

Wear pink this Friday and support Pink Shirt Day

Kōrero mai, Kōrero atu, mauri tū, mauri ora. Speak up, stand together and stop bullying.

If you can, I encourage you to join me in making a stand against bullying this Friday by wearing pink. The aim is for Aotearoa to be transformed into a sea of pink to spread aroha and kindness, celebrate diversity and put an end to bullying.

Unfortunately bullying is common in workplaces, and it can be difficult to know what you can do to prevent and address it. If you or someone you know is experiencing bullying, please check the [information on bullying](#) and [what to do about it](#) available on max. and together let's create and support a workplace environment where bullying cannot flourish. Become an 'upstander' and learn ways you can build and sustain a positive working environment.

Upstanders are people who notice bullying behaviour and address it to help someone who is being bullied. Bystanders, in contrast, are people who notice bullying behaviour but don't – or cannot – help.

I talk more about it in [this week's video](#).



Tāngata Ora | Our People survey 2021 – last week to complete

A shout out to the thousands of people who have already completed their survey. It's open until the end of day 23 May, so it's not too late to have your say. Look out for the email from *Canterbury District Health Board via AskYourTeam* in your inbox for your individual survey invite. Reminder emails are also being sent to those of you who are still finding the time to complete the survey – 15 minutes is all it takes. We will provide feedback on key themes and will look to set concrete actions as a result of your insights. All leaders will be expected to use the data from this survey to set priorities for their areas.

Tāngata Ora
Our People Survey | 2021

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Accelerating our Future

Since 1 July 2020 until the end of March 2021, we've realised savings of \$20 million. This is a fantastic result given the high levels of acute demand continuing to be experienced throughout our health system. The savings come from a variety of initiatives ranging from one off big-ticket items such as removing extra capacity in rostering to cover higher admission rates in winter 2020, sustainable ongoing savings due to different choices when it comes to consumables and down to many smaller amounts – every



ACCELERATING OUR FUTURE

Hapaitia te ara tika pūmau ai te rangatiratanga mo ngā uri whakatipu

dollar counts. We are still looking for ideas from staff for ways to sustain quality of service while improving our financial sustainability. I'm sure many of you have more ideas that could make a difference.

Thanks to everyone working so hard to meet the surge in acute demand

Last week we saw a huge increase in acute admissions and it appears to be across the board for a wide range of health issues. I know it created a lot of challenges for those working in all of our hospitals as well as primary care. Providing capacity for acute care and admissions was a priority for teams last week.

I'd like to give a big shout out to everyone involved for continuing to put the patient and their whānau at the centre of our decision-making, and for working so hard to ensure the very best use of the available resources.

Managed Isolation and Quarantine staff survey - a sobering reminder of the stigma of working with people returning from overseas

I was saddened and disappointed to hear that there's still fear and discrimination shown towards our teams working in our Managed Isolation and Quarantine facilities (MIQF). Hearing some of the comments from staff about how where they work has impacted their private and family lives was shocking. Some have had difficulties accessing medical and dental care, others haven't attended or held social events due to fear and perceptions that they will be spreading COVID-19.

I have met with a number of our MIQF staff and was so impressed by their protocols and meticulous attention to following infection prevention and control guidelines and using Personal Protective Equipment appropriately.

See the high-level summary of the survey in the short video on [page 8](#). The full survey report is also [available on our website](#).

I commend you all to support those who are working so hard to keep our communities free of COVID-19. It's so easy to take the freedoms we enjoy for granted. This week, I ask you all to support your colleagues working at the border and in our MIQF facilities. If you have a message for the MIQF team, I'm happy to pass it on. Drop me a line at askpeter@cdhb.health.nz.

Remember to speak up, stand together and stop bullying.

UNDER THE WEATHER?

