave bridge, the other is at the western side of Hagley Outpatients, off Riccarton Road. The gate at the Riccarton Road end is being fitted with lights and an alarm to warn pedestrians when large trucks are exiting the site.



# **Outpatients news**

Planning is underway for staff workspaces in the Outpatients building. These workspaces sit behind the clinical areas. User representatives have provided data on staff numbers and work patterns to help develop the brief for the design team. Next week the design team will meet with the users to review some initial layout sketches based on that data.



# Bouquets

#### Urology Department, Christchurch Hospital

I wanted to write to say thank you for all your kindness and professionalism last week when you helped me with my kidney stone fragments. Whilst I was in and out of the ward during the week and then on the acute surgery list everyone I dealt with were really great, answering questions for me and ensuring I had my pain under control. I remember dealing with lots of people and have tried to list everyone below, but I am sure I will have missed some, so thank you Helen, Renee, Ayla, Sarah, Amy, Charlotte, Luke and Kirley, plus many thanks to my surgeon for extracting everything and making me pain free. You guys were awesome!

#### **District Nurses**

Hi there, my name is Danielle Spencer, CNS for General Surgery CHCH Hospital.

I am writing to tell you how amazing your district nurses have been (Tracey and Julia come to mind).

We have all been caring for a patient with a particularly difficult/long term wound. I have had to change the wound plan multiple times- due to it stagnating. Nothing has been a problem for them. The lines of communication are wide open, and they are always pleasant, professional and caring. They assess the wound amazingly well and provide me with very detailed documentation. They deserve a medal!

Acute Medical Assessment Unit (AMAU), Christchurch Hospital Staff always calming and professional. On each occasion I have been brought in over the past week, I have always been treated with respect and dignity. Thank you for the training you have given your staff. They co-operate as a team and willingly share their knowledge with one another. They support one another and there is no sign of "bullying" as in some hospitals. Though not my favourite place, each admission felt like I had come to a "refuge".

I found myself in AAU a few weeks ago with abdo pain and just wanted to say what awesome staff you have. I particularly want to praise and thank nurse Karly Smith, who was kind, gentle and made me feel better about being there. She was a great nurse and, I believe, a major asset to the unit. I also want to thank Dr Mike for his patience in dealing with a patient in major pain and making me pain free.

#### Coronary Care Unit (CCU), Christchurch Hospital

I recently had a stent inserted.... Unfortunately the stent never opened correctly ..... Doctor Smyth and his team came in at 7.00am on the Sunday morning and corrected the fault with the stent.

The level of care I received during the procedure and after care from Prof Elliot and his team was nothing short of incredible. The Nurses in CCU and all staff involved were fantastic. The food was great ..... It annoys me when I so often read complaints about our health system. The public health system does work especially in the area of acute care. Could you please pass on my thanks to all concerned?

#### Emergency Department, Christchurch Hospital

I just wanted to write to say thank you for the excellent care received by my six month old daughter. We attended ED overnight and were wonderfully looked after by all the staff we came into contact with. The nurse and registrar who cared for her made what could have been a stressful experience much more pleasant than expected.

The security staff in ED were also lovely and one gentleman in particular took the time to come over and entertain Ada when we were both becoming a little tired and overwhelmed by the whole situation, which was very much appreciated by us both! Thanks again for providing such a high standard of care.

#### **Emergency Department**

I would like to express my sincere appreciation to the staff at the Emergency Department for their courtesy and helpfulness when I arrived there by ambulance in the early hours....To the staff in the Acute Medical Assessment Unit for their unfailing assistance – it certainly deserves high praise. Please convey my sincerest thanks to them all.

#### **Oncology, Christchurch Hospital**

The waiting area has the best selection of magazines to read. There is something for everyone. Every six weeks when I come for my check-up I always get there early to have a nice read.

#### Endocrine and General Medicine, Ward 27, Christchurch Hospital

Than you to the kind nurses on Ward 27 who gave great care to my mother while

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in there. It really shows they care about their patients when a simple thing like having a shower or using the toilet is no bother for them. They took great care in making sure my mother had a shower/ wash so that she could feel better in herself, while trying to recover. Thank you.

#### Ward 27, Christchurch Hospital

Ward 27 staff are wonderful. Nothing is too much effort for them, even when they are obviously all extremely busy.

#### Emergency Department, Christchurch Hospital

Thanks for the kindness and softness and patience of everyone on staff. Good job! Congratulations for the peaceful ambience.

#### Intensive Care Unit, Christchurch Hospital

Huge compliments when stationed in bed 6. Nurses, technicians, doctor,

specialist, physio are all marvellous group of people. Without you guys working in the environment you do, I'd be lost. Thank you so much for your caring support.

#### Orthopaedics and Trauma Unit (Ward 19) and Spinal Unit

Can't praise enough for treatment and consideration of my husband and self. Keep up the good work.

#### Volunteers, Christchurch Hospital So nice to have a lady outside saying

'Can I help you?', and she did.

#### (Ward 28), Christchurch Hospital

Ward 28 is the most amazing caring ward. The nurses are simply the best. They all deserve a pay rise!

#### **Oncology, Christchurch Hospital**

Have nothing but praise for the hospital staff here. They are bright and encouraging with great concern for one's health and happiness. No complaints, only compliments.

# Neurology (Ward 24), Christchurch Hospital

My mother is a patient on Ward 24. She came in after having a stroke. On day two the nurse, as well as telling me all about what a stroke is and what to expect, told me and my sister about 'Conversations that count' and the advanced care pathway. She was so informed and gave us a form to take away and think about. She advised that we could go to Mum's GP (for free) and discuss it with Mum and her GP. I was very impressed with her knowledge and her caring manner when talking to us about it. I work in the hospital and knew about the 'Conversations that count' but the nurse didn't know that. It is a great campaign and is being actively promoted on Ward 24 by the nurses. Well done.

# Hand Hygiene project on track

The badges have arrived and it's all go for the "It's Ok to ask me..." campaign being launched on Thursday 5 May by the Canterbury DHB Hand Hygiene Governance Group (HHGG).

Director, CDHB Quality & Patient Safety, Susan Wood, says the badges are a small but significant part of the project.

"The badges are designed to encourage patients and visitors to speak up if they are unsure if their health carer has cleaned their hands. We're essentially telling them it's ok to ask. It's a bold move but effective hand hygiene is just so important for reducing harm. It's constantly on our radar and we're really putting it under the spotlight in May," says Susan.

More detailed information about the campaign is currently being disseminated and placed on the intranet.





# Modest celebration for a remarkable achievement

A week ago on Friday, there was a modest celebration at Pegasus Health to mark the achievement of one million+ referrals through the Electronic Request Management System (ERMS).

It brought together an extraordinary mix of people, from the visionaries to the technically gifted, who together have pulled off something no-one else could – an eReferral system that works as well for primary as it does for secondary care. But more than that, one that works for the patient.

Put simply, ERMS ensures that high quality referrals go exactly where they should, and that the people who need it receive the right care.

