



## It's been another remarkable year – thanks for the part you played to make our health system a success

As another year rapidly comes to an end, I would like to thank everyone who has worked as part of the Canterbury Health System for consistently doing the right thing to ensure the people in our communities receive the support, care and treatment they need to maintain health and independence for as long as possible. I would also like to wish everyone a wonderful Christmas.

If I had to describe the year in a word, 'relentless' is probably the word that springs to mind. Our health system operated at, or beyond capacity much of the year and despite this our people still managed to go the extra mile to ensure targets and deadlines were met, new initiatives were introduced and quality improvements continued against a back-drop of busyness.

Canterbury was the only DHB to meet the immunisation target of 95 percent of all eight-month-old infants to be fully immunised. Canterbury achieved this for infants of all ethnicities and we met five out of six health targets.

Mana Ake – Stronger for Tomorrow was established in February and provides support for children aged 5 to 12 years old across Canterbury. It's now in 98 schools working to support teachers, families and whānau when children are experiencing ongoing issues that affect their wellbeing.

Two new facilities were completed and staff have moved into new purpose-designed facilities. Manawa, the Health Research and Education Facility, opened in July and is now home to a range of DHB nurse educators, clinical skills and the Professional Development Unit along with the Ara Institute of Canterbury nursing, midwifery and medical imaging students and staff.

Over three weekends at the end of October/early November around 400 staff from 27 services moved in to the new Christchurch Outpatients building.

A post-implementation review of the process to develop our new Burwood facilities took place recently, and feedback from the reviewers was brilliant. This is a new process led by Treasury designed to share learnings with other organisations undergoing major construction projects.

One thing that's constant in health is change. During the year we switched over to the new finance system, and more recently have introduced the South Island Patient Information Care System (SI PICs) to the Christchurch Hospital campus. While there are still a number of issues to sort before the system is operating at full capacity, introducing and bedding down these new systems have been massive undertakings by anyone's standards. Both projects have required teams of people working under significant pressure to educate and train staff and minimise the disruption to the end users.

New Zealand's Community HealthPathways is now in 43 health systems, responsible for the care of more than 25 million people throughout New Zealand, Australia and some Trusts in the National Health Service UK and Wales. Cortex, a mobile app developed in Canterbury through Via Innovation won the Health Innovation New Zealand technology award. Cortex creates a single set of electronic notes and enables tests to be ordered, tasks to be assigned and workflows to be created while still at the bedside.

Canterbury continues to run the largest trauma centre in New Zealand. Our Emergency Department has also been

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impacted by the post-quake increase in demand for mental health services, and they are now seeing more than double the number of people for crisis consultations than they were pre-quake – up from 700 a month, to 1500.

Specialist Mental Health Services have introduced new ways of working over the past five years to help manage the relentless increases in demand, and more changes are afoot in a bid to make work safer for everyone after a marked increase in assaults by patients towards staff. Almost all services have been operating at or beyond capacity sometime during the year.

Since April this year, the Canterbury District Health Board and Ministry of Health have been participating in a 'Way Forward' process to discuss the health requirements for Canterbury. This has been an important process to help achieve a shared view of the unique issues facing Canterbury and to agree a joined-up way forward as to how we address the issues. This has involved extensive engagement via a number of face-to-face conversations, including a daylong series of meetings held in Christchurch between the Director-General of Health, Ashley Bloomfield, and senior Canterbury DHB leaders.

Below are excerpts from a joint media statement on the Way Forward process, which was issued earlier this month:

*"The post-earthquake health challenges still affecting the Canterbury region are complex, substantial and far-reaching," says Dr Bloomfield. "Collectively we now have a greater understanding of the root causes and drivers of health challenges for the region, and how these may differ from other parts of the country.*

*"This has been a constructive process, and I am confident we now have a stronger, more cohesive platform to move forward on," says Dr Bloomfield.*

*Canterbury DHB chair, Dr John Wood, says apart from the much-improved lines of communication and commitment from everyone to nurture respectful relationships, a tangible positive outcome of the 'Way Forward' process is the commitment by all parties to progress the urgent work to confirm the capital requirements for the remainder of the Christchurch Hospital campus.*

*"This is important to resolve, as despite urgent repairs being carried out after the series of earthquakes in 2010 and 2011 there is still significant earthquake damage to DHB buildings and infrastructure.*

*"After the quakes Canterbury DHB lost 47,000 square metres of building space which had to be demolished and 14,000 rooms were damaged. Our current facility constraints remain an impediment.*

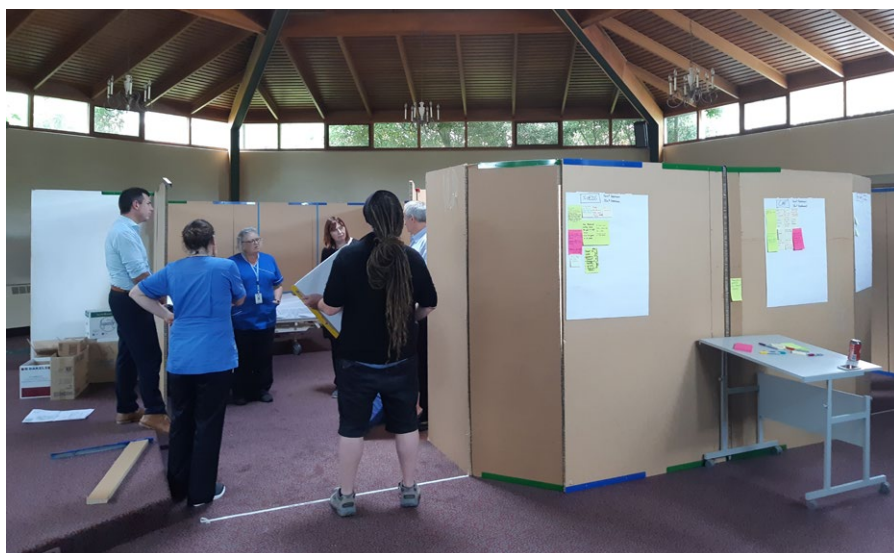
*"Working collaboratively to develop this business case is a substantive piece of work with a tight timeframe and I'm pleased that all parties have committed to progress this with urgency.*

*"It will be completed by April 2019 in time to be considered by the Capital Investment Committee. This united effort will provide a clear view of the significant capital required to redevelop the remainder of the Christchurch Hospital site. This will allow us to complete much-needed repairs and redevelopment. We envisage that the redevelopment work will start once the new \$483 million Acute Services Building is complete," says Dr Wood.*

Developing the business case is a significant job, and we are on track and working collaboratively with the Ministry of Health to see this completed before the middle of 2019. It's imperative we all have clarity on what the next stages of the development for the Christchurch campus will look like to enable the DHB to move forward with certainty and purpose.

The Christchurch Hospital Hagley (Acute Services Building) is progressing, and the detailed migration planning for the moves will begin early next year with a planned occupation of the new facility in September 2019.

We are also close to receiving final confirmation and approvals to commence the new facilities at Hillmorton that will house a range of Specialist Mental Health Services currently located on The Princess Margaret Hospital site: Mothers & Babies, Eating Disorders, Child & Youth inpatient services and the Assessment, Treatment & Rehabilitation unit (AT&R). This



Mock-up of bedrooms to test functionality for the new specialist mental health facility for services moving from The Princess Margaret Hospital

project will be in full swing from early 2019.

The Akaroa Health Centre will be complete mid-2019, and we're re-purposing part of the old Hagley Outpatients building, which will be transported to Rangiora early next year to increase the space available for clinicians providing care.

A highlight during the past year was achieving Bronze, then Silver Energy-Mark Certification from Enviro-Mark Solutions for our energy management work. Enviro-Mark also confirmed that Canterbury DHB is now a fully CEMARS-certified organisation. CEMARS stands for Certified Emissions Measurement And Reduction Scheme. The aim of the scheme is to properly and thoroughly calculate and then manage an organisation's carbon footprint. Over the past three years, the CEMARS measurements have shown that our carbon emissions are definitely moving in the right direction.

Canterbury DHB's emissions over the past year were 33 thousand tonnes of CO<sub>2</sub> equivalent, which is eight percent lower than the previous year's total of 36 thousand tonnes and an impressive 20 percent lower than the baseline total from three years ago – when CEMARS calculated that we emitted over 41 thousand tonnes of CO<sub>2</sub> equivalent. Part of this considerable reduction can be explained by the introduction of our new environmentally-friendly biomass boilers at Burwood Hospital in 2016, which replaced old coal-fired boilers that were long past their prime.

