

## Minister visits Canterbury



Telehealth, Primary Care, Construction, Concreting and Resin-injecting at NICU were all on his agenda.

The Minister of Health, Hon. Dr Johnathan Coleman, had a busy day in Christchurch last Friday. In the morning he was at Christchurch Hospital for the launch of the new online [Telehealth website](#). It's a resource to encourage and support others to use Telehealth as a way of providing better health services closer to home. In Canterbury and on the West Coast we were early adopters in our TransAlpine use of Telehealth and it's certainly proved its worth, saving West Coast families the time, stress and expense of unnecessary travel to specialist appointments.

TransAlpine paediatrician, and chair of the NZ Telehealth Forum, Dr John Garrett, said the advice on the website provided practical information for anyone thinking about using Telehealth as a more effective way of providing assessments and advice to colleagues and patients who were isolated, either by geography, or their mobility. There's a great example of [Nurse Maude using Telehealth](#) to provide wound care advice for patients in Kaikoura. A [West Coast case study](#) also features. It was also great to have the Director of the IT Health Board, Graeme Osborne, in Christchurch to attend the launch.



Above: Left to right, David Meates, John Garrett and the Minister of Health.



Above: Resin-injecting cracks in the floor of NICU.

Dr Coleman then spoke at the South GP Continuing Medical Education Conference, which was held in Christchurch last week. In his speech he acknowledged the vital role primary care plays in allowing more people to receive treatment and care in or close to their home. He talked about priority areas in health, and the importance of delivering better and faster access to health services. It was great to see the success of HealthPathways and HealthOne acknowledged in his speech. For a run-down of his current priorities in health, his [speech](#) is well worth a read.

The Minister then headed back to Christchurch Hospital for his first look at the site of our new Acute Services Building. The massive concrete foundations are taking shape, with the team from Fletcher in their hi-viz vests beaver away preparing the steel ahead of the next concrete pour showed the scale of the project. Dr Coleman was treated to an impressive bird's-eye aerial view of the site from the top of Christchurch Women's Hospital. En route there was time for a quick look at the quake repair work going on in the

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Neonatal Intensive Care Unit.

Christchurch Women's building is often described as the safest multi-storey building in the South Island due to its base isolators. However, despite this, the building sustained over \$3 million in damage, with most of the concrete floors requiring resin injecting into the cracks to restore strength. This, like all the other repairs have been a logistical nightmare which have involved decanting staff and patients while repairs take place. The current area under repair is home to some of our most vulnerable patients – the neonatal intensive care unit (NICU). The babies have all been moved to a temporary unit on the fourth floor and the team from Fletcher have moved in. Entry to the area is via three zipped and sealed plastic doors, and the photo on the previous page shows the extent of the cracking and repairs underway. It took a day and a half to install the plastic over everything: ceiling, floor, walls and encase all of the equipment. Once the repairs are complete extensive clinical cleaning will take place before the babies, and the myriad of equipment move back to their usual 'home'.



cooperation and understanding during the past four and a half years of disruption. The ongoing challenges the quake repair work has posed for almost every one of you has not gone unnoticed. You have handled things so professionally and without fuss, we've almost made it look too easy.

Have a great week

**David Meates**  
CEO Canterbury District Health Board

Thanks to everyone, including patients and families, for your



## Monday's Facilities Fast Facts

### Burwood

The internal fit-out of the rooms in the first ward block at Burwood is progressing well, as these photos show: vinyl flooring is now laid, hoist tracks are installed and much of the joinery is done.



Concrete pours are also continuing at Burwood Hospital, with the slab being poured this week for the plant floor of the outpatients building.

### Christchurch

On Friday 14 August, the Minister of Health, the Hon Dr Jonathan Coleman, paid a visit to Christchurch Hospital to get an overview of the Acute Services building site. He was accompanied up to the top floor balcony of Christchurch Women's Hospital to see construction progress, as well as taking a detour to view earthquake repair work in the neonatal unit.

The photo shows, from left, Dr Rob Ojala, the Minister, and Chair of the CDHB Board Murray Cleverley, on the top floor overlooking the Acute Services site.

Next steps for the Acute Services building's foundation construction are the excavation of further lift pits, and the third main concrete pour for the foundation slab, currently scheduled for August 29.







## Bouquets

### **Oncology, Christchurch Hospital**

Congratulations! Wonderful people and service - Dr Babbington and team, nurses - Hazel, Barrie and others.

You have made the cancer cure journey pleasant and respectful. You have shown care and compassion. You 'Team Babbington' are the best.

### **Radiation Group, Chemotherapy, Christchurch Hospital**

It's a pleasant environment at the Radiation Centre. Their professional attitude is supported by a very friendly team, willing to help with any problem no matter how small or vice versa and always with lovely welcoming smiles. Well done to all involved in running a very smooth and happy group.

### **Oncology, Christchurch Hospital**

Top marks for the radiation operators on Treatment three and machines. They eased any inhibitions one had to one's treatment and showed great care and friendliness in an area one is attempting to show a brave face. Thanks also to the receptionist who has had to face a difficult workplace. Thank again to having the Cancer Society on site.

### **Chemotherapy, Christchurch Hospital**

Once again thank you for the excellent care your nurses and staff perform. I could not ask for better service, thank you.

### **Ward 11, Christchurch Hospital**

Nurses were fantastic! Especially Sunni. Services were amazing and efficient, food was always tasty,

nutritious and accurate temperature. The wards were always well cleaned and maintained, the endurance ward (exercise block) beneficial. All staff performed professionally with diligence thoroughly enjoyed my stay apart from my injury of course. Only issue would be lack of sunlight into premises.... Sunni covered that.