The people who were recognised on the night were...

- » Carolyn Gullery the original visionary and Exec Sponsor
- » Graham McGeoch the other original visionary and Clinical Lead for the project from the start
- » Ian Anderson for taking the original vision and drawing up the original technical design
- » David Moorhouse who took the original technical design and wrote the original code creating a real system.
- » Shaun Van Helewyn the longest serving Software Developer on the ERMS project
- » Rob Fisher the original Application Support involved from the start and a key player in the Regional roll out.

Each received a commemorative pen to say thanks for their unique contribution.

Here's what Graham McGeoch, one of the ERMS pioneers had to say on the evening:

"Getting ERMS to where it is today is a great achievement, and looking at other systems in Australia and New Zealand ERMS compares well on a number of fronts - not just the sheer number of referrals, but also the great data we collect and the astonishing reliability that means referrals always get to the right place."

Graham went on to say that his fellow GPs just wanted something that worked well and quickly, and was easy to use.



Above: Carolyn Gullery, Rachael Page and Ian Anderson enjoy the evening.



Above: David Meates with ERMS Programme Manager Rachael Page.

"What we designed works equally well at both ends of the referral process. It does a great job of supporting professional practice and in so doing, makes life easier. It also provides much higher quality information than secondary care was used to receiving, and that quality continues to improve."

The backstory was also fascinating to listen to. Carolyn Gullery related some of history behind ERMS, and gave an insight into what those ERMS pioneers were thinking:

Almost ten years ago now the Ministry of Health introduced a change in waiting list criteria, aimed at ensuring that nobody would be on a waiting list for more than six months. That change affected close to 5000 people in Canterbury.

That galvanised some of us to look at other ways we could get those people the care that they needed. It was only when we began to look closely at the referrals system that we could see clearly for the first time why we had such a problem.

GPs generally had no idea what services were available, nor did they know what information made for a successful referral. It wasn't uncommon for a referral to be made simultaneously to three separate providers in the hope that one would accept it.

#### There had to be a better way.

It was then that we 'designed' ERMS in a coffee bar, a system that could be managed in a primary care setting. A welldesigned system on its own wasn't enough, we also needed to think and to work differently. At that same time, the Canterbury Initiative was formed and began to improve primary and secondary care engagement, HealthPathways emerged, and ERMS became part of our solution.

It was around about then too that the Canterbury Heath System

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our health system



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embarked on the journey of transformation and integration that is now so familiar – a system centred around the patient. There are three strategic goals in realising our Canterbury vision, the second of which is (poetic license on the wording) to support general practice as the single point of continuity for people's access to care.

ERMS has played a vital role in our achieving that goal.

There was a strategy that sat behind the way we designed ERMS that sought to address the fact that at that time, back in 2006, we had no way of planning our service. We could only review the services we provided, but didn't have the data to inform planning for what was needed. That's why ERMS was designed to collect information from primary and secondary care, from ACC, and from private practice to give an overall picture of what was being requested. We could then begin to plan how we might best meet those needs.

Carolyn ended with a heartfelt thanks to the ERMS team for taking a concept, and turning it into something magical that continues to improve, and ensure our patients get the right care at the right time and in the right place.

# Flu vaccination benefits everyone

When Transition Manager, Rural Health Services, Win McDonald, is asked why she gets an annual influenza (flu) vaccination she is quick to answer:

"To protect me, the ones I love and the people I work for and with."

Getting vaccinated is a lot like making the decision to not smoke, it benefits everyone, she says.

"I'd be horrified if I gave my 18 month old granddaughter 'Betty Boo' the flu".

Win travels a lot in her role, visiting rural hospitals and meeting with community groups.

"If I had the flu I'd be a walking nightmare for the health system. I come into contact with residents and staff and I have a shared responsibility for their well-being."

When flu hits a rural community it has a significant effect on the community. Missing one person on a very small roster affects everyone.

"So go on, do it, and if you don't think it's worthwhile for you because you never get the flu? Yeah Right!" Win says.

Do it for everyone else you'll be in contact with over the next five months. We all say thank you in anticipation.



Above: Get immunised, says Win McDonald.

# Staff influenza vaccination clinics Influenza can be anywhere - get immunised

It's time to protect yourself, your whanau, your patients and your community from influenza (flu).

View the clinic times here.



# **Top health education award**

Professor Tim Wilkinson has won the 2016 ANZAHPE award for outstanding achievement in the field of health professional education in Australia, New Zealand and internationally.



ANZAHPE stands for Australian and New Zealand Association for Health Professional Educators and this award is its highest honour.

Christchurch based Tim is programme director for medical student training in the Bachelor of Medicine and Bachelor of Surgery across the University of Otago's three schools; in Christchurch, Dunedin and Wellington.

Tim, who is known for driving innovation in training Otago medical students, says he feels really "chuffed" at receiving the award.

Above: Professor Tim Wilkinson

Consultant Haematologist and Chair of the Canterbury Medical Staff Association, Ruth Spearing, says Canterbury, and the University of Otago are very lucky to have someone of Tim's calibre".

Association Vice-President Professor Ben Canny, who is

Head of the School of Medicine at the University of Tasmania, says the award recognises Tim's "incredible work" as a health education leader and his outstanding work in both curriculum development and research on medical training.

Tim worked for more than 20 years as a geriatrician and teacher of medical students studying gerontology, before moving into developing medical curriculum.

"When you treat one patient you are helping just them but when you teach students to better treat and interact with patients, you help a larger group and are influencing what students are learning. That can make a big difference to many more patients in hospitals and the community."

While the medical curriculum still focuses on medical science, communication, diagnosis and management skills, new technologies and approaches are improving student outcomes, he says.

That includes students visiting vulnerable populations to learn about topics such as sexual health, and a greater focus on professionalism, cultural awareness and quality interactions with clinical colleagues.

# **Canterbury Grand Round**

Friday 22 April 2016 – 12.15pm to 1.15pm, with lunch from 11.45am.

Venue: Rolleston Lecture Theatre

#### Speaker: Professor Ron Paterson, Ombudsman

"The Heart of Healthcare: Effective communication with patients and families."

We talk a lot about "patient-centred care" and "patient experience" in health care nowadays. The "right to effective communication" is affirmed in New Zealand's Code of Patients' Rights. Patients complain of a lack of information and information overload; of not being listened to; of the frustration of dealing with administrators; and of the right hand not knowing what the left hand is doing in the hospital system.

This talk will highlight some of the challenges of effective communication in health care and offer some pointers to what patients and families want.

#### Bonus: Maggie Meeks, Medical Specialist, Neonatal

We all recognise the importance of collaborative care between professions and departments. Maggie Meeks will take 10 minutes at the beginning of the Grand Round today to talk about the 2016 'HealthCare Team Challenge' which aims to help students develop their understanding of the roles of different professions.

Chair: Iain Ward

Video Conference set up in:

- » Burwood Meeting Room
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton

All staff and students welcome.