While there are still many challenges ahead, staff can be proud of their achievements over the past year. We continue to build on the proven strengths of our health system.

As I look back over this past year, I would like to thank our staff along with our alliance partners and the many community providers who are part of the wider Canterbury Health System. Your efforts to provide high quality treatment, care and support to our population are valued and appreciated.



An area has been set up within The Princess Margaret Hospital (TPMH) to create mock-ups of the bedrooms that will feature in the new facility for Specialist Mental Health Services which will be moving from TPMH. The new facility is to be built on the Hillmorton site. Staff have been providing feedback on the useability and layout of the mocked-up patient 'rooms'

Your efforts have made such a difference to those we support and provide services for in Canterbury and the Chatham Islands.

If you're taking time off over the holiday period, I wish you a happy time with people who are important to you. If you're working, thank you for ensuring care is available 24/7.

Meri Kirihimete

Haere ora, haere pai  
*Go with wellness, go with care*

**David Meates**  
**CEO Canterbury District Health Board**

If you have a story idea or want to provide feedback on *CEO Update* we would love to hear from you! Please email us at [communications@cdhb.health.nz](mailto:communications@cdhb.health.nz). Please note the deadline for story submissions is midday Thursday.

If you're a non-staff member and you want to subscribe to receive this newsletter every week please [subscribe here](#).



## A word from the Board

During my first full year of chairing the Board I have been so impressed by the calibre of the people I've met and the outcomes achieved by those working throughout the Canterbury Health System.

On behalf of all the Canterbury DHB Board members, I would like to thank each and every one of you for the great lengths you go to, to improve the health and wellbeing of people in Canterbury and the Chatham Islands.

Everyone's role is important, whether you're caring for patients or supporting those who do, and I hope you get some downtime over the holiday period to recharge your batteries, enjoy the great outdoors and most importantly, relax with friends and family.

A special thanks too, to those who put so much time and effort into preparing papers and presentations for the various Board and Advisory Committee meetings throughout the year.

Patient stories and sharing your experiences and challenges helps keep Board members informed of the realities of your roles and the responsibility you feel to put people at the heart of everything you do.

2019 is shaping up to be another challenging but exciting year, where a number of longer-term projects will come to life.

Season's greetings. I wish you a healthy and happy Christmas and all the very best for the New Year.

Dr John Wood  
Chair, Canterbury DHB

On behalf of your DHB Board members: Ta Mark Solomon, Barry Bragg, Sally Buck, Tracey Chambers, Dr Anna Crighton, Andrew Dickerson, Jo Kane, Aaron Keown, Chris Mene and David Morrell.



Canterbury DHB Chair Dr John Wood

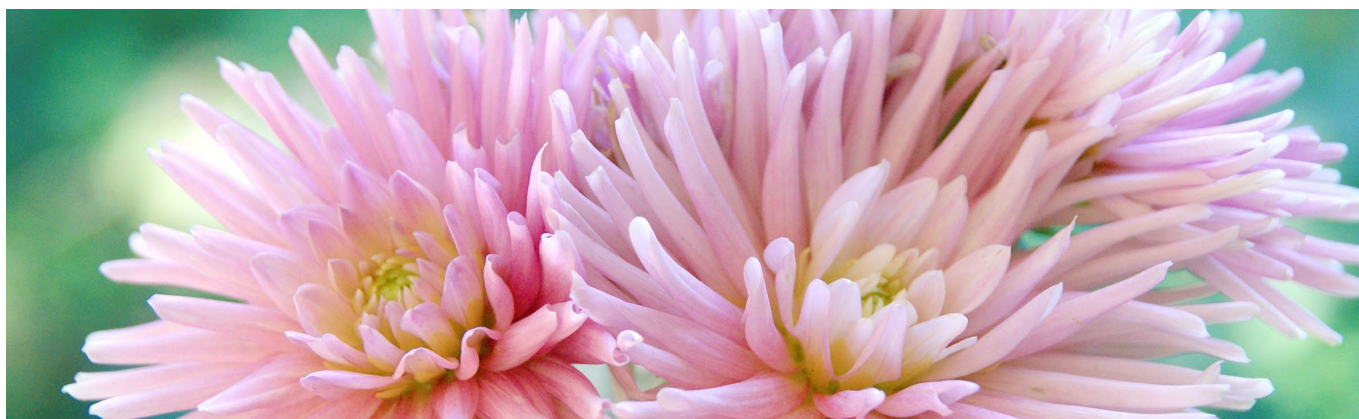
 An illustration of two healthcare professionals, a woman in a pink jacket and a man in a green scrub top, standing in front of a building labeled 'FAMILY DOCTORS' at night. The sky is dark with stars.
 

# CARE AROUND THE CLOCK

**Call your GP team 24/7 for health advice**  
If it's after-hours a nurse is available to give free health advice

Canterbury  
District Health Board  
Te Pōwhiri Hauora o Waiarua

#carearoundtheclock



## Bouquets

### **Beth Munro, Social Worker**

I am writing to provide some feedback about one of your staff members. Beth Munro is a social worker I had the fortune to meet when my mum had a haemorrhagic stroke and was admitted to Ward 24 in Christchurch Hospital. Having a 30-year background in health, I was surprised to find there was a discharge plan for Mum much earlier than I anticipated. I made a time to see Beth the next day and explained my concerns. I needn't have worried further. Beth's communication skills were excellent, and she reflected back my concerns and articulated her plan immediately. Being a stressed, concerned relative who came from Australia, my mind was immediately put at ease, and I had no doubt that Beth would not follow through. She genuinely cared, and I did not feel Mum was just another patient she had to deal with. Beth anticipated my needs and offered to write letters I required for my work, before I got around to asking her. Beth brought her manager to meet Mum, and her reason was that she thought Mum was 'lovely' and wanted to see her before she went to Burwood Hospital! Beth is bright, articulate, personable and friendly, and I would imagine she will go far in her career. She is a fantastic representative of your hospital and in this world where caring is so important, Beth Munro is a jewel in your system!

### **Area and hospital not specified**

Very good, nice people and great service.

### **Crisis resolution and South Adult Ward, Hillmorton Hospital**

Our family want to sincerely thank the staff at Crisis Resolution and South Adult Ward for their caring and professional support of our family member. We found the staff provide a valuable service within the limited resources available. Thank you.

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

I would like to say thank you to the nurses working in the Acute Observation Unit and a special mention to Leonie who was working when I was in the unit after giving birth to my daughter. I received great care.

### **Brittany, Respiratory Services, Christchurch Hospital**

Had an appointment this morning, the nurse/attendant was Brittany. It was a very good appointment. The greeting was excellent and my name was pronounced right during the appointment itself. Brittany explained the procedure, what was going to take place, and how the test would be conducted. Very good appointment, Brittany was excellent.

### **Ward 18, Christchurch Hospital**

A huge thank you to all staff. Extremely well looked after by lovely people.

### **Plastics, Christchurch Hospital**

Mr Klein and staff – thank you and thank you to Canterbury DHB for allowing my operation. The surgery has made such a change in my life. My health is better, I can walk now, and enjoy my life which I couldn't before. A big thank you. Words are not enough. The surgeons and staff are amazing people. There is always someone to talk to if needed and if they couldn't answer my questions they would find out for me. Thank you to every one again for what you have done to give me a normal life.

### **Plastic Surgery department, Burwood Hospital**

Please pass on my thanks to everyone I met at the unit when I attended this morning. I really couldn't have been more impressed by how friendly, helpful and professional they all were. Fantastic to know they are doing such a great job for the public and personally much appreciated.

### **Ward 24, Christchurch Hospital**

Dear Maree, Mary, Anne, Brooke, Sharyn, Rebecca, Temen, Jan, and the whole team at Ward 24. Thanks for taking care of [patient name] and making a hard week a little easier.

### **West Inpatient Unit**

The vegan meals have been amazing lately. Please pass on thanks to the kitchen who have made the extra

effort. The Friday meals have been particularly good, with a good amount of protein-based ingredients.

#### **William Egan, Christchurch Opioid Recovery Service**

I want to thank the staff, especially my case manager William. I have never been treated with such kindness and respect in 10 years. The ladies at the front desk are always kind. William, you have made a positive difference to my life.

#### **Deb Horran, North Crisis Resolution**

Spoke with a woman named Deb from Crisis Resolution. She was succinct, respectful, validating and explained everything in a way I could understand. In a quick phone call she seemed to understand me more than any other professional I've seen. Please let her know of my eternal gratitude.