### **Ward 27, Christchurch Hospital**

Good staff, thank you for your patience and graciousness with our 98 year old grandmother. Nga Mihi.

### **Ward 27, Christchurch Hospital**

The doctor on ward 27 who diagnosed gout and treated it... has done a wonderful job. ... [our family member] has made a wonderful recovery. Big thank you from his family. You are an answer to our prayers.

### **Maxillofacial, Christchurch Hospital**

I am so thankful and appreciative of the wonderful care and reconstruction surgery to Maxfac team. Special thanks to Mr Da Silva and Dr Gary Lee.

### **Emergency Department, Christchurch Hospital**

The lady Melissa at the nurses' desk in emergency was amazing to talk to and really understanding. Awesome employee.

### **Ward 15, SARA, Christchurch Hospital**

Great service and attendance from all staff. Well done, thank you.

### **Paediatric Day Surgery Unit**

Fantastic staff, lovely, helpful and

reassuring for my son who was going under general anaesthetic. Thank you so much you are all amazing.

### **Kaikoura Hospital and Christchurch Hospital**

...I succumbed to a serious illness in Christchurch. I spent three days in Christchurch Hospital's intensive care unit, then four days in recovery where I received outstanding service and treatment. ...I was transferred from Christchurch/Cheviot to Kaikoura by ambulance. Kaikoura St John provided the driver, nurse and ambulance. I then spent four days in Kaikoura's 100-year-old hospital which was so warm and so comfortable. Dr Henry, Nurse Manager Adrienne McNabb and staff treated me with care and compassion. Thank you to those that visited, sent cards, my family and friends and Kaikoura Lions Club. Thank you all. - Kaikoura resident

### **Waikari Hospital**

Fantastic holistic environment. The Waikari Nursing staff, caregivers and extended team had a wonderful caring attitude, were attentive, kind and supportive during my stay. Lovely respect shown to patients and positive team dynamics made my stay at Waikari so enjoyable. Beautiful food, amazing room and exceptional care made this a special time to establish feeding and bond with my baby.

My stay has been a wonderful experience with friendly, caring staff. No pressure was given for me to go home until I was ready.

## Canterbury Grand Round

Friday 21 August 2015 – 12.15 to 1.15pm with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker: David Fergusson

Topic: The Christchurch Health and Development Study: a Forty Year Overview of Findings

Summarising 40 years of research findings cohort of over 1000 Christchurch kids born nearly 40 years ago. The Christchurch Health and Development Study is a longitudinal study of a birth cohort of 1265 children born in Christchurch in 1977. This talk will present an overview of the study and highlight key findings over the period from 1977 to the present.

Chair: Peter Joyce

Video Conference set up in:

- » Burwood Meeting Room
- » Meeting Room, Level 1 TPMH
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton

All staff and students welcome

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

The next Grand Round is on Friday 28 August 2015.

Convenor: Dr RL Spearing  
contact [ruth.spearing@cdhb.health.nz](mailto:ruth.spearing@cdhb.health.nz)

## Electronic Triage

Now that the Electronic Request Management System (ERMS) is available to general practices across the South Island, the focus of the Electronic Referrals programme is shifting to electronic triage of referrals (eTriage) within Health Connect South.

The advantages of electronic triage include the flexibility to triage from any location, greater efficiency, and reduced risk of losing referrals. It will also make it easier to provide simple electronic advice back to general practice teams to assist with the management of patients not seen in hospital.

The introduction of eTriage will follow on from the work being led by the 100 days programme team to establish similar triage processes across departments. The Clinical Referrals (CR) product is being developed by Orion Health

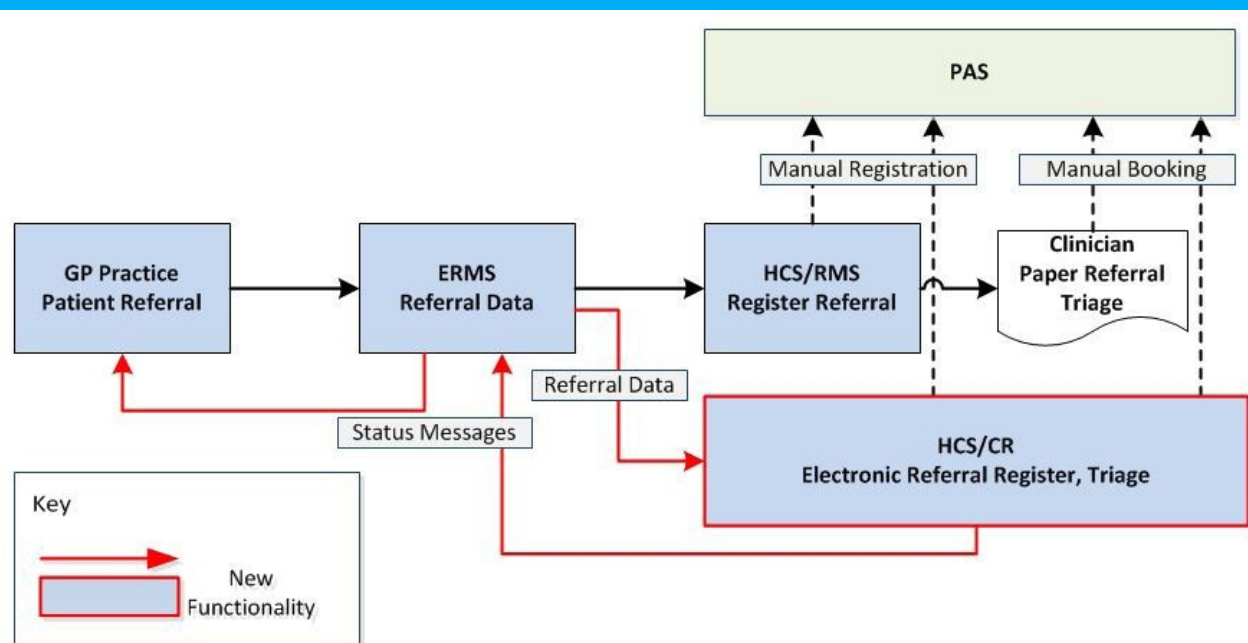
and the integration with the ERMS system by Pegasus Health and the CDHB. This is scheduled to be piloted with the General Surgery and Gynaecology departments later this year with the aim of bringing other surgical and medical departments on board in 2016.