Make your GP team your first call 24/7

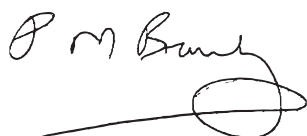
Canterbury
District Health Board
Te Pōti Hauora o Wairarapa



COVID-19 vaccination – on track and planning underway for wider reach in the near future

Finally, we remain on target with our COVID-19 vaccinations with the teams planning for the next stages of the rollout in Canterbury. Our COVID-19 vaccination reach is extending every week, and this week we have staff on Rēkohu, The Chatham Islands, where plans are being finalised to start vaccinating in late June at NZ's most remote islands, Pitt Island and Chatham Island.

Ngā mihi nui



Peter Bramley, 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. Please note the deadline for story submissions is midday Thursday.

If you're not a staff member and you want to subscribe to receive this newsletter every week please [subscribe here](#).

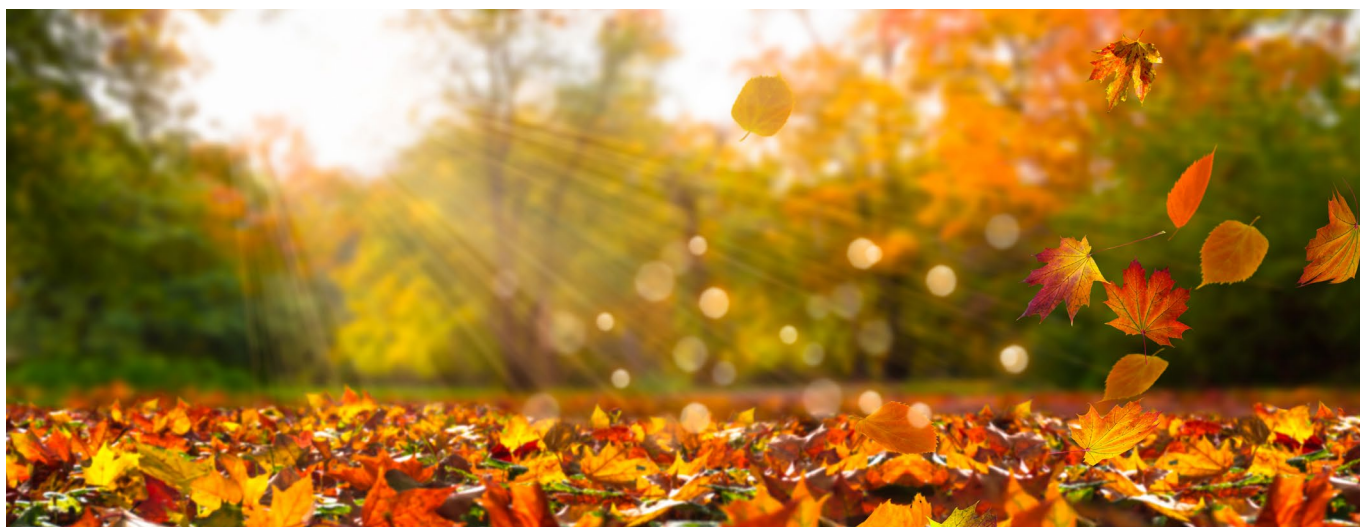
Scan. Scan. Scan.

Everywhere you go, everywhere you can.

All staff should scan in daily using the
COVID-19 Tracer App.

Unite
against
COVID-19





Bouquets

Sharon Schneider, Endocrine Department, Thyroid Clinic, Outpatients, Christchurch Hospital

I would like to thank Sharon who booked an appointment for [patient's name] to see the Endo doctors. She was able to bring the appointment date forward and we are very appreciative. Thank you very much Sharon, your understanding of our situation has been noted.

Te Awakura, Hillmorton Hospital

Staff at reception are always very calm, approachable and friendly, which is really nice.

Delivery suite, Theatre, Acute Observation Unit, and Maternity ward, Christchurch Women's Hospital

Immediately following the birth of my daughter, I had a large postpartum haemorrhage, the staff who assisted in this emergency were absolutely amazing. Registrar Kate was so kind, despite me yelling and screaming due to the pain. She remained calm and explained everything when I needed her to, both in the delivery suite and later in Theatre and again the next day in the Acute Observation Unit. Anaesthetist Max was also incredible, he kept me calm and explained everything that was happening, all the drugs that were being given to me. I can't thank Kate and Max enough for helping me that night, and probably saving my life, thank you, thank you, thank you.