#### **Shahid Mehmood, North Adult Community Psychiatric Service and North Inpatient Unit**

Consumer's father was exceptionally impressed by the quality of SMHS in Christchurch, outpatients and

inpatients, and in particular Dr Mehmood's handling of all aspects of the admission and review processes. He was very thankful for this as was the consumer.

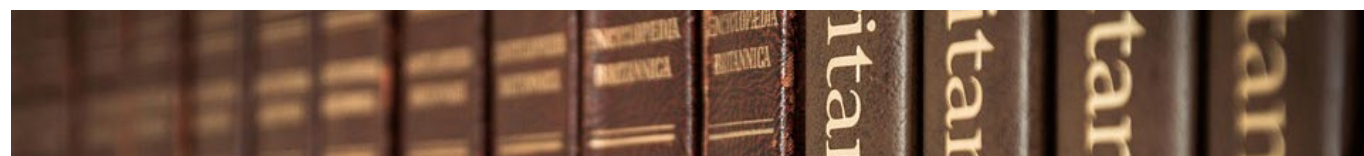
## *Big Shout Out*

#### **Ron, Gardener, Hillmorton Hospital**

Thank you, Ron, for taking care looking after the Melia tree in the outside courtyard of the Ferguson building at Hillmorton Hospital and our beautiful surrounds. It really helps maintain a peace and calm that comes from nature.

The area is a calm and peaceful place to sit for staff, consumers and whānau. The flowers have the most beautiful scent and this year it seems to be flowering better than ever. The tree has quite a lean, which is from when it was first planted. These trees are originally from Iraq. The little seeds are used in Rome to make rosary beads.

#carestartshere



## The Library

Browse some of the interesting health-related articles doing the rounds.

["Intellectual engagement and cognitive ability in later life \(the "use it or lose it" conjecture\): longitudinal, prospective study"](#)

- Using a series of cognitive test, this study showed that problem solving activities had the largest association with cognitive gains. It suggests that crosswords and Sudoku may only benefit older people depending on how much effort they put into such activities. From *British Medical Journal*, published online: 17 December 2018.

["Gut hormone increases response to food"](#) - This study looks at how the hunger hormone ghrelin can influence appetite and increase some people's response to food cues such as smells and images. With obesity rates increasing around the world, being able to identify how ghrelin works will help in the development of therapies to counteract it. From *Science Daily*, published online: 12 December 2018.

["Standards of Practice in Domestic and Family Violence Behaviour Change Programs in Australia and New Zealand"](#) - Researchers provide an overview of the different approaches to men's behaviour change programmes, and raises some of the issues that need to be considered in order to improve the consistency and quality of practice in this area. From *Australian and New Zealand Journal of Family Therapy*, published online: 26 October 2018.

If you want to submit content to **The Library** email [communications@cdhb.health.nz](mailto:communications@cdhb.health.nz).

To learn more about the real-life library for Canterbury DHB:

- > **Visit:** [www.otago.ac.nz/christchurch/library](http://www.otago.ac.nz/christchurch/library)
- > **Phone:** +64 3 364 0500
- > **Email:** [librarycml.uoc@otago.ac.nz](mailto:librarycml.uoc@otago.ac.nz).



## BETTER TOGETHER

### Destination Outpatients



We've been in the new Christchurch Outpatients building for a month now, so how is everyone liking it? Have a look at our [last video for the year to find out](#).

#### Outpatients opening dates and times over Christmas/ New Year

Over the holiday period, the Christchurch Outpatients will remain open with limited clinics. Dates and times for the various clinics as follows:

- › General Outpatients – Level 3 and 4: Open full day 24 December, closed 25 December – 2 January 2019, reopening Thursday 3 January.
- › Eye Outpatients – Level 2: Closed Public Holidays only.
- › Preadmission – Level 2: Closes end of day Friday 21 December, reopen Monday 7 January.
- › Haematology – Level 2: Closed Public Holidays only.
- › Dentistry – Level 1: Closed Public Holidays and weekends only.
- › Diabetes – Ground Floor: Closed Public Holidays only.
- › Blood Services – Ground Floor: Still to be confirmed.



#### Review the Central Preadmission Clinic (CPAC) discussion document

The following documents are on the Workforce Transition page of the Outpatients Intranet site.

#### [Decision Document – Central Preadmission roles](#)

As a result of a review into the workflows around the new Outpatients building, the following changes will be implemented:

- › 1.0 FTE CPAC Admissions Officer role will join the General Surgery Administration Team and report to the General Surgery Administration Team Leader and change physical location to Level 4 administration area in the Outpatients building
- › CPAC nursing team change of reporting line from Charge Nurse Manager DSU, DOSA, CPAC to the Christchurch Outpatients Nurse Manager (when appointed)
- › Arranged Admissions staff change of reporting line from the Charge Nurse Manager DSU, DOSA, CPAC to the Administration Team Leader, General Surgery and change physical location to Level 4 administration area in the Outpatients building
- › Service name change from Central Preadmission Clinic to Preoperative Assessment Service.

More information about when these changes will be implemented and what the impact will be is outlined in the documents.

There is also a description of the [Administrator Generic Position](#).



## How to catch a phish

Worldwide, approximately 14.5 billion scam (phishing) emails are sent every day.

They often appear to come from a reputable organisation, usually claiming your account has been compromised in some way and that, to fix it, all you need to do is hand over your personal details, passwords, or credit card numbers.

More often than not, you'll notice multiple spelling and grammatical errors in phishing emails. These tend to be purposeful in order to 'screen' people so scammers only have to deal with those who are more likely to be captured hook, line, and sinker by the scam. After all, if you're willing to overlook major errors in a message allegedly from a reputable, professional organisation, what else are you willing to overlook?

In saying this, some phish emails can appear grammatically and typographically perfect, adding to the scam's sophistication. Either way, there are a few simple things you can check to catch a phish:

Hover over the "From" display name to see what email address pops up (to hover, move your pointer over the information that you want to verify).

- › Inspect the email address carefully. We often see legitimate email addresses with an "m" replaced with an "rn", a lower case "L" switched out with the number "1" or a .com email reading as .co instead. Even the slightest change in an email address means the email is going somewhere else.
- › If the email is coming from someone you regularly communicate with, compare the new message against an old one. Does the display name and the email signature look the same for all emails?
- › Use the 'Forward' feature instead of the 'Reply'. With 'Forward' you will need to type in a known and trusted email address, whereas 'Reply' will respond directly to the phisher.

ISG recommends you don't use your Canterbury DHB email address for social media accounts

such as Facebook, Instagram or Twitter, nor for online competitions, as this is a common way for spammers to harvest legitimate email addresses for future phishing.

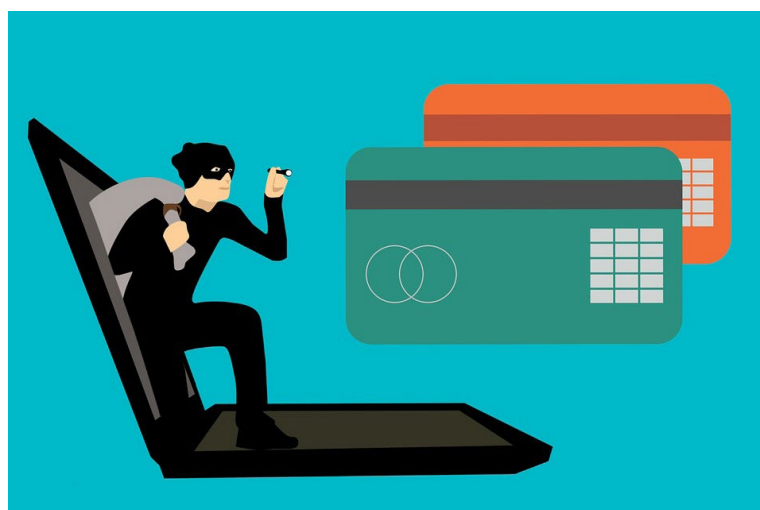


Canterbury DHB uses an anti-spam tool called Sophos. Statistics from incoming messages show that, in the first week of November, there were:

- › 750,000 blocked connections
- › 170,000 emails received and processed for Canterbury DHB staff
- › 6000 of these were classed as spam
- › 500 of these contained viruses.

While a high proportion of spam emails are blocked, ISG can't guarantee that you'll never receive a spam email again. If you're using your work email and you receive a message you feel is spam, you can report it with the "Report As Spam" button in Outlook, forwarding the email to [isspam@labs.sophos.com](mailto:isspam@labs.sophos.com), and then deleting it.

And that's how you catch a phish.