Future phases will enable hospital based clinicians to make electronic referrals for outpatient services from within Health Connect South (HCS) and general practices to send addendums to previous referrals.

### eReferrals end-to-end

The diagram below shows the journey of the electronic referral from GP practice to hospital including the planned eTriage product, and the return of eTriage related messages to ERMS and GPs.

For further information contact: Ralph Edinger  
eTriage Development Project Manager  
[ralph.edinger@pegasus.org.nz](mailto:ralph.edinger@pegasus.org.nz)



# Supporting people with cancer – if you're able to, you should

Dene Cassin is a giving kind of guy. The Kwik Kiwi Diner owner gives money to a variety of charities including Child Cancer, the Kids Foundation and the Radio Network Special Children's Christmas Party. He helps behind the bar at the Lincoln Rugby Club and takes part in the host a breakfast campaign for Breast Cancer where \$1.50 from each breakfast bought goes to the charity.

This year Dene and his Parkhouse Road diner raised more than \$2,300 for Dry July. He was Canterbury's number one individual fundraiser and fifth highest fundraiser nationally. Last year he raised \$1650 by giving up the booze.

All these projects are very dear to his heart. Dene's wife Christine was diagnosed with breast cancer seven years ago (she is doing well) and another friend was diagnosed with the disease last year. He had a very short stint playing Golden Oldies rugby for Lincoln before injury forced him off the field and behind the rugby club bar.

Dene says knowing people with cancer gives you a different perspective on life.

"I first took part in Dry July four years ago as part of a health kick. By going 'dry' and improving my food habits I managed to lose 19kg. Last year I did it for the money too - you've got to do what you can to help others. If you're able, you should," says Dene.

He put the word out that he was off the drink through emails, Facebook and chats with friends – some of whom had done

Dry July before. Two of his Dry July supporters this year were CDHB employees –Mike Ardagh and Nikki Reid. Any personal donations to his campaign were matched dollar for dollar by the diner.

Formerly a Caltex petrol station, the Kwik Kiwi Diner is open 11 hours a day during the week and six hours on a Saturday. Counter boxes collect coins for child cancer and the diner also matches these donations dollar for dollar. Over the last couple of years the yield has been more than \$6,700.

There's no doubt it's a popular spot for truckies and local businesses who support their community by buying their food there – and popping the odd coin into the collection boxes.

Funding decisions on the use of Dry July funds are currently being made in consultation with a number of groups including consumers. More details will follow in future updates.

Below: Dene Cassin at his Kwik Kiwi Diner.



## Donations for Dry July continue to come in

Keep your eyes open for any ongoing fundraising. Donations can be made until the end of August to our [CDHB/Christchurch Hospital DJ Team](#).





# Pet Therapy so very special

**When volunteer Professor Ian Spellerberg brings in his dogs Tinker and Bess there is no shortage of people willing to pat them.**

The trio has been visiting The Princess Margaret Hospital (TPMH) wards K1 and K2 plus the Child, Youth and Family Unit (CYFU) every week for the past 18 months.

Tinker (male) is an eight year old Golden Retriever and Bess (female) is a 14 year old fluffy red and white Border Collie.

Ian explains that “from an early age both went to puppy schools and both took part in the national programme of obedience training for dogs – Canine Good Citizens. They have lots of certificates and both have received the gold level in the Canine Good Citizen Programme.”

Both dogs are very well behaved and they love meeting people.

“It was a natural progression to go from dog obedience competitions to dog therapy at The Princess Margaret Hospital. It took no time at all for them to start looking forward to visits where they now recognise and love seeing all their wonderful and special friends,” says Ian.

“Every week Tinker visits K1 and K2 and loves every minute of it. He makes lots of special friends, and receives lots of pats, smiles and sometimes tears of joy. Tinker’s presence prompts happy memories about much loved dogs – and other pets. Patting and talking to a friendly dog can bring a sense of calm and happiness. Some people find it easier to talk to a dog rather than a human,” says Ian.

Bess is a special favourite in CYFU and gets a lot of attention. She just loves to cuddle up to the young people. The children love to take Tinker for a walk and basic obedience training with him. Ian says that the very presence of the dogs prompts lots of questions and happy conversations – especially when they find out that Bess is deaf (“so sad”) and that she has taken part in fashion shoots with models wearing new season clothes (“wow!”).



Ian loves sharing his dogs with all the patients. He believes that his dogs know how people feel. He says that any voluntary work is rewarding but especially dog therapy.

“You can see the change in patient’s feeling as the dogs come up to them. All the patients are very special people and it is humbling to share my dogs with them. I do believe that dog therapy works and indeed can be very effective,” says Ian.