Talks will be available within two weeks on the intranet

Next Grand Round is on Friday 29 April 2016. Convenor: Dr R L Spearing, <u>ruth.spearing@cdhb.health.nz</u>



# A huge thank you to Ward 28, eObservation pioneers

A well-deserved morning tea was enjoyed by the staff of Ward 28 at Christchurch Hospital last month, as a thank you and to celebrate a successful trial that has paved the way for the wider implementation of eObs. Rollout to surgical wards and other inpatient areas at Christchurch Hospital is imminent.

Project sponsor, Executive Director of Nursing Mary Gordon is delighted to have reached this milestone for yet another innovative electronic clinical information system that will dramatically improve patient outcomes.

"This deployment of an eObs system is a first for Australasia and I am very grateful to Ward 28 and the eObservations clinical application team for making it possible. It takes a team with vision to see possibilities, coupled with the tenacity to see it through – and of course a great deal of patience and sheer hard work."

The ward received 20 iPad Mini 2s, configured to access the Patientrack software. The system was also accessible from PCs via the clinical applications menu on the Canterbury DHB intranet.

Having received training from the implementation team, including ongoing support when needed, Ward 28 staff made and entered over 8,700 observation sets into Patientrack over two months. For the period of the trial Ward 28 staff provided valuable feedback, resulting in many changes to the base system and infrastructure that made eObs fit for purpose.

Staff adopted the technology well. During the trial Early Warning Scores (EWS) were completed 100 percent of the time, compared to 71.3% using the old paper-based system and were 100 percent accurate compared to 67.1% pre-trial. Identification of abnormal vital signs (blood pressure, respiration, pulse etc.) through Early Warning Score systems supports early detection and prompts clinical teams to review the patient's care plan to provide safer, more timely care.

The first ward trial phase of this project provided a model to support the ongoing training and technology changes for both patients and clinical users. The result is a stable and useable base for improved patient surveillance that will support the rollout to the rest of our hospital environments.

This comment was made by clinicians involved in the trial:

"From my perspective it has been a great initiative to be involved in. The eObs team has been accessible, supported our ward and helped with trouble-shooting where needed."

#### Clinical Nurse Specialist Trudy Keer-keer

Other general feedback commented on how easy it was to enter observations and access information afterwards, that trends were easier to see and changes to the Early Warning Score are highlighted. There were also a number of comments on how it assists in time management (prioritisation, and no chasing sets of notes), and how it would cut down on the amount of paper records and the need to store them.



Above: Ward 28 staff.



Above: Megan and Daniel.



Above: EObs team.

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The planning for the roll out to the surgical cluster is well under way and is aligned with the Christchurch campus Releasing Time to Care programme (RT2C). RT2C will assist with maintenance of business processes and the creation of a ward-based champion network as the project team moves from ward to ward.

#### **About eObservations**

The eObservations project's aim is to enable earlier detection of deterioration in a patient's condition while in hospital. Importantly, because whole care teams have access to a single set of consistent information, early detection no longer depends on the vigilance of a single person. Human error that was always a significant flaw with paper-based systems is also dramatically reduced.

Improved early recognition, assessment and appropriate treatment planning help prevent the pain, distress and increased risk that occurs when physiological deterioration is not picked up soon enough. It also reduces the mortality rate, reduces the number of unexpected in-hospital cardiac and respiratory arrests, and avoids unnecessary admissions to ICU.

# Nurse Practitioner role will enable more effective care

Ashburton Nurse Practitioner (NP) Sheryl Haywood is thrilled about her new role and the benefits it will provide to the older population.

"It's exciting, I can't wait. I have been working towards this role for many years, and over the last two years during my NP internship, I have had in-depth and supervised clinical training to further develop my skills and knowledge.

It's been a long road, but will be very much worth it and enable me to provide more effective and efficient delivery of care to patients," she says.

Sheryl passed the last part of her training – a panel interview with the Nursing Council – in February and celebrated with a morning tea at Ashburton Hospital last month. She is the only NP in the Ashburton region working in older persons health.

A Registered Nurse for 25 years, Sheryl says her NP role is likely to be based at Ashburton Hospital but her work will be mainly in the community. Complex health needs of the frail elderly require thorough comprehensive review and care co-ordination.

Sheryl will continue to work collaboratively, but will also work autonomously to improve the health of older people. As an NP, Sheryl can now complete an episode of care including ordering investigations, diagnosing medical conditions and prescribing medication.

"It will be much better for the patient. I can diagnose and provide treatment at the time of consult if appropriate."



Above: Nurse Practitioner, Sheryl Haywood, centre, (holding bouquet) at a morning tea to celebrate her new role.



# Collabor8 – growing success stories from the roots up

It was my privilege recently to be invited to a Collabor8 sharing session, and to hear people's passion for doing things better, first hand. This is only a personal view of course, but it doesn't get more 'real' than this – real people, real solutions, and real innovation at work. Awesome is an overused word these days, but just sometimes it's the right one.

- Mick O'Donnell, Senior Communications Advisor

Collabor8, for anyone who doesn't know, is a two day programme (with a gap of approximately three months between each day) that since May 2009, has tapped into the creative best of no fewer than 700 people.

The purpose of Collabor8 is to introduce staff to some of the principles and tools of lean thinking, influencing change, culture and leadership, patient safety, personality styles and effective communication. It gives participants the skills, confidence and 'permission' to carry out an improvement initiative in their work area.

There were six great ideas presented, and I mean no disrespect to the other four in picking up on just two of them –one for this week and one for next. A shorter story is often a better story.

This first example comes from Michelle Cole, a nurse who now works with the Schools-based Mental Health Programme. Her idea was about sharing skills and connecting people, something she cares deeply about. This is how she shared her idea:

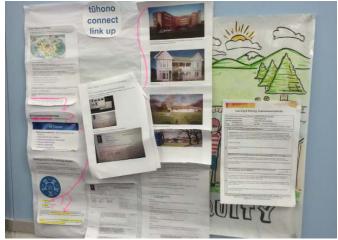
Within child mental health services we demonstrate values around manaakitanga (care and respect for others), but we're not so good when it comes to getting to know one another and creating a sense of belonging (whanaungtanga).

Many of us suffer from an unhealthy dose of 'siloitis'. This isn't purely a geographic issue, even when we are in a room together we cluster around who and what we already know.

I was talking about this with Matt Elliott, Webmaster and he told me about an underused SharePoint intranet tool called a



Above: Michelle Cole presenting her Collabor8 idea.



Above: Michelle's poster.

MySite Profile. Adding some profile information allows you to identify and share your skills and expertise with other members of your team, and vice versa. So if you are looking for someone with knowledge of sleep in children, mindfulness or any other specialism, you can easily search the profiles and find the right person to work with.

I have six people signed up so far and we have enjoyed the process of discovering those sub-specialties, and connecting 'by stealth' as we did.