# Creating magical memories for families this Christmas

Families with chronically ill children were treated to some festive magic recently, courtesy of volunteer organisation A Christmas Wish, its team of photographers and editors, and Santa himself.

Through the magic of Photoshop, the families were transported from the Design Lab to far off lands and fantastical scenes. The shoot and photos were all generously done for free, providing families with a lifelong lasting memory to cherish.

"The day was so much fun and the family/whānau were incredibly grateful for the opportunity. So many of them commented that they had never had a whānau photo taken as they thought it would be too hard," says Manager of the Paediatric Outpatient/Daystay/Outreach Service Nicola Scott, who helped organise the day.

"The photographers and Santa made it so easy for them and they were so patient to get just the right shot."

The children who attended the day have chronic illnesses and are seen regularly by the Paediatric Outreach Nurses. The Outreach team work very hard to keep the kids supported at home to prevent hospital admissions but occasionally they do need to be inpatients.

"When you have a child with a complex chronic illness, the whole whānau works together to ensure they stay healthy, which is why it was so lovely to be able to acknowledge the whānau by offering a group photo instead of one just of the child."

A Christmas Wish (a subsidiary of the [Heart Project](#)) visits hospitals around the world every year to deliver Christmas cheer to children that may be unable to go home at Christmas time.

To see this year's Christmas Wish video, featuring some of the children from Christchurch, [click here](#).



Georgia's big sister proudly displaying the family's new portrait



Baby Georgia with her family, before and after the magic



# Teams getting into the Christmas spirit



Christchurch Hospital Christmas lunch



Above: Chronic Kidney Disease Nurse Co-ordinator Ed Avisado decorating the tree

Left: Ward 21 Paediatric Department dress-up day





The Older Persons Health and Rehabilitation Community Teams Referral Centre and the Community Rehabilitation Enablement and Support Team on the 4th floor of the Heathcote Building at The Princess Margaret Hospital say they take Christmas very seriously! Thanks go to the core group of administration staff who put this display together each year

Kidney Society Christmas party for dialysis patients



Christmas window competition run in the Operating Theatre at Christchurch Hospital, using recycled theatre consumables

Christchurch Hospital Mailroom



ISG's decorations are out of this world

Quality and Patient Safety



# The Big Shout Out!

## Last week of the Big Shout Out

It's the last week of the Big Shout Out, and it's not over yet! So far, more than 1400 of people have received messages of thanks from workmates.

That's right, **more than 1400!**

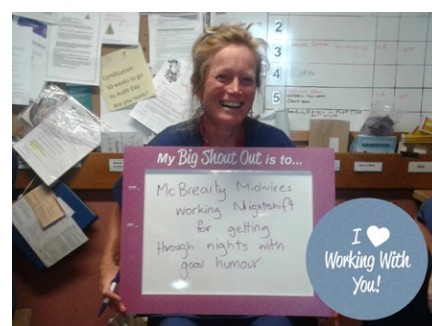
That's more than 1400 messages of thanks, support and kindness which has shown more than 1400 people how much their work/mahi is valued.

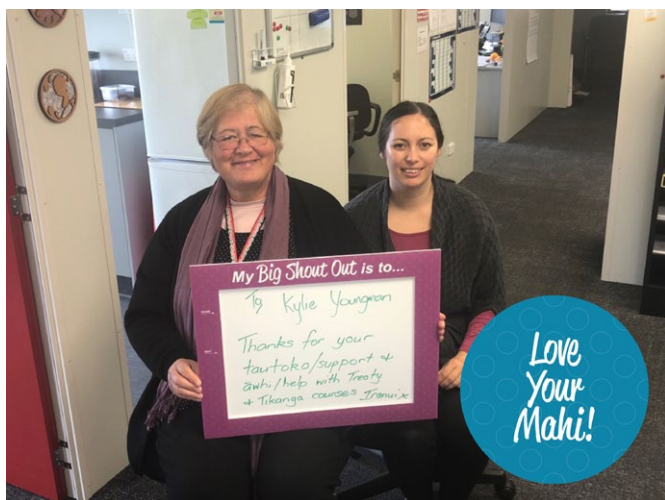
Thanks so much to those of you who have taken the time to give your Big Shout Out – and if you haven't (or would like to make more), it's easy! Simply go to your Max homepage and click on the Big Shout Out images directly below the search bar. You can send a message through Max with text only, or opt to add a photo of your written message, too.

You can also find the Big Shout Out pack sent to your department, or ask roaming volunteers who will help you send them. The volunteers' locations are advertised in the Canterbury DHB daily staff notices, and weekly in the West Coast Global notices.

If you'd like to see all the Big Shout Outs which have been given, head to the Max homepage, keep an eye on the screens around your campus, or go to the [Care Starts Here Facebook page](#) (it's a closed group, but just request to join).

Any Big Shout Out you make puts you into the weekly draw for more than \$3000 worth of prizes donated, including Christmas hams, family passes to local attractions, coffee vouchers, gift hampers, and much more.







# Ballantynes stops by the Children's Ward bear-ing gifts

The Activity Room in Christchurch Hospital's Children's Ward was overrun by an influx of furry friends last week.

For every special edition Christmas toy Ballantynes sell each year, they kindly donate another toy to a deserving children's organisation. The Children's Ward was the lucky first recipient of the donation initiative which began this year, receiving 725 Ballantynes 'Dunstable Bears.'

Hospital Play Specialist Service Team Leader Melinda White says the Children's Ward is incredibly grateful to Ballantynes for their kind donation which has brightened up the lives of so many of the ward's patients.

"You only had to look at the kids' faces light up as they received their bears and adoption papers to see how much this meant to them.

"It's such a wonderful gesture during this festive time of the year," Melinda says.

The bears are accompanied by some very cute adoption papers which specify the 'adopting parent' and the date of adoption.

"I've already named mine Jack," says four-year-old Alex Berry, a proud recipient of a Ballantynes Bear.

"I've cuddled Jack every night since getting him – I love how soft and fluffy he is!"

The delivery of the 725 bears has been staggered, with 300 bears being delivered last Tuesday, another 300 delivered today, and the final 125 will be delivered to the Children's Ward on Christmas Eve.



Children's Ward patient Alex Berry receives her 'Dunstable Bear'



The bears get ready for their journey to the Activity Room



# “Cornerstone” of Maintenance and Engineering department retires

Site Maintenance Manager Engineering Graeme Coulson is known for moving so fast around Christchurch Hospital it is difficult to keep up with him.

Graeme, who retires on 4 January 2019, will leave through the same door at 235 Antigua St through which he entered for the first time in January 1979 –40 years ago.

In those days there were more than 100 tradesmen working in Christchurch Hospital, says Facilities and Engineering Manager Terry Walker.

The hospital environment has changed immeasurably over the years. Graeme has adapted to the new technology and the new expectations upon him, but his positive attitude and commitment to Canterbury DHB have remained unchanged.

“My first memory of him is being left in his wake as he blazed a trail around the plant rooms. He is always in a hurry and moved around the hospital at such a speed it was very difficult to keep up with him,” Terry says.

That still happens to younger staff today.

“Graeme is the cornerstone of our department. He cycles to work from Halswell, is one of the first here every morning, does not stop for morning tea or lunch and is still buzzing when most have gone home. You will almost never see him eating or drinking, he seems to survive on oxygen alone!”

The exception is his sweet tooth and he is an accomplished baker, Terry says.

Graeme is a quiet achiever with a high degree of integrity who is extremely well respected and has helped many people over the years.

“He’s one of Canterbury DHB’s understated heroes; he is very modest. I don’t believe I have met a more honest, just person.”

Facilities Commissioning Manager Alan Bavis says Graeme has been a real pleasure to work with and is the epitome of a hospital engineer.

“He is very technically adept, has a great working relationship with everyone he interacts with and has a lot of institutional knowledge about how the building services work.

“His decision making and loyalty is rock solid and on many occasions when I thought ‘how are we going to manage this one’ Graeme would find a way in his quiet unassuming manner.

“We did not always agree on things but mostly he was right.”

Graeme’s work ethic and energy he puts into the job will be missed, together with his dry sense of humour and positive attitude and also his unflappable nature when things don’t go to plan, or in times of emergency.

“He really underpins the department and will leave a huge gap to fill. We shall miss him.”

Graeme says he would like to thank everyone he has worked with over the years who has helped make it easy to “get the work done.”



Site Maintenance Manager, Engineering, Graeme Coulson, who retires next month

# Orderlies excited about their new way of working

Last week, the Christchurch campus celebrated the launch of a new mobile orderly request service.