TPMH Volunteer Co-ordinator Angela Bustin says the benefit of pet therapy witnessed by staff and visitors reveals an overwhelmingly positive response from patients.

“The visits improve their social interaction and alertness, providing an opportunity for reminiscence and meeting the basic needs of love and belonging. The staff also get enjoyment from seeing the happy response of their patients and have commented on pet therapy being a huge success,” says Angela.

**South Island Alliance  
Programme office**  
**Aug/Sept Update**



In this issue:

- » Update from ALT/SPAIT meeting
- » Congratulations to our Allied Health Graduates

- » Meet the team: Margaret Bunker, South Island Alliance Programme Coordinator
- » SCN manager brings back learnings from UK conference
- » New Cognitive Impairment Pathway for Southern Providers
- » Safety1st System Gets South Island-wide Upgrade
- » New Partnership for Stroke Education Day

Read the latest [SIA newsletter](#) for your information.



## NZ Surgeon Honoured for Exceptional Contribution to Surgery

*The following is a media release from the Royal Australasian College of Surgeons (RACS).*

Professor Alastair Rothwell ONZM FRACS was last Thursday presented with the Royal Australasian College of Surgeons' (RACS) Colin McRae Medal in recognition of his

contributions to surgery across a long and celebrated career.

The Medal, presented to Professor Rothwell at the RACS New Zealand Annual Scientific Meeting in Queenstown, is New Zealand's most prestigious surgical award and commemorates the life and work of the late Colin McRae, an outstanding New Zealand surgeon and former RACS President.

The award recognises and promotes the art and science of surgery and surgical leadership in New Zealand and honours those who have made outstanding contributions in this field.

Upon receiving the award, Professor Rothwell said it was a tremendous privilege to receive recognition for work about which he was truly passionate.

"To receive the Colin McRae medal is certainly a great highlight to crown the end of my career.

"I had the pleasure of working alongside Colin McRae and to be given an award in his name truly is an honour," Professor Rothwell said.

An orthopaedic surgeon, Professor Rothwell was appointed an Officer of the New Zealand Order of Merit for services to orthopaedic surgery in 2006.

In 2009 he was awarded the Gold Medal for Excellence in Teaching by the University of Otago, Christchurch and this year marks his 50th consecutive year of teaching medical students.

Professor Rothwell is renowned for establishing and supervising the internationally recognised New Zealand Joint Registry.

Alongside Plastic Surgeon Stewart Sinclair, Professor Rothwell is also the founder of the Upper Limb Surgery Programme for the restoration of upper limb function for tetraplegic persons at the Burwood Spinal Unit in Christchurch. Both Alastair and the Spinal Unit have received international acclaim for their quality of surgical procedures and associated research.

In nominating him for the medal, Professor Rothwell's colleagues described him as a remarkable man with an enviable record as a surgical teacher, researcher and clinical leader.

### About the Royal Australasian College of Surgeons (RACS)

RACS is the leading advocate for surgical standards, professionalism and surgical education in Australia and New Zealand. The College is a not-for-profit organisation that represents more than 7000 surgeons and 1300 surgical trainees and International Medical Graduates. RACS also supports healthcare and surgical education in the Asia-Pacific region and is a substantial funder of surgical research. There are nine surgical specialties in Australasia being: Cardiothoracic surgery, General surgery, Neurosurgery, Orthopaedic surgery, Otolaryngology Head-and-Neck surgery, Paediatric surgery, Plastic and Reconstructive surgery, Urology and Vascular surgery.

## Farewell for Senior Dietitian

An afternoon tea was held last Friday to farewell Senior Dietitian Madeleine Price.

Invited guests and colleagues shared memories of her career and wished Madeline well for her future adventures.

Madeleine worked in Nephrology for over 20 years and has had several roles at the Diabetes Centre. More recently she has worked in the in the Bone Marrow Transplant Unit and Haematology, as well as supervising new graduates.

Thank you to Charlene Tan-Smith, Dietitian for making such a beautiful cake for Madeline.





## One minute with... **Evans Chibanguza, Social Worker and Family Violence Prevention Co-ordinator, Ashburton**

### What does your job involve?

Three days equivalent of my role is dedicated to social work support and two days equivalent is dedicated to family violence. As a social worker my role involves engaging with patients and their families and putting supports in place if needed. I also sit on the palliative care team and so am part of providing holistic care for patients and their families as they reach the end of their life's journey.

In my family violence position I work closely with the Child and Family Safety Service. My role involves consulting with staff when they have cases where they suspect either family violence or child protection is needed or both. In cases where family violence or child abuse is substantiated or disclosed I make contact with the patient either in the hospital or at home and start working on a safety plan. I also make referrals to external agencies such as the police, Women's Refuge and Child Youth and Family.

I then become the liaison between CDHB and the external agency and ensure that the frontline staff who make referrals to me are aware of the outcome of their referral. Since starting in this role I have managed to build up a good relationship with the staff in the Acute Admissions Unit (AAU) and the Lead maternity carers and they are beginning to send a lot more referrals my way.

Part of my role is to also ensure an effective multi-agency response to family violence by liaising and sharing information with other agencies involved in the area of family violence. I am part of the local Family Violence Interagency Response System (FVIARS), which is made up of representatives from the Police, CDHB, Mental Health, Probation, Child Youth and Family and Women's Refuge.

As part of my community liaison role I also sit on the Families Without Violence Network Committee which is made up of representatives from different social agencies including Safer Ashburton,

Presbyterian Support, Police, Public Health Nurses, and YMCA. This committee meets bimonthly and looks at any trends in the community as well as any gaps that might exist in the provision of family violence response services.