The main reason Michelle's idea stood out for me is that we often get great ideas in terms of working more efficiently and improving processes, ideas about developing better working relationships are rarer. If that also appeals to you, why not investigate adding your own Profile to your MySite and improve your own connectedness and work relationships.

To create your own MySite Profile so that your colleagues can see your knowledge, expertise and responsibilities...

- » Go to http://mysites/Person.aspx, click on "Edit my Profile".
- » We suggest that as a starter you could fill out the About me, Picture, Ask Me About, Assistant, Past Projects and Skills fields.
- » Click Save and Close to save your new profile.
- » To search for people with specific skills or responsibilities...
- » Type in a name or keyword into the intranet search box
- » Select "People" from the dropdown menu that normally says "All content"
- » Click the magnifying glass to run a search.



# Volunteers bring blooming joy

The power of plants and the joy a garden brings can never be underestimated, something a former patient from the Burwood Spinal Unit can attest to.

Burwood helped me walk again, says Rebecca Keegan. "I spent time here being wheeled around and being in the garden was very therapeutic."

Rebecca has joined a team of volunteers who meet weekly to tend the gardens around Burwood Hospital, but mainly outside the Spinal Unit. There's always lots to do, whether it's weeding, pruning or cleaning out beds in preparation for new season plantings.

Allan Bilbrough wanted to give back to the CDHB after having a heart attack and needing multiple bypass surgery. "The CDHB saved my life, so I wanted to do something for them. It's nice to know that the gardens make people feel better."

For Kate Packwood, even if it's just weeding a little patch of garden, she knows it still makes a difference.

"This is helping people when they are at their most vulnerable," she says. "It's so rewarding to be able to do something, no matter how little it may seem."

Not being a gardener isn't a handicap either says Mike McQuillan. "There's no expectation except to keep things looking nice. It's a very pleasant way to spend a morning and it feels good to know you're doing something for the spinal patients who spend a long time here."

Volunteer Coordinator Rachael Walker is full of praise for the group of gardening volunteers who cheerfully tend the gardens, rain or shine. "The benefits of the gardens to the patients and their rehabilitation are huge," she says. "Our volunteers are such an important group and we really appreciate the work they do."

All the volunteers say they enjoy the mornings they spend in the gardens at Burwood that are filled with friendly chit-chat and banter, as well as the lively bird-song that fills the air thanks to all the native plants and colourful flora.

"You can't underestimate the positive influence of attractive gardens and grounds on people who visit the hospital. It creates positive thoughts about the place before you even get inside," says Lindsay Clement, the gardener at The Princess Margaret Hospital.

Below: Burwood volunteer gardeners from left Allan Bilbrough, Kate Packwood, Rebecca Keegan and Mike McQuillan.



### We need more volunteers at Burwood

The exciting developments at Burwood mean we need more volunteers to help out. There's a whole variety of different things you, a friend or family member can do to support our patients and staff.

We are currently looking for a Meet and Greet volunteer and a Volunteer Shop assistant.

For more information about becoming a volunteer at Burwood Hospital phone 383 9499 or email <u>Burwoodvolunteers@gmail.com</u>.

# April Falls Month - Featuring the new Fracture Liaison Service

The Fracture Liaison Service is a new service to Canterbury DHB that started in February this year.

The service identifies patients aged 50 years and over who suffer from a fragility fracture, introducing appropriate therapy, with the aim of preventing further fractures. A fragility fracture is defined as a fracture resulting from low trauma, such as a fall.

The most common sites for fragility fractures are the hip, wrist, humerus, pelvis and spine.

The Fracture Liaison Service team consists of four people:

- » Dr Nigel Gilchrist, Specialist Physician and Clinical Lead for the Fracture Liaison Service
- » Ken Stewart, CDHB Falls Prevention Clinical Lead and Fracture Liaison Service
- » Kate Gibb, Director of Nursing for Environmental Health
- » Lynda Te Momo, Fracture Liaison Clinical Nurse Specialist

Fracture Liaison Services are new in New Zealand but have been established overseas for a number of years and have resulted in significant improvements and cost savings in secondary preventative care. Secondary preventative care includes both osteoporosis assessment and management, and intervention to prevent future falls.

(Read more about Lynda later in the update)

# **Celebrating our Administrative Professionals**

Wednesday, 20 April is Administrative Professionals Day. It's celebrated in many countries including New Zealand to recognise the work of administrative professionals who keep things working, moving and organised ... our booking administrators, ward clerks, receptionists, telephonists, secretaries, medical secretaries, clinical coders, clinical records officers, personal assistants, data entry operators and a raft of other administrative roles and functions.

Please take a moment to acknowledge the work of your admin professional(s) who keep our health system working day-in and day-out.

CDHB formally celebrates and acknowledges our administrative workforce through professional development opportunities such as our annual admin workshop series. This year's admin workshops are scheduled for 16/17 August and more information will be coming out to people closer to the event.



**CEO UPDATE** 

## Nurses undertaking Ara (formerly called CPIT) courses in Semester 2, 2016

Applications for funding for nurses undertaking Ara courses in Semester 2, 2016 are now open. Please apply using the on-line application form:

Ara Funding application form

Applications close on Friday 29 April, 2016

Further information is available from Jenny Gardner on jenny.gardner@cdhb.health.nz

### **Registered Nurses undertaking Postgraduate nursing study in Semester 2, 2016**

Applications are now open for HWNZ funded places in Semester 2, 2016. The link to the online application form is: <u>CDHB</u> <u>Online Application Form, Semester 2 2016 - HWNZ funding</u>

The link, and further information, is also available on the Postgraduate Nursing Education website: <u>Postgraduate Nursing</u><u>Education</u>

Closing date is Friday 29 April 2016. Any queries should be directed to Margaret Bidois, Administrator, PG Nursing Education on 68680 or <u>margaret.bidois@cdhb.health.nz</u> or to Jenny Gardner, Nurse Coordinator, PG Nursing Education on 68679 or <u>jenny.gardner@cdhb.health.nz</u>





As it's April Falls month we are featuring someone whose work relates to fall prevention.

#### What does your job involve?

Identifying patients aged 50 years and over who have suffered a fragility fracture, assessing their risk for osteoporosis and introducing appropriate treatment to prevent future fractures. Fragility fractures result from low trauma such as a fall and are common in the hip, wrist, humerus, pelvis and spine.

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

I had been working in orthopaedics for a long time and was interested in working more in preventative care and public education so this job is ideal for me.

#### What do you like about it?

I like the autonomy it gives me and I enjoy working across a wider area both in hospitals and the community. Hip fractures can be so debilitating in the elderly as well as costly to Canterbury DHB. With our elderly population numbers increasing it is important to keep people well, living in their own homes for as long as possible.

#### What are the challenging bits?

Setting up the Fracture Liaison Service from scratch and learning all the different computer applications.

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

I admire the three other members of my team, Dr Nigel Gilchrist, Kate Gibb and Ken Stewart. They have provided me with endless support & encouragement.