*Orderly Mobile* is a fully digital service which sees orderlies armed with mobile devices, enabling them to accept, respond to and fulfil work requests on the go. This means that staff can now make requests for orderly services online, and orderlies receive and complete tasks which are tracked on a mobile phone app.

Co-designed by orderlies, nurses and ward clerks, it was delivered in just five weeks and provides full visibility of the nearly 1000 daily requests for this critical service across the Christchurch Hospital campus.

The app was developed by the People and Capability and Information Services teams. Chief People Officer Michael Frampton says the new service shows the commitment of People and Capability to streamline working practices for our more than 10,500 employees.

"We're getting alongside teams across the business to help them reimagine how work can be organised and delivered. We know that when people work better, the care they deliver is better. People and Capability has a key role to play in bringing that to life," he says.

Canterbury DHB Chief Digital Officer Stella Ward says the new service is all about using technology solutions to support and enable our services and people.

"This app is a great example of the growing partnership between digital and people. The solution will soon allow geolocation mapping and a range of other innovations to support our orderlies and those that request their services," says Stella.

Christchurch Hospital Orderlies Services Manager Alan Heney says the team is really excited about this new way of working.

"In the past we've received printed requests and instructions, so this is saving reams of paper and bringing new efficiencies to the process of assigning jobs and having them completed.



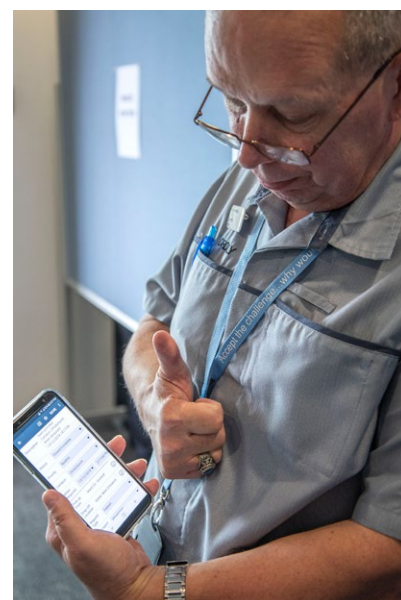
Orderlies Kim and Spencer compare notes on the new app

"Most of the team had turned their radios off within just 24 hours of the launch of the new digital service, and we're thrilled that we're now one of the first fully digital and paper-free services in the organisation," says Alan.

In the short time since its launch, *Orderly Mobile* has processed more than 60,000 orderly requests – and its benefits are already being felt, says Michael Frampton.

"It's delivering data about service demand in real time and the analytics can help us improve the efficiency of what's already a fantastic service," he says.

*Orderly Mobile* has been built on the same technology platform and using the same human-centred design that the People and Capability platform Max is built from.



# Share this festive season with shared care plans

With the silly season almost upon us, it's timely to remember the useful tools of the trade that makes sharing and collaboration that bit easier for staff and patients over the festive season.

The suite of electronic shared care plans – The Acute Plan, the Personalised Care Plan (PCP), and the Advance Care Plan – enables clinicians from different health services to collaborate and share important information that can improve patient care.

The plans, accessed via HealthOne or Health Connect South, empower patients to work with care teams to coordinate care around their needs and priorities.

## Acute Plan

The Acute Plan provides information to health providers unfamiliar with a patient who may present with exacerbations of their underlying complex health conditions. The patient consents to the sharing of this information and may be involved in writing the plan. This allows the sharing of information that supports safe, effective, patient-centred decision-making with regard to assessment, management and discharge.

## Personalised Care Plan

The Personalised Care Plan includes an overarching statement of what matters most to the patient. Under this sits 14 life areas such as food/drink/healthy weight or legal/ financial. Within each of these life areas, clinical teams can document current issues for the patient, agreed goals to work towards and the actions taken by either the care team or the patient themselves which underpin the goals.

## Advance Care Plan

The Advance Care Plan outlines a patient's wishes about the type of medical care and treatment they want to receive in the future, particularly towards the end of life or when they are not able to make their own decisions.

Rebecca Muir, Collaborative Care Liaison, says that these plans can be particularly helpful to clinical staff over holiday periods because they contain up-to-date information about clinically-agreed actions around that patient's care.

"The plans have a host of information from clinicians about what the patient really needs. As well as benefitting the clinicians, patients who have a plan have told us they improve access to the care they need from the right people at the right time.

"These plans are an extension of a trend towards a more integrated approach to health care."

## What the patients say

*Katherine, Acute Plan*

"Creating the plan has been a really inclusive process – I've been able to contribute along the way. If I encounter someone who doesn't know me I can ask them to look at my plan without having to repeat my history again and again. My experience of accessing care has also improved, and I'm getting to the right place faster than ever, which has been invaluable."

*Steve, Acute Plan*

"If the doctor or nurse can't find a plan, I can tell them exactly where it is. The details that are relevant to them should miraculously appear. Since it was developed, I've spent less time in ED waiting and the process for direct admission has improved significantly. As a result, I suffer less."

## Find out more

For more information about the plans, including [frequently asked questions](#), visit the [Collaborative Care pages](#) on the CCN website. If you have any other questions or comments, email Rebecca Muir, Collaborative Care Liaison at [rebecca.muir@ccn.health.nz](mailto:rebecca.muir@ccn.health.nz)



Collaborative Care Liaison Rebecca Muir working with patient Steve on a shared care plan



## Bowel cancer surgeon given medical profession's highest accolade

Bowel cancer surgeon and University of Otago, Christchurch researcher Frank Frizelle has been awarded the New Zealand medical profession's highest accolade.

Frank was recently presented with the New Zealand Medical Association's Chairman's Award which recognises individuals who have made an outstanding contribution to the health of New Zealanders.

In a letter explaining why Frank received the award, the New Zealand Medical Association (NZMA) said he has and continues to make a significant contribution to both the health of New Zealanders and the standard of medical research and publishing in New Zealand and worldwide.

Frank is head of the Department of Surgery at the University of Otago, Christchurch, and a colorectal surgeon at Christchurch Hospital. He and his university research team were recently the first in the world to a bacterial toxin carried in the gut to the development of bowel cancer. This discovery will mean people could be screened for the bug and a lifesaving vaccine could be developed.

Frank is the editor-in-chief of the *New Zealand Medical Journal*, the leading medical research publication in New Zealand, and a member of the International Committee of Medical Journal Editors. He has published more than 400 publications in peer-reviewed journals.

He also holds key positions in the international colorectal cancer and surgery field, including fellowships with the American College of Surgeons, and an honorary member of the Association of Coloproctology of Great Britain and Ireland.

Previous winners of the award include Children's Commissioner Russell Wills, and Canterbury DHB CEO David Meates for leading the Canterbury DHB in its community response to the February 2011 earthquake.



Frank Frizelle

## New doctors welcomed

Late November and December is the time each year when most new house officers and registrars start at Canterbury DHB.

Recently, 61 new house officers and 76 new registrars were welcomed to the Canterbury DHB Team.

New registrars attended their clinical orientation a fortnight ago.

The Medical Education and Training Unit (METU), which is responsible for the general orientation of all Resident Medical Officers (RMOs), organised a programme of computer application training, to ensure that the new registrars would be 'up to speed' with our local technology, in preparation for their commencement on the wards.

The new registrars also enjoyed a session on 'Tips and Tricks for Registrars,' which was facilitated by a current registrar.

# Max celebrates its first birthday!

Wow, doesn't time fly when you're having fun? Personally, I can't believe it has been one whole year since I was born. That's right, it's my first birthday – I've been helping to make your People and Capability services easier for a whole 12 months!

Since I was hatched, I've released nearly 30 services making it easier for you to do things like check your payslip, apply for leave, file expense claims, and update your personal details.

It's been such a pleasure helping you all, but I am far from finished. There are lots of exciting new services to be rolled out – as always, I'll let you know when they are ready, and how exactly to use them.

But it wouldn't be a real birthday without gifts, would it? I've talked to the team and we thought up something especially for you...

...the Max app!