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

Rugby first brought me to mid-Canterbury 11 years ago. I was unable to use my undergraduate degree from Zimbabwe so I worked at the meat processing plant for Silver Fern Farms. Five years later I left that job having completed a post-graduate diploma in Social Work from Otago University and started work for Child Youth and Family as a care and protection social worker. Fast forward six years and I have now taken up this new role. Working as a Care and Protection social worker I have seen first-hand the impact family violence has especially on women and children.

While at Child Youth and Family it was always said that we were the ambulance at the bottom of the cliff, only reacting when something had happened. Coming into this new role one of the things I was looking forward to and that I have been enjoying is that apart from working with victims after a family violence incident I am also doing a lot of work on prevention and this is through early identification and making sure that people are referred to the appropriate agencies.

### What do you like about it?

I enjoy engaging with families especially when they are at their most vulnerable and walking alongside them and empowering them. My role really excites me as I have long held the view that everyone has the right to feel safe in their own home.

### What are the challenging bits?

One of the most challenging parts of my job is when I have to facilitate family meetings and we have to advise people that going home is no longer an option due to safety issues and the level of care that the patient now requires. It is more



Evans Chibanguza

difficult when we are dealing with some of the elderly couples who have been together for 50 or 60 years. They have become so used to looking after each other and want to continue to do so even if all the evidence points to the fact that this is no longer a realistic option.

With family violence, the most difficult challenge is when I work with victims who in some cases are not even aware that they are in abusive relationships or they are aware but they try to minimise everything and so are not willing to engage with any supports or live the relationship.

Family violence often follows the same pattern where there might be an incident and the victim is angry and will say things like 'I am leaving the relationship', then the abuser apologises and promises not to do it again and the victim accepts the apology, this is followed by a honeymoon phase where everything is fine and the abuser is very caring and attentive until the next incident and the pattern is repeated again. It's quite a challenge when working with a victim who is in the honeymoon phase because they are not willing to engage and they convince themselves that things are better and their partner won't hit them again even when this pattern has repeated itself multiple times in the past.

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

I am fortunate enough to work with a lot of amazing people but the people I admire most especially in the family violence space are Jim Sole from the police and Gail Rowland from Women's Refuge. Both Jim and Gail are so passionate about preventing family violence and they are always going above and beyond the call of duty to ensure safety for victims of family violence. Both Jim and Gail have an amazing ability to engage with family violence victims who in some cases are reluctant to engage with professionals for various reasons.

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

The Lateshow Fun Facts, by David Letterman. Fun Facts used to be a segment on Letterman's show and he created this fictitious organisation called the Federal Bureau of Miscellaneous Information (FBMI) whose role it was to create fun facts which he referred to as

infotainment as they are educational as well as entertaining.

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

Back home in Zimbabwe. I come from a large extended family and one thing I miss about being in New Zealand is the family gatherings we used to have. If I was in Zimbabwe right now I would also be considerably warmer so it would be a win win.

### My ultimate Sunday would involve...

This would have to be one of the many Sundays I had growing up in Zimbabwe. I am Catholic so the day would start with mass in the morning then a braai (or bbq as it is called here) with family and friends before going to watch a football match, which we would miss most of because we would be too busy dancing and singing in the stands. In the evening I would sit round a fire roasting maize and peanuts with my brothers and cousins and we would talk rubbish for hours and hours. Good times.

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

I am willing to try anything at least twice, the first time to see whether I like it or not and the second time to confirm my initial assessment. After two tastings of oysters I just don't understand what the hype is all about as I did not enjoy them at all. I just don't understand why people go crazy over the Bluff oyster season every year.

### My favourite music is...

I listen to bits of everything except heavy metal.

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**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).**

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## a career with us...

### Section Head – Endocrinology and Steroid Laboratory

Work for the leading medical diagnostic reference laboratory in New Zealand - Canterbury Health Laboratories (CHL). The laboratory links with collaborative partners throughout New Zealand and the world. We now have a key vacancy as head of our newly created Endocrinology and Steroid laboratory.

We test for a variety of disease and health markers such as hormones, proteins, peptides and vitamins using techniques including immunoassay and mass spectrometry. The IANZ-accredited laboratory consists of Scientific Officers, Medical Laboratory Scientists and Medical Laboratory Technicians and is responsible for delivering 70+ medical tests.

Our ideal candidate will have a strong scientific background and be expected to provide scientific direction and leadership, as well as taking part in the training and development of our staff. Excellent communication skills, both oral and written, are essential. Proven ability in immunoassay and mass spectrometry are highly desirable, as are computer literacy and problem solving skills. Endocrinology expertise would be a significant advantage.

The ability to provide technical oversight and strategic leadership is essential. A tertiary science qualification will be an advantage, as will a record of scientific publication. You will be leading a well-established diagnostic section with

expertise in delivering specialist clinical tests to both primary and secondary care providers.

Enquiries should be directed to Heather Ewing, Recruitment Specialist on 03 337 7920, email [heather.ewing@cdhb.health.nz](mailto:heather.ewing@cdhb.health.nz).

### Sonographer

We're looking for general Sonographers to join our busy team delivering patient-centred services in a supportive environment.

Our innovative radiology service is committed to excellence and equipped with the latest diagnostic imaging technology. Our supportive team of radiologists and clinicians are some of the best in the country and we are constantly redefining 'best practice' in radiology.