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

I feel that as a Registered Nurse (RN) I have always endeavoured to uphold these values so in my new role as Fracture Liaison Clinical Nurse Specialist not only am I representing CDHB but the good name of RNs in general so these values are just as important as in my previous role.

# The last book I read was...

Odd Thomas, by Dean Koontz

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

I must be getting old but with all the unrest around the world I am happy exploring our own beautiful country, ideally in a campervan with my lovely husband.

# My ultimate Sunday would involve...

Being in charge of the TV remote control and watching whatever I wanted.

#### One food I really dislike is... Fish.

#### My favourite music is...

I like a bit of mix of everything but nothing too head bangerish.

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

### PDRP New Assessor Training postponed

Due to minimal numbers we have had to postpone the PDRP New Assessor Training session scheduled for Tuesday 17 and Wednesday 18 May 2016.

The New Assessor Training session will now be held on Wednesday 24 and Thursday 25 August 2016.

#### PDRP New Assessor Training

The PDRP New Assessor Training session is a two day course which is facilitated by the Open Polytechnic and will be held at TPMH. We are now calling for nominations for new assessors for PDRP.

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 <u>PDRP Intranet site</u>.

We look forward to receiving nominations from interested parties



our health system





### **Social Work Team Leader**

#### Permanent/Full Time

Social Work Services is looking for an experienced health Social Worker with a commitment to providing quality leadership to the Child Health, NICU, and Women's Health Team.

The successful applicant must have a working knowledge of Child Care and Protection including a comprehensive knowledge of the Vulnerable Children's Act 2014 and Child and Young Persons and their Families Act 1989. Practice experience working with people who have been subjected to domestic violence and general crisis management is essential. Practice knowledge and skills with all aspects of women's health is desirable.

You must be a qualified Social Worker with New Zealand Registration and/or ANZASW with competency. You'll need excellent communication and interpersonal skills to communicate effectively with all health providers; colleagues; team members and leadership. As part of a leadership team, you will be working together to ensure the best service delivery and patient care. Ideally you will bring leadership and management experience as well as excellent clinical and supervisory experience. You will also be responsible for a clinical caseload to compliment your leadership skills.

Enquiries should be directed to Heather Ewing, Recruitment Specialist on email <u>heather.ewing@cdhb.health.nz</u>.

Applications are only accepted online so please <u>click here</u> to send us your CV and covering letter today.

Location: Christchurch

Closing date: 26 April 2016

# **Physiotherapist Team Leader** (Cardiorespiratory and Surgical)

#### Fixed Term/Contract/Full Time

You'll be co-ordinating and providing leadership for a team working with patients across the clinical specialties in General Surgery, Intensive Care, Cardiothoracic Surgery, Cardiology, and Medical respiratory. These services have both inpatient, outpatient and community elements.

This position is a full time, fixed term cover for parental leave from 8 April, 2016 – 17 August, 2016.

This is your chance to develop and use leadership skills in a health system undergoing rapid transformation. Your skills will be ensuring the ongoing ability of these services to provide optimal care in a fast paced, tertiary care environment.

As an Allied Health Clinical Team Leader you'll be responsible for the daily co-ordination and operational management of a team including clinical supervision, teaching, training and facilitating professional development for your team. Along with the Clinical Manager (Physiotherapy) you will be part of the leadership team supporting, guiding, and directing the Physiotherapy Service on the Christchurch Hospital Campus. You will enjoy the opportunity to be involved with the development and maintenance of policies and procedures and take the chance to contribute at a multidisciplinary level on quality, service and Clinical Governance committees.

As an experienced Physiotherapist, you will have current Registration with the New Zealand Physiotherapy Board, along with a current annual practising certificate.

This is a rare and exciting chance to combine both clinical skills and management interest.

Enquiries should be directed to Heather Ewing, Recruitment Specialist on email <u>heather.ewing@cdhb.health.nz</u>.

Applications are only accepted online so please <u>click here</u> and select the "Apply Now" button below to send us your CV and covering letter today!

Location: Christchurch

Closing date: 26 April 2016

## **Director of Nursing**

Canterbury District Health Board currently has the position of Director of Nursing - Ashburton & Rural Health Services available. This position is based in Ashburton but provides nursing leadership and support to all of the Rural facilities.

Ashburton Hospital is a secondary level acute medical hospital that provides exceptional healthcare in a friendly setting. It provides a comprehensive range of inpatient, day patient, Outpatient and Community based services. There are 74 beds and annually admits around 5000 patients. Redevelopment is currently underway including a new theatre/procedure room and Acute Assessment Unit. Ashburton Hospital is a key partner in the Ashburton Service Level Alliance. This position provides critical support to future integration opportunities with primary and community care providers.

We are looking for a self-driven and experienced nursing leader to oversee the day-to-day management of our nursing services, Ashburton Hospital and provide leadership to nurses working across our rural facilities. The role of Director of Nursing is a highly valued leadership position within the Canterbury Health System and the successful candidate will join a team of dynamic nursing leaders who are committed to the vision of achieving an integrated health system for the people of Canterbury.

Key responsibilities in this vital role for our Nursing service are:

- » To provide effective professional leadership and operational management of nurses and midwives for Ashburton Hospital
- » To provide professional nursing support and advice to Nurse Managers at Rural Hospitals
- » To ensure consistent standard of clinical expertise
- » Provide effective leadership in quality and clinical governance
- » Provision and support of educational framework for the nursing workforce

» Article continues on page 17

#### » Article continued from page 16

>

» To provide expert nursing advice, direction and professional nursing leadership to the operational management teams of both Ashburton and Rural health services.

This position requires a supportive leader passionate about engaging and developing the nursing workforce. Key to your success in this role is your ability to build and manage significant internal and external relationships. Your experience will include the ability to think strategically and communicate that vision with clarity and purpose coupled with relevant change management experience.

It is essential you are a senior nurse with the relevant post graduate qualifications.

To apply online and to find the Statement of Accountability for this role please go to the <u>CDHB Careers website</u>, or for a confidential discussion contact Kathryn Clark, Recruitment Team Leader on 0212470471.

# Great learning opportunities coming up next month



#### Interpersonal Dynamics for Leaders – Wednesday 11 – Friday 13 May 2016

#### Enrolments close Wednesday 20 April.

Ian Brooks' ever popular 3 day course on Interpersonal Dynamics for Leaders – understand your own personality and how this influences your communication; learn more about how you come across to others; improve your ability to have 'courageous conversations'; become a more effective leader.

Click here to enrol: Interpersonal Dynamics for Leaders

#### Broadly Speaking – Wednesdays 11 and 25 May

How might you influence those factors both within and beyond the health sector that impact day to day on the health of populations? Broadly Speaking will encourage you to explore how you can make a difference to the health of those in our communities when you focus on preventing disease and not just its treatment.