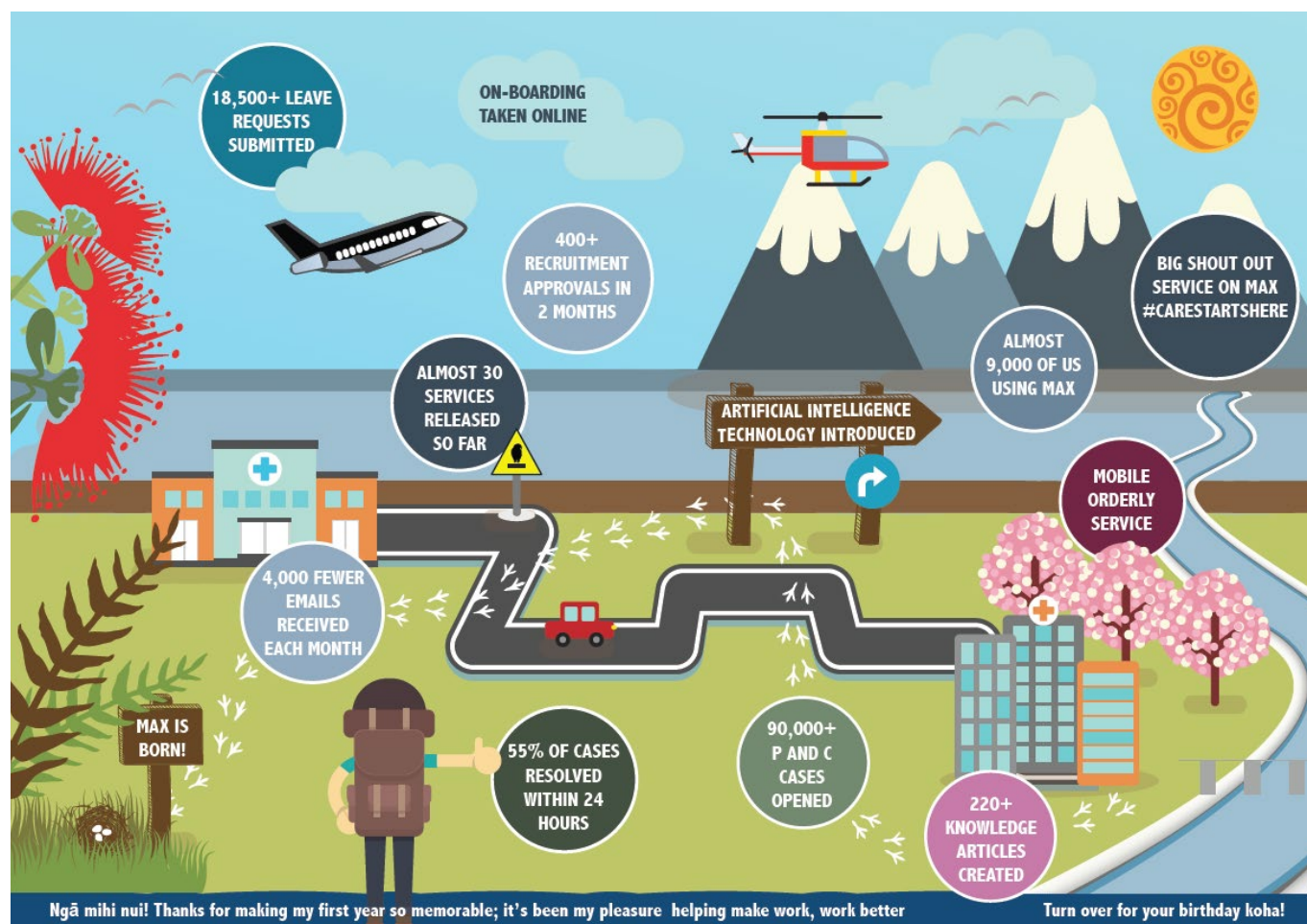
The Max App, called ServiceNow, can be downloaded from the Apple App Store or the Google Play Store just like your other favourite apps. Once you've downloaded the app:

- > Open it and enter [pldc.service-now.com](https://pldc.service-now.com)
- > Enter your work computer login details. The app will remember for next time so you don't need to login again.
- > Make any HR request on-the-go or from home!

As I keep maturing, there are also some exciting new features being rolled out which incorporate Artificial Intelligence, new updates to improve existing services, and I'm even having a makeover. So keep an eye out for my new look (and new services) due to be launched soon.

I can't wait to show you more ways we can work together to *make work, work better*.

Nga mihi nui  
Max





## Family celebrates three generations of doctors

Brogan Maoate, who graduated from the University of Otago this month, is the third generation of her family to become a doctor.

Her father is a Paediatric Surgeon and Urologist at Christchurch Hospital, Tearikivao (Kiki) Maoate, and her grandfather was Sir Terepai Maoate, a doctor and former Cook Islands Prime Minister. Brogan is one of 49 students who identified as a Pacific Islander in the 2018 graduating class.

Brogan and Kiki featured in *The Press* recently. You can read their story [here](#).



University of Otago medical graduate Brogan Maoate and her father, Paediatric Surgeon and Urologist Kiki Maoate

## Farewell and thank you to Steve Howie

The Specialist Mental Health Services (SMHS) has said farewell to Registered Nurse (RN) Steve Howie who is taking up a role with Rural Canterbury Public Health Organisation in Kaikoura.

Steve has had 35 years' continuous service with SMHS starting at the Sunnyside School of Nursing in 1983. During his tenure, Steve worked in many positions in many roles including Duty Nurse Manager in the mid to late 1990s.

In 2008, Steve was the first RN appointed to the newly established Watch-house nurse role, a position that he has maintained over the last 10 years.

The role sees mental health nurses based in the Christchurch Police Station Watch-house providing

support to a vulnerable population of people in custody with mental health and/or alcohol and other drug problems.

Steve's leadership and care for his patients and colleagues have been a trademark of his career. We wish him all the best for his future endeavours and thank him for his 35 years of dedicated service.

Steve was farewelled by Christchurch Police at a function at Te Omeka (the Justice Precinct) and again by SMHS.



Steve Howie and colleagues from the Christchurch Police

## Sports doctor attracts big numbers to Grand Round

There was a big turnout at the Grand Round on 7 December to hear well-known Sports Medicine Practitioner and Coach, John Hellemans.

The title of John's talk was "Never, Ever Give Up? Adventures of a Sports Doc" and aimed to give an insight, from his perspective, into the benefits and risks of endurance sport.

John has written a memoir called "Never Ever Give Up", about his long career in triathlon, initially as a competitor, then a coach, doctor and advisor. He is a past head coach for the Dutch triathlon team and coaches Canterbury triathletes in addition to his busy sports medicine practice.

His presence attracted double the number of attendees as expected at the Grand Round in the busy lead-up to Christmas.

Kaimahi Hauora Māori, Theona Ireton, says his talk was one of the best she'd been to, "he was funny, engaging and real". Others said he was "absolutely amazing".



Nurse Educator Lisa Bee, Sports Medicine Doctor John Hellemans and Consultant Haematologist Ruth Spearing

## Cleaner born at site where she works



Norma Timms

Norma Timms isn't shy about declaring how much she enjoys her job cleaning Level 2 of the Administration Workspace at Burwood Hospital.

"I love it and put 100 per cent into it."

Norma, who is about to celebrate her 70th birthday, says while she is still physically able to do the job she will.

"One of the reasons I enjoy what I am doing at Burwood is because the staff appreciate me. They know me by name, it's a great atmosphere here."

At work five evenings a week it strikes her as ironic that the place she cleans is the same location where she was born.

"I was born in the third room on the left of the corridor at the old Burwood Birthing Unit."

Norma, who has been cleaning at Burwood since the new building opened, was in the same role for 14 years at The Princess Margaret Hospital and says it is much easier cleaning something that's new.

"I know that from my home, which is 133 years old."

Her friends call Norma's historic kauri cottage a museum due to all the fascinating old items in it that Norma has collected over the years. A brick from the chimney is stamped with the year 1885. She recently had the many layers of paint stripped from its exterior and a sparkling new cream and green colour scheme applied.

When she's not at her job Norma, a former Girl Guide leader, points out that she isn't "idle".

"I run a stall at Prebbleton Market, selling crochet blankets, scarves and other things"



# Canterbury System Level Measures Improvement Plan Recognised

The Canterbury Health System's 2018/19 System Level Measures Improvement Plan has been noted as 'one to read' in the Ministry of Health's latest [System Level Measures Update newsletter](#).

Our health system places a high priority on implementing the System Level Measures Framework to support change and system improvement, and each year the improvement plans aid us in engaging the relevant stakeholders from across the system in leading change.

The improvement plan outlines how our health system will undertake the locally-agreed improvement activities that contribute to improvements in the six national system level measures.

University of Otago's Professor Les Toop of Canterbury's System Level Measures Steering Group (SLMSG) says the Canterbury approach to bringing people together to achieve outcomes means we can embed these measures into our local way of working for the benefit of our community.

"The system level measures programme both requires and encourages partnerships across and beyond the health system which, together with consumer input, ensures that patients are kept as the central focus of both the conversations and subsequent system re-design."