Also, the midwives, nurses and hospital aides on the Acute Observation Unit and the Maternity ward. I'm sorry there are too many to name, thank you for your care of me and my baby. Even though you're working in an obviously busy place you provided great care while making me feel like you didn't have 100 other jobs to do. As a nurse it was humbling to be 'on the other side', you are all a credit to Canterbury

DHB and it made me proud to also be a part of that team. Once again, thank you all so much.

Christchurch Women's Hospital

Jacqui and Sonja in the Maternity Assessment Unit were great. I came in in a lot of pain and not knowing what was going on, and they were very calming. Emily Bartrop the hospital midwife and the emergency c-section team were amazing and explained everything as we went. Helen and Eileen and all the women in the recovery section were brilliant. Once we were in a room in the main maternity ward, a number of people were great. A hospital aide named Aleshia and the lactation consultant Robyn. I apologise if any of these names are wrong - names are a bit of a blur! In any case we want to thank them very much.

Child Health Services, Christchurch Hospital

Our whānau would like to thank the staff on Ward B7 for their amazing care of our daughter. Nothing has been too much trouble and the support has been amazing. Huge thanks to Sayako, Ruby and Shannon for their incredible nursing skills. The kai has been delicious. Thank you for the whānau room, so nice to be able to make a hot drink, store food etc. To be able to sleep beside our child while she was ill was a real privilege. The design of the new hospital is just amazing – what an incredible resource to have in our community. As people who live further away, we so appreciated the flexibility from everyone.

Gabby, Acute Medical Unit, Christchurch Hospital

I want to thank nurse Gabby in the Acute Medical Unit. My father came in on a night shift with a stroke. He was struggling to come to terms with his diagnosis and Gabby sat with him for so long, explaining everything while

comforting him and me when everything became too much. This was all the while clearly being very busy with a lot of other patients. She made an awful situation a lot better for the whole family and we are all so grateful.

Gynaecology surgery and Ward 2, Christchurch Women's Hospital

I received surgical and post-surgical care from Dr Bryony Simcock, Dr Katherine Grant and the Ward 2 nursing team. My request is that Dr Simcock, Dr Grant and the surgical team and the post-operative nursing team are acknowledged for their excellent treatment and care. The process was well co-ordinated and personalised. Team members were responsive to my needs, professional and caring. Issues with our health services nationally and regionally are often in the media but too often the doctors and nurses, and other team members who deliver services are not acknowledged for their provision of excellent treatment and care at an individual patient level.

Orthopaedics, Christchurch Hospital

I have been in hospital for six days with a fractured hip. I have received excellent care from the Orthopaedic department staff. The nurses were all professional, kind, and looked after me well. The support staff were also amazing. I remain indebted to them for my care both physically and mentally.

Orthopaedics, Christchurch Hospital

I would like to express my appreciation for the kindness and compassion Angela Harrison gives to patients in Orthopaedics... it was refreshing to receive some genuine kindness... I would also like to add it has been lovely to be treated so kindly and sometimes with a little bit of humour by the hospital doctors, as it did put myself at ease and calm my nerves a little bit.

Burwood Day Clinic

A huge thank you to everyone involved in my care. I have been given the gift of encouragement and hope in a very difficult and so, so much tortuous time for me. I have gained much knowledge within the walls of the clinic. I found the clinic to be a safe, warm, calm and caring environment, staffed by very special, wonderful, professional people. To Dr Johnstone and my nurse Margo, you always showed me empathy and understanding at all times. Thank you. I greatly appreciate all your help and support given to me over my attendance. Thank you.

Ellen, Ward 11, Christchurch Hospital

Thanks to Nurse Ellen, super friendly, helpful and knowledgeable. Won't be afraid to come back here again.

Level 3, Outpatients, Christchurch Hospital

Very helpful staff, well organised.

Surgery, Burwood Hospital

- Excellent service. Doctor very forthcoming with all information. Good efficient service.
- Great system. Excellent staff. Many thanks.
- Thank you for your work.
- Very professional staff. Made to feel comfortable and safe. Good job, well done, good work.