You will hold or need to be eligible for registration with the New Zealand Medical Radiation Technologist Board (MRTB). These roles are full time, fixed term until December 2018 with commencement dates from early to mid-2016. We would consider both short and long term contracts for these vacancies so contact us today and find out just how we can work with you to secure the opportunity that's right for you!

Please apply online or to discuss this role in more detail contact Philip Adamson, Recruitment Specialist at [philip.adamson2@cdhb.health.nz](mailto:philip.adamson2@cdhb.health.nz) or on +64 3 337 7958



# Pegasus Health Announces Winners of Quality Recognition Awards

The 2015 Pegasus Health Quality Recognition Awards, held on Saturday 18 July at the Air Force Museum in Wigram saw over 300 guests from general practice, community pharmacy, industry partners and Pegasus staff gather together for a night to celebrate innovation, team work and excellence in primary care.

The awards, held biennially, involve those working within primary healthcare nominating their colleagues for the outstanding contributions they make to primary healthcare in Canterbury. This year saw a large number of nominations across all of the awards categories.

"We received a high volume of quality nominations this year which was just wonderful to see," said Michael McIlhone, Pegasus Health Director of Nursing. "It makes the decisions more challenging for the judging panel, but demonstrates the extent of innovation and excellence throughout primary healthcare in Canterbury."

Pegasus Health would like to congratulate the deserving winners of the 2015 Quality and Recognition Awards:

**Outstanding contribution to a General Practice Team by a General Practice Member:** Bernice Hey, Marshlands Family Health Centre

**Outstanding community participation and engagement by a General Practice Team:** Kaikoura Healthcare (pictured below with John Magee)



**Outstanding innovation within the multi-disciplinary team that has improved the delivery of patient focused care:**

Selwyn Street Medical Centre, Fiona Blair-Heslop and Ronnie Ellis (pictured below with David Meates)



**Outstanding teamwork demonstrated by a Pharmacy working with General Practice:** Hardings Pharmacy

**Outstanding contribution to Clinical Quality and Education:** Maria McIntyre (pictured below) of Unichem Bishopdale Pharmacy



**Community Leadership:** Karen Carpenter

**Leadership and General Practice:** Dr Jan Whyte

**Positive System Change:** Acute Demand Community and Coordination Team (pictured below)



**Leadership in Integration:** Kim Sinclair-Morris (pictured below)



**Pegasus Champion:** Steve Boomert

View the full [media release here](#)



# Waste audit reveals waste

An analysis of waste produced by Community and Public Health has revealed that a significant amount of money could be saved if people made some small changes.

Sustainability Officer James Young says many of the materials thrown into general waste over a three day period could have easily been diverted away from landfill.

"Less than 20 per cent of the material sent to landfill actually needed to be sent there. We need to reduce what we send to landfill if we are going to reduce our carbon footprint, and an easy way to do this is to be more careful with what we throw away," says James.

Over three days nearly 15 kilograms of waste was put into bins to be sent to landfill. Of this 40% was food which could have been put into a food scrap bin which provides chicken feed, and 34% was paper which can be recycled for no cost to the CDHB.

"Disposable coffee cups made up 5% of the material being sent to landfill. These cups aren't recyclable but can easily be substituted for re-usable coffee cups," says James.

Over the next few months James will be working with staff to reduce the amount of carbon generated. This will include further measures to improve waste management and recycling, energy efficiency improvements, and encouraging staff to sign up to the Clever Commuters active and alternative transport programme.



Community and Public Health staff Meg Christie, Mary-Ann Heal, Diane Shannon and Lee Tuki during the audit.



James Young talks to CPH staff about the findings of the audit.



## NEW this year to the Quality Improvement and Innovation Awards: Poster Competition

Enter a poster you have already prepared or use our template to showcase your quality improvement initiative.

Posters due 28 August, any enquiries contact [irena.derooy@cdhb.health.nz](mailto:irena.derooy@cdhb.health.nz)

<http://cdhbintranet/corporate/Quality/SitePages/Quality-Awards.aspx>

## Postgraduate Study Information Days

Learn about health-related postgraduate study options at the University of Otago, Christchurch in 2016.

Tuesday 18 and Wednesday 19 August, 11am to 3pm.  
No appointment needed.

Full details at [www.otago.ac.nz/christchurch/study](http://www.otago.ac.nz/christchurch/study)



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**Research Radar**  
 Christchurch

## Universities & Canterbury DHB working together on better sepsis test

A team of Christchurch researchers, scientists and clinicians are collaborating to find better ways of predicting and diagnosing the expensive and often deadly condition of sepsis.

The team includes researchers from the University of Otago, Christchurch; the University of Canterbury; and scientists and clinicians from Canterbury District Health Board and Canterbury Health Laboratories.