One example is the SLMSG's sub-group which is clinically-led and focuses on exploring and understanding the variation in rates of hospitalisation of children under the age of four.

Les explains that "one of the system level measures we found in Canterbury, as elsewhere in the country, was that children from Pacific families have a much higher rate of hospitalisation in this age group than other ethnicities."

"The group has now commissioned research to explore how much of this might be due to differences in the way the health system is first accessed by parents when a child becomes unwell.

"In this way, the System Level Measures programme both requires and encourages partnerships across and beyond the health system. This, together with consumer input, ensures that patients are kept as the central focus of both the conversations and subsequent system re-design," says Les.

In implementing the System Level Measures, each district has the opportunity to identify local priorities and actions that will contribute to improvements in the six nationally set measures.

CANTERBURY HEALTH SYSTEM

## System Level Measures

### Improvement Plan

2018-19



Canterbury was instrumental in influencing the introduction of these six national SLMs, which focus on children, youth and reducing equity gaps for Maori and other population groups that consistently experience poor health outcomes.

The national System Level Measures are:

- › Keeping children out of hospital (Ambulatory Sensitive Hospitalisation rates for 0–4 year olds)
- › Using health resources effectively (acute hospital bed days per capita)
- › Person-centred care (patient experience of care)
- › Prevention and early detection (amenable mortality rates)
- › A healthy start (babies living in smoke-free homes)
- › Youth are healthy, safe and supported (youth access to and use of youth-appropriate health services).

Executive Director Planning, Funding and Decision Support, Carolyn Gullery says the key changes in our 2018/19 Improvement Plan include updating the Actions to Improve Performance, refining some contributory measures, including presenting these by ethnicity where appropriate, and resetting the System Level Measures milestones.

"Our System Level Measures Plan has continued to demonstrate the Canterbury Health System's commitment to improving the health outcomes of our population and I'm pleased that this work continues to be recognised as good practice at a national level," says Carolyn.

# Integration key to meeting complex healthcare needs of young patients

Working with families and other health professionals to better meet the needs of children and teens with the most complex healthcare requirements.

That was the aim of Paediatric Outpatient Daystay and Outreach nurses which led to the development of the successful Collaborative Care project.

"These young patients live with serious chronic illnesses but want what all children want: to enjoy life, participate in school, and fit in with their social circle," says Manager of the Paediatric Outpatient/Daystay/Outreach Service, Nicola Scott.

However, living with a chronic illness is disruptive, making it difficult for them to have a routine that supports their ongoing development and education.

"They are also part of a family/whānau who have to work around their treatment."

To find a solution, the Paediatric Outpatient nurses reached out to primary care, schools, social workers, Māori support workers, and non-governmental organisations and created the Collaborative Care Project pilot.

It introduced improved communication between health services and changed care documentation so that all services had access to up-to-date information.

"And because we worked together to benefit family functioning, we freed up time for the patient and their family," Nicola says.

An audit showed families found this very helpful and from 2015 it was adopted as the model of care for the Paediatric Outpatient Department.

"This nurse-led initiative was so successful that the health professionals involved wanted to expand it to further improve integration of services. The group now includes consultants, general practices, adolescent and adult consumer representatives," Nicola says.

"We have met monthly for the past two years to promote more integrated care across primary and secondary health."

This year the Collaborative Care Group identified a gap for adolescents transitioning to services for adults. A 'transition pack' created by Outreach nurses slowly increases teens' knowledge and responsibility for their healthcare.

"This was already in use and worked well for 80 percent of patients but didn't serve the needs of the 20 per cent of adolescents with more complex needs," Nicola says.

So in 2018, the Collaborative Care Group joined with the Adult Rehabilitation Improvement Group to explore what services and resources are needed for successful transition of these young people.

"Primary care identified that they have very little contact with this group until they transition to adult services."

So it was decided that all prescriptions would be done through General Practice teams to increase contact prior to transition. Improved communication and documentation also means General Practice teams have access to timely and up-to-date information.

A report due out in 2019 will include further recommendations.

Looking back over the last four years, the progress made by the Collaborative Care Project has been "spectacular", Nicola says.

"It is rare to have such a diverse, multi-service, motivated and highly skilled group of people all working together to benefit whānau."



# Improving access to health and social supports for people being released from prison

People leaving prison in Canterbury will benefit from improved support to navigate and access health and social supports thanks to collaboration between Health, Corrections and the social service sector.

The multi-agency Coordinated Access on Release Design Group was formed in 2016 with the aim of addressing barriers that prevent people released from prison from accessing appropriate health services, support and resources in the community.

Jane Cartwright, an independent advisor who chairs the group on behalf of Canterbury Clinical Network, says it's important to work together to achieve results.

"After an initial workshop we realised that we needed continued collaboration to make progress for these members of our community who often don't know what services are available and how to navigate them, or who experience barriers that prevent them from having their health needs met."

The group has worked on several initiatives, two of which include using Partnership Community Workers (PCWs) as key connectors between sectors.

The first sees PCWs working with the Correction's Guided Release Pilot to support people with high and/or complex health needs on release and require additional support to ensure their health needs are met and any barriers they experience accessing health services are addressed.

The second initiative sees the PCWs working from the Justice Precinct with Police to identify court attendees and their family who have complex health issues, and connect them and their family with a General Practice team or community health provider.

The group has also supported work around simplifying the registration process for RealME registration through the Ministry of Social Development.

Canterbury DHB Planning and Funding Team Leader Kathy O'Neill says there is early indication that the initiatives are working.

"We have seen an increase in the number of people on release accessing services through their General Practice team. What's even more positive is that many of these people continue to engage on a regular basis."

Senior Case Manager, Canterbury Prisons Nathan Tipuna, who is part of the group developing these initiatives, says release from prison can be an anxious and stressful time, especially for those who have had their health needs effectively managed or supported in prison and are now expected to do this for themselves in the community.

"We hope to empower these people, and their family/whānau, to better manage their personal wellbeing and to live healthier, independent lives in their community."

Jane says the group is working hard to take a more holistic view.

"We're not just looking at the needs of this population, but also their whānau and social environment. Support to improve health literacy and advocacy should be available to the entire whānau, with the aim that they continue to engage with health and social agencies for support"

The group will release more detailed information on these initiatives and share outcomes in the next few months.

# Christmas Food Safety Checklist

It can be a challenge to plan food storage when fridge space is at a premium during the festive season.

Alternatives to fridge space can include:

- › Relegating the beer, wine and juice to the chilly bin or a bath loaded with ice.
- › Putting all vegetables and fruit that don't need to be stored in the fridge in a cool, dry place.

Here are some helpful tips for Christmas dinner, whether it is a traditional one or a kiwi BBQ:

- › Always wash and dry your hands thoroughly before handling any food and after preparing raw meats.

## Hams

- › Store hams in the fridge covered with a damp tea towel that is changed daily and eat within two weeks of opening.
- › Freeze some of your ham in clean freezer bags if you don't think you can consume it all within the given time periods.
- › Eat sliced ham within three to five days and always handle the ham with clean hands and utensils.

## Turkey

- › Take the turkey out of the freezer four days before Christmas Day. Defrost in the bottom of the fridge (below all ready to eat foods)
- › Cook turkey thoroughly as per instructions on packaging. Juices should run clear when checked with a skewer and flesh should not be pink.
- › Chopping boards used for preparing the turkey need to be scrubbed with hot soapy water before being used for other foods.

## Salads

- › Salads with creamy dressings will need to be stored in the fridge, or
- › Wait until serving before putting the dressing on.

## Desserts

- › Pavlova does not need to be refrigerated until it has cream on it so do this just prior to serving.
- › Prepare any desserts that can be frozen and store them in the freezer
- › Purchase cream and milk the day before Christmas Day.

## Leftovers

- › Cover and refrigerate leftovers.
- › Reheat leftovers until steaming hot. Do not reheat more than once.
- › Use leftovers within two to three days.
- › Get visitors to take some leftovers home with them.
- › Remember the three C's – clean, cook, chill.





# First nationwide study of listeria in mothers and babies

The first study of the burden of listeria in pregnant New Zealanders and their babies has found reassuringly low rates of the infection – indicating food safety warnings are working to prevent unnecessary cases of miscarriage, still births and meningitis in babies infected in the womb.

However, in those who contract the infection, the consequences are devastating, with the lives of 12 unborn babies claimed over two decades, and more than 100 people hospitalised.

The University of Otago, Christchurch study found disproportionately high levels of the infection in mothers and babies identified as Pacific Islanders.

Listeria is most commonly transmitted by the consumption of contaminated food. Pregnant women are about 18 times more likely to get the infection than the general population.