Joy, Orthopaedic Outpatients, Burwood Hospital

I came in for my preadmission and I was very nervous because I am very scared about having this operation, but the moment we began the tests, Registered Nurse Joy made me feel relaxed. She was just so kind and explained everything so well, she even dashed off and got me a glass of water to settle me. I would like to thank her so very much.

Ward HG, Burwood Hospital

I am writing this as a way of showing my appreciation for the hard work and dedication of all the staff involved in my care, from the health care assistant to the nurses. They have, and are, looking after me very well indeed.

Ward C2, Burwood Hospital

- Thank you to C2 staff for wonderful care and attention.
- Many thanks for all your wonderful care and kindness.
- Thank you for wonderful care, kindness and generosity.

Christchurch and Burwood hospitals

I promised the nurses at Christchurch and Burwood hospitals that I would write to the DHB and also send a message to our Prime Minister to let them know about the wonderful, kind and knowledgeable way I (and other patients) were looked after... how kind and helpful each person was... including the WellFood staff and cleaners, the doctors and the chaplain. I will also add a thank you for continuing and battling on during such a high-pressure time in our history.

Emergency Department, Christchurch Hospital

Thank you so much for your loving, kind care. Nurse Practitioner Kelly, Radiographer Catherine, Dr Clair and my lovely nurse, very helpful explanations. Also, a caring receptionist. Thank you so much for helping me with my liver pain. Love and blessings for your kindness enabling us to keep going so we can love and care for our families. Thank you to you all.

5th Floor, Riverside, Christchurch Hospital

Numerous visits over the years. Staff always pleasant. Don't always run on time but understandable and happy to wait. Great job people.

Welcome boost to endoscopy capacity

Planning for an increase in endoscopy capacity has been ongoing for some time, but the recent opening of Waipapa has provided space for the Gastroenterology Day Unit to expand – with two additional procedural rooms.

Associate Professor and Clinical Director of the Gastroenterology Department, Catherine Stedman says she is delighted to be able to share this great news.

“Coupled with the go-ahead to recruit two additional gastroenterologists and appropriate nursing staff, this means we will be able to do significantly more endoscopy procedures (including gastroscopy and colonoscopy).”

An endoscopy is an examination of the upper digestive tract (the stomach and duodenum) using an endoscope – a long soft flexible tube, containing a camera and a light. It is usually ordered to investigate the cause of abdominal pain, vomiting, bleeding or anaemia, and to make or confirm a diagnosis.

An additional 2500 procedures can be performed in the 12 months from July this year, and more than 3500 extra procedures from July 2022 the following year.

“This addresses the high numbers of patients we are seeing that require increasingly complex procedures and will particularly benefit our more vulnerable patients, those that need specialist medical and nursing care for endoscopy procedures. It will also shorten waiting times for those needing a procedure.”

Although the planning for this capacity increase predates Canterbury’s inclusion in the National Bowel Screening Programme (NBSP), being able to do more endoscopies will also enable Canterbury DHB to better meet the increased number of colonoscopy requests it generates, she says.



Associate Professor and Clinical Director Gastroenterology Catherine Stedman in one of the current procedure rooms

Lead clinician for the Canterbury programme, Teresa Chalmers-Watson, says the NBSP promotes early diagnosis and treatment of bowel cancer and pre-cancers.

“It’s so important because it finds bowel problems early which gives us, and most importantly the patient, a higher chance of successful treatment and a much better health outcome.

“We are delighted, thanks to the programme, to have found 25 cancers already that might otherwise have gone undetected until it was too late. As well as enabling the team to treat more complex cases, this additional endoscopy capacity also better enables us to do the follow-up work created by the NBSP,” Teresa says.

Catherine says the team are also continuing to explore additional longer-term solutions, so that the service can meet the anticipated needs of the Canterbury population in the years ahead.

Canterbury DHB signs waterways partnership charter

Canterbury DHB has become a signatory to the [Community Waterways Partnership Charter](#).

Chief Executive Peter Bramley signed the charter last Friday with a representative for the charter, Clive Appleton, from Christchurch City Council.