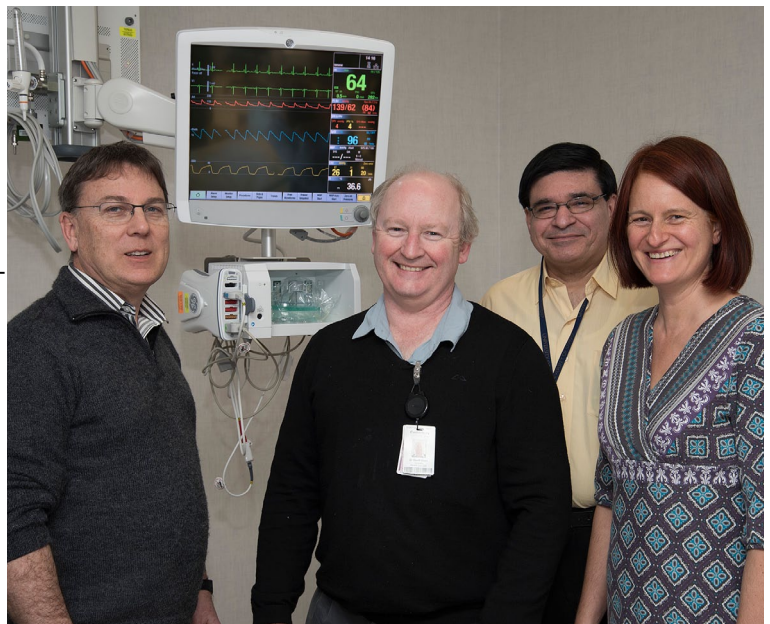
Dr Anitra Carr is a researcher with the University of Otago's Christchurch-based Centre for Free Radical Research. She says sepsis accounts for more than 10 per cent of intensive care admissions in New Zealand and Australia, has mortality rates as high as 40%, and is one of the more expensive conditions to treat. Despite this, treatment options are limited and attempts to develop new therapies have been largely unsuccessful.

She and a Christchurch collaboration on sepsis will study levels of selected biomarkers in intensive care unit (ICU) patients with and without sepsis to determine if any, or any combinations, of biomarkers have potential as tests or predictive tools.

Dr Carr says being able to better determine which patients are likely to develop sepsis will mean earlier, and more successful, intervention.

The team includes intensive care specialist and researcher Professor Geoff Shaw; the Otago University's inflammation expert Professor Madhav Bhatia along with its infectious disease experts Professors David Murdoch and Steve Chambers; and Associate Professor Steven Giesege from the University of Canterbury's School of Biological Sciences.

The team has started recruiting patients for the year-and-a-half-long research project.



From left, Associate Professor Steven Giesege, Professor Geoff Shaw, Professor Madhav Bhatia and Dr Anitra Carr.



working with

**Canterbury**  
 District Health Board  
 Te Poari Hauora o Waitaha

## Department of Psychological Medicine, University of Otago, Chch & SMHS, CDHB Tuesday Clinical Meeting

Tuesday 18 August March 2015, 12:30 pm – 1:30 pm

Venue: Beaven Lecture Theatre, 7th Floor, School of Medicine Building, University of Otago

**Title: “The MindSight research project: preliminary results”**

**Presenters: Robert Green and Dave Carlyle**

Chair: Dr Peri Rennison

Special notes

- » These meetings are held on a weekly basis (except during school holidays)
- » A light lunch will be served at the School of Medicine venue, 7th Floor, from 12 noon.
- » Psychiatrists can claim CME for attending these meetings.
- » The sessions will be broadcast to the following sites:

For TPMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at TPMH.

For Hillmorton attendees the venue is the Lincoln Lounge, Admin Building, Hillmorton Hospital.

The dial in address is: Psych Med Grand Round.

If you have difficulties dialling in please call 0800 835 363 to be connected.

## Wellbeing Workshops

2015

For All CDHB Staff

“ The greatest wealth is health “  
-Virgil

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

The CDHB acknowledges the crucial role you play in the delivery of high quality care to the Canterbury community. In the current Christchurch environment it is more important than ever that you take the time to focus on your own wellbeing.

2.5 hours to focus on YOUR wellbeing!

We are running a number of workshops in 2015 to allow you to put your wellbeing first. Evidence suggests that by doing this, those around you – your family, friends, your colleagues and patients will also benefit.

### 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
- Appreciate the progress of recovery for communities and individuals
- Gain skills and take ownership of tools for increasing your own and others' wellbeing
- Improve your health and wellbeing: 5 Ways to Wellbeing, Staff Wellbeing Programme
- Enhance positive relationships and social connections

### Workshop Details:

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

[Click here to register](#)



**Canterbury**  
District Health Board  
Te Poari Hauora o Waitaha



For more information contact:

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027 689 0285

Andy Hearn  
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027 218 4924

## Last call for Abstracts for the People in Disasters Conference February 2016



This is a fantastic opportunity for you to publish your abstract or short report of this presentation in the Australasian Journal of Disaster Trauma Studies.

Themes include (but not limited to):

- » Immediate response – who responds and why?; preparation and management of responders and volunteers; personal, professional and community impact; living through and responding to a disaster, the role of social media.
- » Early recovery – managing the built environment, prioritisation of response and recovery; the role of health systems – primary care, mental health services, communication and public awareness.
- » Recovery over the long haul – vulnerable populations, physical and psychological recovery of casualties, the role of animals, economic impacts of disasters on people.
- » Resilience – international models and strategies for building resilience in people, partnerships for resilience, communication and public awareness.

More info: Abstracts: <http://www.peopleindisasters.org.nz/abstracts.asp> - closes 21 August 2015

Also please note that - Early Bird registration closes 31 August 2015 (\$391.30 +GST).

Registration: <http://www.peopleindisasters.org.nz/registration.asp>



## Staff Wellbeing Programme: Additional Staff Wellbeing Workshops – due to high demand

### Staff Wellbeing Workshops

Due to high demand we have arranged three additional Staff Wellbeing Workshops. [Click here](#) to register – [click here](#) for more information

- » Thursday 8 October, 9.30am to 12noon, ChCh Campus
- » Tuesday 13 October, 1pm to 3.30pm, TPMH
- » Tuesday 20 October, 1pm to 3.30pm, ChCh Campus

### Residential Advisory Service (RAS)

Residential Advisory Service (RAS) are running FREE 30 minute appointments with a lawyer to help progress your EQC/Insurance issues.