It most commonly presents in the third trimester of pregnancy (from 28 weeks) and is rarely fatal in the mother, but can seriously affect infants and children.

University of Otago, Christchurch medical student Emma Jeffs did the research, supervised by Paediatric Infectious Disease Specialist Tony Walls as part of the campus' Summer Studentship programme. The research is being shared publicly at this week's One Health Aotearoa Symposium in Wellington.

To do the listeria research, Emma studied 20 years of data (between 1997 and 2016) on cases of the notifiable disease in pregnant women and children. The study is the first on this particular population – the most vulnerable to the

infection's most serious consequences.

Over two decades, there were 143 cases of the disease; 115 (80.4 percent) cases in pregnant women and 28 (19.6 per cent) cases in children. Of all cases, 118 resulted in hospitalisation.

Emma says the study indicates pregnant women seem to be following the Ministry of Health food safety recommendations to avoid the disease. This includes not eating foods such as sushi, deli meats or salads that are most likely to be contaminated with listeria.

Though rare, the consequences for those who contract listeria are devastating, Emma says. The study identified eight cases of still birth and four cases of miscarriage to mothers hospitalised by listeria.

Emma says women and children identifying as Pacific Island ethnicity had the highest incidence of disease notification and hospitalisation. The reason for this disparity is unknown but warrants investigation, and potentially a different food safety approach from relevant authorities.



University of Otago,  
Christchurch, Medical Student  
Emma Jeffs

## Always on the go? Take Healthinfo with you

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for information about your health.



# One minute with... Jacqui Lunday-Johnstone, Executive Director of Allied Health, Scientific and Technical

## What does your job involve?

I took up the post as Executive Director of Allied Health, Scientific and Technical (AHS&T) just seven weeks ago now and I am really excited to be part of the leadership teams for both Canterbury and West Coast DHBs. I have the privilege of providing leadership, strategic direction and professional oversight for our AHS&T workforce across both organisations, and work closely with the directors of Allied Health, clinical managers and general managers where AHS&T are hosted across the system. I also have a leadership role in delivering our organisation's ambition to drive equity, accessibility and employment opportunities for people with disability.

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

I love the breadth and diversity of professional expertise and talent that we have within the Allied Health, Scientific and Technical professions and their support staff. They work right across the life course, touching every part of the system, and bring a range of different perspectives and innovative thinking which will support system improvement and transformation. I am really looking forward to helping our organisations fully realise that potential for the people, whānau and communities we serve.

## What do you like about it?

There is always more to learn about each of the clinical groups, what they do and how they are delivering impact and value. Every day is a learning day for me! I believe AHS&T is very inclusive – we have more than 35 different groups in our whānau! Some are new to me to lead, such as our Māori Health teams, pharmacy, psychology and even social work, which haven't been part of my AHS&T teams in my previous roles. I love it and all of its glorious diversity.

## What are the challenging bits?

The challenging bits are also, in part, the exciting fun bits. How we embrace all AHS&T groups and help them feel like supported and valued whānau members, as well as being empowered leaders and members of interdisciplinary teams. We all have a contribution to make to improving care, health outcomes and the system and I hope we can empower all our practitioners to make a real difference.

## Who inspires you?

I am inspired by people around me every day in how they

are sustaining services and their teams in difficult circumstances, as well as those coping with adversity or personal challenges of all kinds with grace and equal measures of strength and tenacity. I also love seeing people in the public eye who live their values and don't shy away from big and wicked problems – like Malala Yousafzai and Michelle Obama. I am hoping the former First Lady's memoirs are in my Christmas stocking this year!



## 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?

These values really resonate with me and with our teams. I am passionate about person centred approaches and, in particular, I am looking forward to a stronger focus across AHS&T on our shared responsibility and contribution to improved outcomes for people, whānau and also the system.

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

One of the best books I have read was the *Life of Pi*. The film was incredible and the cinematography visually stunning, but the book was better!

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

Here in Aotearoa. Having spent all my life to date living in Scotland, it has been a very exciting move for me and my family coming to live in Christchurch and we are fully embracing the kiwi experience. I am looking forward to enjoying the hot springs at Hanmer and visiting some friends in Tauranga over summer.

## What do you do on a typical Sunday?

You can find me checking out all the fabulous children's play parks in the area with my three-year-old son. The current unchallenged favourite is Margaret Mahy where he is developing talents as a thrill seeker at an alarming rate!



**One food I really like is...**

Something spicy – preferably Thai but also Malaysian or Indian. There is such a great selection of eateries in the area, I have been spoiled for choice.

Proclaimers live in Christchurch in May next year, which happily coincides with my husband's birthday.

**My favourite music is...**

My taste in music is pretty eclectic – I love Adele, James Taylor and am looking forward to seeing Scottish duo The

If you would like to take part in this column or would like to nominate someone please contact [Naomi.Gilling@cdhb.health.nz](mailto:Naomi.Gilling@cdhb.health.nz).

## NEED TO TALK?



**free call or text  
any time for  
support from  
a trained  
counsellor**

**We're here. Free call or text 1737 any time, 24 hours a day. You'll get to talk to (or text with) a trained counsellor. Our service is completely free.**

- Are you feeling anxious or just need someone to talk to? Call or text 1737
- Are you feeling down or a bit overwhelmed? Call or text 1737
- Do you know someone who is feeling out-of-sorts or depressed? Let them know they can call or text 1737

**Whatever it is, we're here.**

**Free call or text 1737 any time.**

## South Island Alliance update



The bimonthly update from the South Island Alliance is out now and includes a guest editorial by Clinical Lead for the South Island Dementia Initiative Matthew Croucher.

Matthew writes about the rapidly increasing rate of dementia and the need to work together to ensure people in the community get better support.

There is also information about Orion Health's case studies celebrating regional collaboration, the recent visit to Christchurch by the founders of the Calderdale Framework, and an overview of the South Island Stroke Study Day held last month.

Read more [here](#).

## Christmas Carols

Monday 17<sup>th</sup> December 2018

7.00pm

Burwood Hospital

Starting from the Main Reception we'll sing carols and Christmas songs through the wards for about an hour, and then we'll finish with supper in the café.

This is always an evening appreciated by patients and enjoyed by staff and families who participate.

We hope you are able to come and join us.







You are warmly welcomed to join us for

## Christmas Carols in the Nurses Memorial Chapel

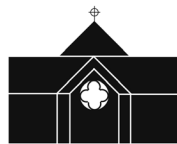


**Wednesday**  
**19<sup>th</sup> December**  
**3.30pm**

(Doors open 3.15pm)

Carol Sheets will be provided

\*limited to 50 seats



Friends of The Nurses' Memorial Chapel



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- Biofabrication and bioprinting
- Challenges facing clinical and commercial translation
- Discussion of clinical case studies

Learn from international and national experts, clinicians and MedTech professionals leading 3D printing research as well as clinical- and commercial-translation:

- **Visiting Chaffer Fellow, Professor Jason A. Burdick**, University of Pennsylvania
  - **Professor Peter F. M. Choong**, University of Melbourne
  - **Professor Gary Hooper**, University of Otago
  - **Mr Paul Morrison**, Ossis Ltd
  - **Professor Tim Woodfield**, University of Otago
- Plus more confirming soon

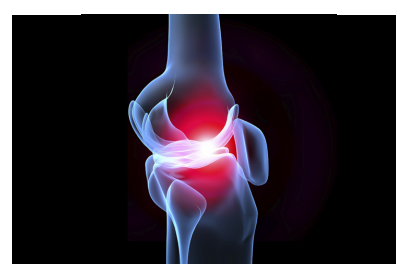
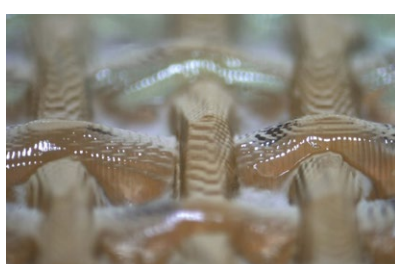
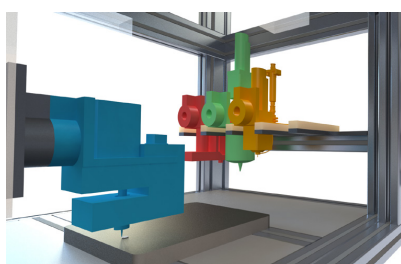
[www.otago.ac.nz/3dprintmedicine](http://www.otago.ac.nz/3dprintmedicine)

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**30**  
great courses

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**1-4** day duration

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**16** new topics