Canterbury DHB was invited by the council to become a signatory to the charter, which was launched on 22 March this year. The charter is a collaborative partnership that supports the development of community-based initiatives to improve the ecological health, indigenous biodiversity and the amenity value of our urban waterways.

Team Leader – Communities, Community and Public Health Tim Weir says it is fantastic for Canterbury DHB to be committing to this cross-sector partnership.

“Promoting waiaora is essential for supporting the wellbeing of current and future generations. Being involved with protecting, restoring and rejuvenating our waterways contributes to all aspects of our hauora/health – whenua (land and roots), tinana (physical), wairua (spiritual), hinengaro (mental and emotional), and whānau (family and social).”

Signing the charter builds on collaborative work Community and Public Health’s health promoters have already been a part of, including the Healthy Ōpāwaho collaborative communities’ education project, he says.



From left, a representative for the charter, Clive Appleton, from Christchurch City Council and Chief Executive Peter Bramley

The Charter is a shared statement of intent among community groups, iwi, researchers, businesses, and local, regional and central government. It seeks to work in partnership to achieve outcomes that cannot be achieved independently.

This will be done by sharing expertise, networks and resources to promote and achieve solutions needed to improve the ecological health, indigenous biodiversity and amenity value of our urban waterways. The charter upholds Te Mana o Te Wai to actively protect and enhance the mauri of Christchurch urban waterways.

New survey highlights pressures for Managed Isolation and Quarantine Facility workers

A survey of around 360 Managed Isolation and Quarantine Facility (MIQF) workers in Canterbury has shed light on some of the difficulties faced by this essential section of our healthcare work force.

Findings released this week show that while many felt supported by management and appreciated by those staying at the facilities, the effect of working in MIQF has taken a toll on workers' lives.

The Canterbury Regional Isolation and Quarantine (CRIQ) leadership were concerned by reported incidents of stigma and discrimination experienced by staff working within the Canterbury MIQF network. They commissioned the Information Team at Community and Public Health to conduct a rapid literature review and survey of MIQF staff which was undertaken in late 2020.

The survey found that a majority of workers were proud of their contribution to the country's COVID-19 response and felt well supported and valued by guests and management of MIQFs. A small number felt they had been treated more positively because of their role, but these were by far the minority.

Unfortunately, many of respondents reported being treated unfairly because of their work. Some also reported that this discrimination flowed through to their family or whānau.



Many respondents indicated the lack of understanding from the public about MIQFs was a key problem, and they worried about the continued negative media coverage. The survey results have highlighted the fact that there is still a lot of work to be done, both in supporting our MIQF workforces and educating the public, the media, and our own health services about what goes in quarantine facilities and the realities faced by staff.

The full report and a summary document [are available on our website.](#)

Success in the pool for health care assistant

Health Care Assistant (HCA) Hayley Butler came away with medals and ribbons after successfully competing in the recent Regional Special Olympics swimming competition in Christchurch.

The event attracted 52 swimmers from five regions.

Hayley won a silver medal in the 25m freestyle event, a silver medal in the 25m backstroke and a bronze medal for the 50m freestyle, as well as two fourth place ribbons in the relay races.

Special Olympics offers sports for people with disabilities to help promote social inclusion through shared sports training and competitions. Hayley chose swimming as her preferred sport and has been training with the Canterbury swim team since she was in high school. As a club they meet once a week for training and Hayley often swims at least one other night a week.

Hayley loves to swim and seeing her friends at training is just as much a part of it as the results, says her mother, Karen Butler.

"She really enjoys going to the competitions; the athletes really support each other and as parents there is nothing better than hearing the laughter and happiness of all the athletes catching up together."

Her colleagues in the Burwood Spinal Unit are proud of her achievements, says Charge Nurse Manager Ward HG Maria van den Heuvel.

"Hayley is a permanently employed member of the Spinal team working 30 hours a week. She first started in the unit as a Project SEARCH intern."