[Click here](#) for more information. These sessions are run at main hospital sites. The RAS offers:

- » 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

### FREE Retirement/financial planning advice and information about house buying/home loans

See an Authorised Financial Advisor or Home Loan Expert free of charge at main hospital sites. [Click here](#) for more information

For more information on all wellbeing initiatives visit the [Staff Wellbeing Programme intranet page](#)

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](mailto:andy.hearn@cdhb.health.nz)



## Help with email

One of the standard ways many of us communicate at work is via email.

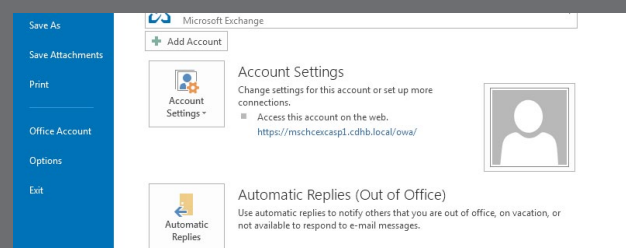
Email messages can be time consuming – writing, sending (appropriately), reading, responding – it all takes time out of our day.

There are ways to do this efficiently and each week we'll share a tip or trick with you as provided by our Information Services Group.

Look for the image above in the update to find the weekly tip.

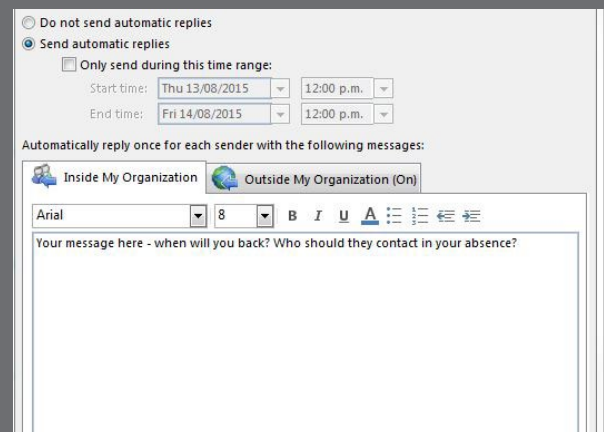
Okay – so you're in at work today but you've got tomorrow off. How do you let people know you won't be work?

- » While in outlook, click on the file tab at the top left.

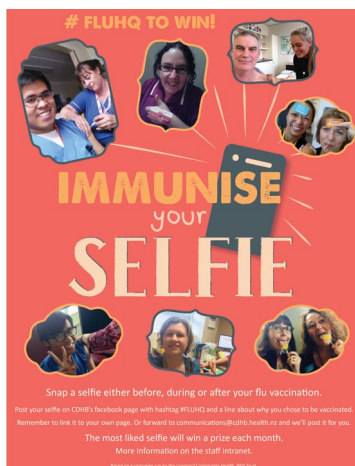


- » Click on the Automatic Replies (Out of Office) option shown above.
- » Tick the box – send automatic replies

You have many options here.



- » You can set the period for the message to be sent to people emailing you.
- » You can put different wording for internal (from people at CDHB) and external contacts.
- » When selecting fonts remember that Arial is the official CDHB font and the size should be easily readable
- » Key information to include in this message is when you will be back at work and who they should contact in your absence.



## Staff...there's still time to immunise your selfie

Influenza activity in Canterbury is on the increase with the numbers of patients attending general practices and hospital escalating. It's more important than ever to get your vaccination. The staff vaccination programme is almost over, but there is still time.

Further clinics scheduled

### Christchurch Hospital

Tuesday 18 August, 10.00 – 14.00, Great Escape

Thursday 27 August, 10.00 – 14.00, Great Escape

The above clinics are all combined flu and general vaccination clinics.

### The Princess Margaret Hospital

Contact your local authorised vaccinator or contact [kirsten.herrick@cdhb.health.nz](mailto:kirsten.herrick@cdhb.health.nz) for assistance.

### Specialist Mental Health Service

Vaccinations are available from the Clinical Services Unit, Te Awakura, Building 2, Hillmorton Hospital. But, please ring first to make an appointment ext. 33699.

### Ashburton Hospital and Rural

Authorised vaccinators can vaccinate on the wards as able. Make contact with these people:

- » Paula Burgess – AAU
- » Deborah Hanrahan - AAU
- » Fay Jones - Ward 6
- » Sheila Lyons - Ward 1 & Home-based support

- » Sharon Greenslade - Ward 1
- » Amanda Van Asperen - Nurse Educator
- » Jill Gerken - CNS Infection Prevention & Control
- » Rural Hospital staff please contact your Nurse Manager for guidance.

### Burwood Hospital

Authorised vaccinators can vaccinate on the wards as able. Make contact with these people:

- » Nerilee Kidd
- » Emma Lanyon
- » Saskia Gibbs
- » Fiona Graham

If you can't attend a clinic contact your local authorised vaccinator - [click here](#) for details or contact [kirsten.herrick@cdhb.health.nz](mailto:kirsten.herrick@cdhb.health.nz) for assistance.

Did you get your flu vaccination at your General Practice?

If you received your flu vaccination at your General Practice please let us know by completing this quick [form](#).

**HANDS  
CAN BE DANGEROUS  
CLEAN HANDS KEEP BUGS AT BAY**

IMAGE COURTESY OF ITALIAN ARTIST GUIDO DANIELE [WWW.GUIDODANIELE.COM](http://WWW.GUIDODANIELE.COM)