For more information click here: Broadly Speaking

#### Courageous Workplace Conversations (updated) – Wednesday 25 May

We all find it difficult to have conversations with people whose behaviour or attitudes we find challenging. Have you heard these words, "I wish someone would say something", then have a think - as you are someone and you can say something. Courageous Workplace Conversations will help you gain the skills and knowledge to feel comfortable and confident having a courageous conversations with the people you work with. Click here to enrol: Courageous Workplace Conversations

#### Practical Project Management – Monday 16 – Tuesday 17 May and Friday 1 July

Our two day Practical Project Management workshop covers all you need to know about practical, appropriately applied project management. You'll learn about CDHB processes, tools and techniques most applicable to the projects you are currently working on and receive templates to guide your own project activities.

Click to enrol: Practical Project Management

#### Elev8 – Friday 20 May

This one day programme introduces you to principles of the CDHB Process for Improvement. This is an applied science that emphasises rapid cycle improvement through small scale

testing in order to generate knowledge about what changes in what context produce improvements. Elev8 aims to start focussed improvement efforts on a small scale and leveraging the generated learning to plan

for spread and scale up. The day covers a combination of expert subject knowledge with improvement methods, the Model for Improvement, drawing on clinical science, systems theory, the human side of change, and measurement.

Click to enrol: Elev8

#### Effective Communication – Friday 27 May

Interested in becoming more effective in your communication in order to achieve better outcomes in the workplace? Effective Communication covers the fundamentals of interpersonal communication – you'll practice specific communication skills, examine roadblocks to productive communication, and

become more self-aware about how our interactions are perceived by others.

Click here for more info: Effective Communication

#### Collabor8 – Thursday 2 June or Friday 3 June

An introduction to the principles of Lean Thinking, influencing change culture, & leadership, patient safety, personality styles & effective communication.

Click to enrol: Collabor8

Courses already full for this and the following month:

Tikanga Maori, Stepping up to Leadership

Enrol now so you don't miss out on courses coming up in the future.

Take a look at all our courses on our <u>Learning and</u> <u>Development Intranet site</u>

or alternatively if you are outside of the CDHB, visit www.healthleadership.org.nz

For enquires please contact the Learning and Development team on

Phone: 03 337 7807

Email: learninganddevelopment@cdhb.health.nz



# Staff Wellbeing Programme: NEW Wellbeing Workshops : CDHB Golfers – details of next game

# CDHB Golfers – next game at McLean's Island 15 May at 10.00am

Anyone welcome. Contact <u>Jamie.Browne@cdhb.health.nz</u> for more information.

# Wellbeing workshops – only a few places left in April workshops

- 1 New strengths based workshop available to Managers / Supervisors. <u>Click here</u> for more information and <u>click here</u> to register.
- 2 We are also running another series of the very popular Staff Wellbeing Workshops – this is the same workshop offered in 2014 / 2015. <u>Click here</u> for more information and <u>click here</u> to register – available to all staff.

# Residential Advisory Service (RAS) – FREE legal advice for EQC/insurance issues

This service is currently only funded until the end of the year, so contact them now if you'd like FREE independent legal advice.

Click here for more information.

Last chance to register - One for the Blokes: Men's Mental Health workshop – CHCH Campus and Rangiora Due to the success of these workshops over the past two years we are offering another two workshops in April.

Click here for more information and click here to register.

#### Over 30 classes a week across main DHB sites – yoga, Zumba, Pilates, mindfulness

Updated timetables available on the <u>Staff Wellbeing</u> <u>Programme intranet page.</u>

#### Free counselling available to all staff

Free and confidential counselling is available to all staff – for work or personal issues. <u>Click here</u> for more information.



Andy Hearn Staff Wellbeing Coordinator Canterbury and West Coast DHB Phone: 03 337 7394 | Ext: 66394 | Mobile: 027 218 4924 andy.hearn@cdhb.health.nz

# Wellbeing Workshops

#### For All Canterbury District Health Board Staff

To support your wellbeing, the CDHB Staff Wellbeing Programme and MHERC are continuing to run a series of 2.5 hour wellbeing workshops.

You play a crucial role in the delivery of high quality care to the Canterbury community. It is more important than ever to take time to focus on your own wellbeing.

We are running a number of workshops in 2016 encouraging you to put your wellbeing first. Evidence suggests that by doing this, those around you - your family and friends, your colleagues and patients will also benefit.

2.5 hours to focus on YOUR wellbeing!

#### Workshop Overview:

- The importance of wellbeing; psychological and emotional effects
   Learn about stress responses and how to cope with
   stressful environments
- Understand the science and practice of applications of self-care
   Gain skills and take ownership of tools for increasing your own
- and others' wellbeing • Enhance positive relationships and social connections
- Improve your health and wellbeing: 5 Ways to Wellbeing, Staff Wellbeing Programme

#### Workshop Details:

- All workshops run for 2.5 hours, including refreshments
- Facilitated by Alison Ogier-Price MSc Psyc, B.Comm, BA Hons, C.AT. MNZAPP
- For dates and to register for a workshop click here

Give KEEP LEARNING ACTIVE TAKE NOTICE

ALL STAFF

#### Canterbury District Health Board

Te Poari Hauora ö Waltaha



#### For more information contact:

Lee Tuki Lee. Tuki@cdhb.health.nz 027 689 0285 Andy Hearn Andy.Hearn@cdhb.health.nz 027 218 4924

# Strengths Workshops

NEW for 2016 - Strengths Workshops for Managers/Supervisors

In the current Christchurch environment it is more important than ever that we take time to focus on our own wellbeing.

With this in mind the CDHB Staff Wellbeing Programme and MHERC are running a NEW series of 2.6 hour workshops focusing on 'Hamessing our Strengthe'.

#### On completing the workshop staff will have:

 A theoretical understanding of the strengths based framework.
 Tools to enable a greater understanding of themselves and others which can help improve personal wellbeing and interactions with others, both at home and in the workplace.

This NEW workshop is designed to extend the foundation of positive mental and emotional health developed in the Wellbeing Workshops run throughout 2014 and 2015. Managera/Supervisors are therefore encouraged to attend a <u>Wellbeing Workshop</u> before attending the NEW Strengthe Based workshop (although it is not a requirement to do so).

#### Workshop Overview:

- Increase understanding of character strengths as personal resources
   Identify and measure personal strengths
- Identity and measure personal strengths
   Experience strengths-based conversations
- Engage strengths in everyday life
- · Recraft tasks to increase wellbeing

#### Workshop Details:

- All workshops run for 2.6 hours, including refreshments
   Facilitated by Alison Ogier-Price MSc Psyc, B.Comm,
   BA Hons, C.AT, MNZAPP
- · For dates and to register for a workshop click here

Creativity HONESTY Fairness Teamwork PERSEVERANCE Hape JUDGEMENT Prodence Humow, LEADERSHIP BRAVERY GRATITUDE Kindness HUmility Zest Forgiveness Perspective Cuniosity

SUPERVISORS

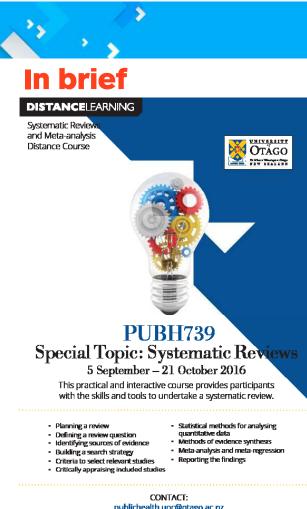
#### Canterbury District Health Board Te Poari Hauora ö Waltaha



For more information contact: Lee Tuki Lee Tuki Lee Tuki @cdhb.health.nz 027 689 0285 Andy Hearn Andy.Hearn@cdhb.health.nz 027 218 4924







#### publichealth.uoc@otago.ac.nz Tel +64.3 364 3602

### Lung disease vaccine trial

An exciting new Christchurch study is looking at whether a vaccine can reduce Respiratory Syncytial Virus (RSV) disease in newborn babies.