Canterbury DHB's Project SEARCH is a business-led internship for high school leavers aged 18-21-years-old who have learning disabilities, and who want to enter the workforce. Over the course of an academic year, interns complete three 10-week internships in roles which suit their interests and skills, and in which they conduct meaningful work for the organisation.



Health Care Assistant Hayley Butler

The total immersion one-year internship is designed to give students marketable work experience and skills to compete for a job in their chosen field.

Special Olympics runs four different levels of competitions. Athletes can choose to complete in any stroke and anything from 15m races to 100m races. The next level is a Tier 3 National Summer games which are held every four years.

Hayley is training for this and hoping to be selected to go to Hamilton in December as part of the Canterbury team.

Online learning module now available to assist with data-led decision-making

Everyone in Canterbury DHB is expected to use data and evidence to make decisions, especially when it comes to patient care and improving our services.

To make this easier for you, the learning design team has put together an online module to build your confidence and help you make data an everyday part of your work.

A global survey of 9,000 people found some surprising results about how people make decisions. Almost half of people (48 percent) prefer to make decisions based on their intuition, rather than insights from data.

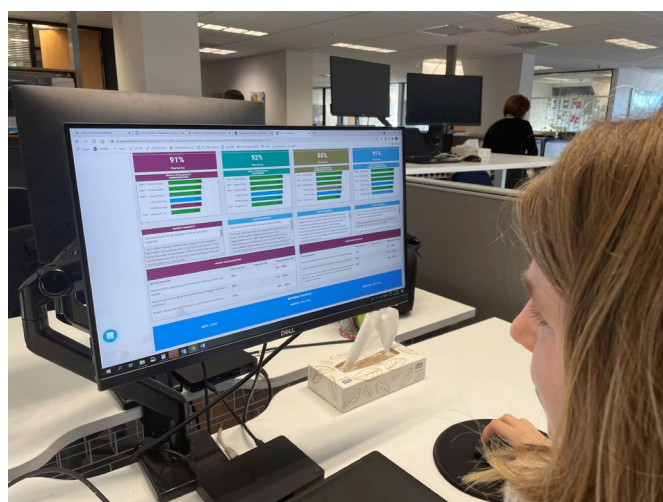
What's more and perhaps more surprising, this preference is more common among chief executives, senior managers and directors. When asked how they make decisions, two-thirds (66 percent) of senior employees said they go with their gut feeling instead of what the data tells them! [The Advisory Board, USA]

While it's sometimes important to trust your instincts, these findings show that leaders in many organisations are holding back when it comes to data-driven decision making.

The new learning module to help address this is available on [healthLearn](#). The name of the course is 'Using Data to Make Decisions'.

If we truly engage with what our consumers are saying, we should be designing our services around their feedback. Listening and acting on consumer feedback helps us improve our services.

Staff can view comments in the Patient Experience section of the 'Seeing our System' page on PRISM and can filter to their ward/service to see what our consumers are telling us in the latest [Patient Experience Reports](#) – they are brief, in plain English and illustrated with infographics for clarity.



Learning Design Team member Alisha checking out the patient experience survey dashboard

“Data from a variety of sources can help health care organisations develop more fact-based, data-driven answers to important questions, rather than relying on intuition.”

– The Advisory Board, USA



CCDM

Care Capacity
Demand Management

Safe staffing, healthy workplaces

Live data on Care Capacity Demand Management now available

A new dashboard showing Canterbury DHB data for every ward and area will give people at every level a more detailed and accurate view of what's going on in that department.