RSV causes infections of the lungs and respiratory tract. In adults and older, healthy children, the symptoms of respiratory syncytial virus are mild and typically mimic the common cold. However, infection with RSV can be severe in some cases, especially in premature babies and infants with underlying health conditions.

Most children and adults recover from the illness in one to two weeks but in young babies, infants born prematurely, or infants or adults who have chronic heart or lung problems, the virus may cause a more severe and sometimes lifethreatening infection that requires hospitalisation.

RSV can increase the chances of a child developing wheezing and asthma when they are older.

The RSV vaccine in pregnancy study is looking at whether an RSV vaccine given during the last trimester of pregnancy will provide protection against RSV disease in newborn babies.

Research Midwife, Di Leishman, who is co-ordinating the study in Canterbury, says this is an exciting study for Women's Health and Paediatric services.

"RSV accounts for a significant number of admissions to paediatric wards putting extra pressure on the hospital services during the winter season and potentially there are ongoing health issues for these babies and their whanau." Opportunity from adversity: Earthquake-driven innovations

The Canterbury earthquakes created many technical, operational and social challenges for businesses and service providers. Many of these challenges were resolved by innovative means, resulting in solutions that may not have emerged if disaster had not struck.

Presenters, including Fulton Hogan, Fletcher Construction, Canterbury District Health Board, Spark and the Lyttelton Port Company, will describe their challenges, their responses and how the experience strengthened their ability to flourish and grow.

Date: Wednesday 11 May 2016

Time: 8:45am - 12.30pm

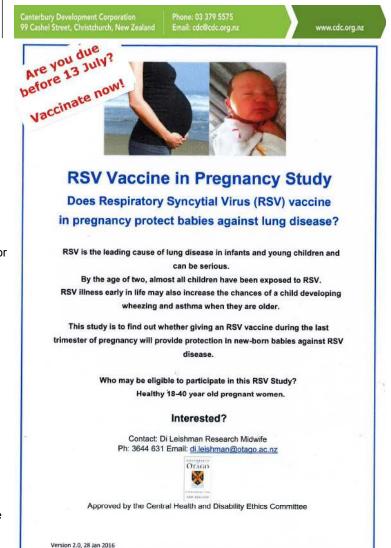
Registrations open at 8.15am and lunch is served at 12.30pm

Venue: Rydges Hotel Latimer, 30 Latimer Square, Christchurch, 8011

RSVP: Places are limited, reserve your seat here

Registrations close on Wednesday 4 May 2016

We look forward to seeing you there!





# Making something from (almost) nothing in the ICU. Public lecture by Professor Geoff Shaw

You are invited to the University of Otago, Christchurch's final public health lecture for 2016.

Wednesday 20 April, 7 - 8pm in the Rolleston Lecture Theatre.

There is a wealth of technology and devices in intensive care units. But while we can use devices to gather a wealth of data, we are no more able to aggregate and utilise this data to benefit patients than we were 20 years ago.

If the question (and challenge) is how to get the most out of this available patient data, the answer is through computer modelling.

Computer models of physiology provide not merely a research toy or tool, but the means to aggregate large amounts of data into clear physiological pictures of patient condition that can evolve in real-time as the patient evolves. This enables clinicians to customise care– making the greatest use of data, which is currently under-utilised.

The Bio-engineering Research Group has developed better systems to control glucose levels in the critically ill by providing the greatest use from what is just about the world's oldest medical sensor. In addition, their methods are being extended into the management of mechanical ventilation and cardiovascular resuscitation where 'useless' catheter data is turned into real-time stroke volume to titrate management.

The age of the ad-hoc paper protocol that fits every patient is ending; the age of computerised and customised care is beginning.

The Rolleston Lecture Theatre is on the ground floor of the University of Otago, Christchurch's building at 2 Riccarton Ave, on the Christchurch Hospital campus.

No booking required. Queries to kim.thomas@otago.ac.nz

# Harcourts CANCER SOCIETY BALL 2016



# SAT / 18 JUNE

#### TICKETS ON SALE NOW AT CANCERSOCIETYBALL.CO.NZ

() @ #CANCERSOCIETYBALL16

- . . . . . . . . . .

# **Cancer Society Ball**

After raising over \$120,000 at last year's record-breaking event, the Harcourts Cancer Society Ball is back for 2016 and promises to be another dazzling affair. Expect an evening of the finest local wine and food, a stunning list of auction items, great music, fashion and style. This is a chance for Christchurch to get together, light up the winter season, help contribute to an amazing cause and celebrate the changing face of this city.

Saturday 18 June 2016

6.30pm - Midnight

Air Force Museum, Wigram

Table of 10 - \$2 250

Tickets on sale now at cancersocietyball.co.nz.

Follow all of the excitement in the lead up to the Ball on Facebook (<u>fb.com/cancersocietyball</u>) and Instagram (@ cancersocietyball).

### Canterbury Collaborative Simulation Interest Group (CCSIG)

Date: 26 April 2016, 0700-0800hrs

Venue: Oncology Lecture Theatre Parkside, East, Christchurch Hospital

Registration fee: No charge

Draft Programme: Crisis Resource Management - Video presentation – Robert Simon, Director of Education, Centre for Medical Simulation, Boston USA.

WV201A - WREENW 12304 314



### Community Education Seminar

May 2016

#### BEHAVIOURS AND DEMENTIA

Increase your understanding about why certain behaviours may occur when a person has dementia and helpful ways to respond

Sally McPherson, a nurse specialist from The Princess Margaret Hospital, will discuss behaviours associated with dementia that may challenge others, causes of these behaviours, and appropriate strategies for responding.

There will be time for questions.

Everyone welcome

Date:	Tuesday 3 <sup>rd</sup> May	
Time:	10.30am – 12 noon	
Venue:	Alzheimers Canterbury 314 Worcester Street Linwood (Between Fitzgerald Ave & Stanmore Rd)	
314 Worcesler Sireet PO Box 32074 Christmach 8147		T 03 379 2500 E admin@atzanty.co.nz

Making life better for all people affected by dementia Kia piki te ora mo ngā tāngata mate pārewarewa



#### **Community Education Seminar**

May 2016 - Evening

#### For adult children of people with dementia

Find out more about the impact of dementia on families, including changing roles and managing conflicts, plus a word on genetic inheritance and dementia

Dr Matthew Croucher, Consultant Psychiatrist, Older Persons Mental Health, The Princess Margaret Hospital, will discuss these common queries that face us when a parent (or other close relative) develops a dementia whether the relative lives in Canterbury or elsewhere. There will be time for questions.

 Date:
 Wednesday 18<sup>th</sup> May 2016

 Time:
 7.30 pm – 9.00 pm

 Venue:
 Aspire Hall (across the courtyard from the Alzheimers Canterbury office) 314 Worcester Street

 Linwood
 (Between Fitzgerald Ave & Stammore Rd)

Making life better for all people affected by dementia Kia piki te ora mo ngā tāngata mate põrewarewa T 03 379 2590 E admin@atzanty.co.nz



investing Health

Free Legal Advice – Staff Wellbeing Programme

ARE YOU STUCK OR CONFUSED ABOUT YOUR INSURANCE / EQC MATTERS?

WOULD YOU BENEFIT FROM FREE LEGAL ADVICE?

The Residential Advisory Service (RAS) provides:

- free independent and impartial legal advice to help home owners navigate through their rebuild, repair or resettlement issues
- free technical advice on existing repair solutions (desk top review)
- free facilitated meetings with Insurers and other interested parties to try and
   achieve agreement on a way forward

The service is focussed on progressing issues between home owners, insurance companies and the Earthquake Commission.

RAS lawyers are available - FREE of charge

To learn more about this service visit https://advisory.org.nz/

To make an appointment to see an Independent RAS Advisor (lawyer) please email info@advisory.org.nz and they will telephone you back to arrange a suitable time. You can also call RAS directly on (03) 379 7027 or 0800 777 299.

Note that this service is only funded for a limited time – so if you have a protracted issue it would be best to contact the RAS as soon as possible.

Feel free to contact me if you have any questions.

Andy Hearn Staff Wellbeing Coordinator Canterbury and West Coast DHB Phone: 03 337 7394 | Ext: 66394 | Mobile: 027 218 4924 andy.hearn@cdhb.health.nz



For more information about other Staff Wellbeing Programme initiatives visit the Staff Wellbeing Programme intranet page http://cdhbintranet/corporate/HealthandSafety/SitePages/Staff%20Wellbeing.aspx



# Māori Public Health Symposium 2016

The end of post-colonialism and the future of Māori public health.

Nau mai haere mai!

The second annual Māori Public Health Symposium will be held in Wellington on Monday 2 May. The Symposium is designed to showcase the new wave of Māori public health experts, working in Aotearoa and overseas, and promises to be an outstanding event.

As we move beyond post-colonialism, what lies ahead for Māori public health and how can it be re-imagined? All of our presenters will explore new and emerging discourses, how they intersect with kaupapa Māori and what is required of a new wave of Māori thought leaders. This year's presenters approach the theme of the Symposium from international, national and regional perspectives and situate Māori discourse at the centre of a broader public health paradigm.

More information.

PO Box 32074



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Canterbury District Health Board

# CANTERBURY HOSPITALS FRIDAY CLINICAL MEETING



Affordable, quality health care. For everyone,

# Harkness Health Care Policy and Practice Fellowship 2016 Report-Back Seminar.

Presented by: Helen Mason M.B.A, R.N (2014-15 Fellow)

#### Friday 13 May 2016 • 12.15-1.15pm

Rolleston Lecture Theatre, Ground Floor, University of Otago, Christchurch Campus

#### 2 Riccarton Ave, Christchurch

The Commonwealth Fund, a U.S.-based foundation, brings promising mid-career professionals- government policymakers, academic researchers, clinical leaders, hospital and insurance managers, and journalists—from New Zealand to spend up to 12 months in the United States as a Harkness Fellow in Health Care Policy and Practice. Fellows are placed with mentors who are leading U.S. experts to study issues relevant to the Fund's mission to support a high performing health care system; cost containment; and other critical issues on the health policy agenda in both the U.S. and New Zealand. The Commonwealth Fund brings together the full class of Fellows—from Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, and the U.K.—throughout the year to participate in a series of high level policy briefings and leadership seminars with U.S. health care leaders.

Join this seminar to hear the project findings and highlights of the Fellowship year from the 2014-15 New Zealand Harkness Fellow, Helen Mason, who is currently Chief Executive of the Bay of Plenty District Health Board. Helen will share her principal findings and conclusions along with some of the highlights of her year as a Harkness Fellow based at the Institute for Healthcare Improvement, Cambridge, Massachusetts.

#### "Improving End-of-Life Care and Advance Care Planning"

The population older than 80 years of age is expected to grow almost 10 percent over the next 40 years for the OECD countries, including the United States and New Zealand. There is strong evidence that patients often do not get the care they want and / or need towards the end-of-life. Given this increasing cohort facing end-of-life, there is a strong imperative to identify options to improve quality towards the end-of-life.

The research objectives were to identify

- the strategic context/policy setting for embedding and supporting advance care planning,
- key success factors to implementation and whether there are existing systems which can be built on to support
  implementation.

All staff and students welcome

Convenor: Dr RL Spearing (email: <u>ruth.spearing@cdhb.health.nz</u>) Video Conference set up in: Burwood Meeting Room Meeting Room, Level 1 PMH Wakanui Room, Ashburton Administration Building, Hillmorton



The Challenge of Pathology : Challenging our Thinking now to prepare for the Future

28<sup>™</sup> - 29<sup>™</sup> JUNE RYDGES LATIMER, CHRISTCHURCH



# INVITATION

The team at Canterbury Health Laboratories would like to invite you to the 2016 Lab Meeting

Join us on the 28<sup>th</sup> & 29<sup>th</sup> June 2016 at Rydges Latimer Hotel, Christchurch

Canterbury Health Laboratories appreciate that all of the Health Sector are working hard to live within their means, so we are pleased to announce we have managed to hold the registration price for 2016.

To take advantage of early bird rates, your registration will be required by Friday 29th April.

#### FULL REGISTRATION

Early Bird \$425+GST\*

#### Full Rate \$475+GST

- Conference attendance both days
- Refreshments including lunch both days
- Networking drinks
- Networking dinner
- A list of delegates

#### PART REGISTRATION

Early Bird \$350+GST\*

#### Full Rate \$400+GST

- Conference attendance both days
- Refreshments including lunch both days
- Networking drinks
- A list of delegates

\*\*NEW FOR 2016\*\* is the Emerging Leader Registration, to align with the theme "Preparing for the Future",

designed to expose our future leaders to the valuable conversations encountered at The Lab Meeting. This Registration, including all the benefits of a full registration, is available for \$250 + GST for delegates who meet specific criteria:

- First time The Lab Meeting attendee
- Their local laboratory manager must also be attending
- Present a poster regarding a successful/innovative System Process Change

\*An early bird rate applies where payment is received by Friday 6th May 2016.

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