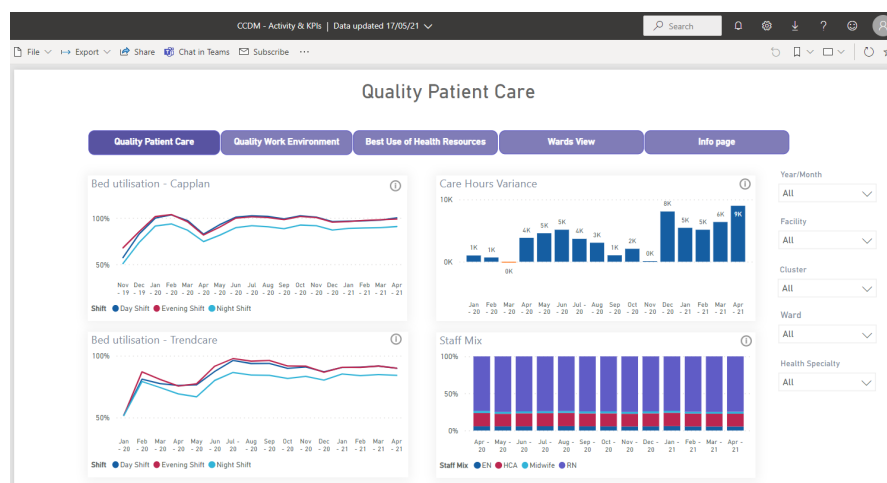
The 'core data set' is based on 23 measures including quality patient care, quality work environment and best use of health resources and is part of the [Care Capacity Demand Management](#) (CCDM) programme that Canterbury DHB began rolling in 2019.

Core data set draws in data from the CCDM patient acuity tool, TrendCare, the HRIS system, HR systems, Microster, Safety 1st, PSE, Data Warehouse, and Health Quality and Safety Commission. You can [view it on PRISM](#) under Seeing our System's Interactive Analytics and Reports "Consolidated View" section.

While CCDM is a national programme, each DHB's different systems and processes require individualised dashboards which take time to develop. Local data councils are set up to review this data for each ward/area and will use it to identify and track quality improvement projects and raise questions and have conversations to understand the story around the data.

Decision makers now get a clearer view of what's happening on the floor on any day and can identify problems and apply solutions to the correct issue in a targeted way. By being available to all, there's absolute transparency on the data and anyone at any level can see for themselves what is happening with their ward or anyone else's.

Nursing Director Forensic Mental Health Patsy Tarrant says prior to this data being captured through TrendCare and



available in real time there was only anecdotal information about demand and whether there were safe staffing levels for delivering nursing care.

"Now we can use it to respond at the time and in our planning."

Director of Nursing for Ashburton and Rural Services Brenda Close says: "The core data set mahi allows us to articulate and provide evidence for the kaupapa of nursing – supporting frontline clinical care delivery."

The dashboard is an important milestone in the programme as it is one of the core workstreams and reflects the progress in rolling out TrendCare to every area of the DHB and having confidence in that data, says CCDM Nursing Director Janette Dallas.

"We're determined to collect strong, accurate data and I'm really impressed, given how busy it's been, of the effort all of our midwifery and nursing staff have put into using TrendCare and actualising their data at the end of their shifts."

Those efforts were also praised by the co-chairs of the Safe Staffing Healthy Workplaces Unit Governance Group that oversees the national roll out of the CCDM programme.

In a letter they said: "We are aware that your DHB has only relatively recently implemented the patient acuity tool TrendCare... However, you are making a tremendous effort across all the CCDM standards and making significant progress toward achieving our common goal. Your DHB is a great example of the success that comes from a partnership which is built on trusted relationships."

A letter from CCDM Programme Consultant Jon Buchan said: "The implementation standard of both CCDM and TrendCare within Canterbury DHB has been to a superb standard with the most detailed and monitored planning and execution I have seen date in New Zealand. Your DHB's forethought in employing nurses from across all the organisation's services has resulted in enhanced planning capability and superior implementation across the whole organisation.

"The roll-out of TrendCare has been an exemplar; indeed, I am already refer-ring other DHBs to Canterbury for support when rolling TrendCare out to new areas such as Emergency Departments."

Janette says as one of the last DHBs to implement CCDM in the country, we have been able to benefit from other's experiences and advances in the roll-out support as well as starting with the right level of staffing resource to help implement it.

"Already you can see the value of TrendCare. Rostering practices have been shifted to better match the typical demand for a ward seeing trends over time.

It is flagged immediately if a ward's care capacity doesn't meet the care that's needed for their patients and charge nurses or nursing directors can discuss solutions."

While staff capacity and rostering data is included in the core data set, the workstream around FTE calculation to generate a recommended roster, budget and skill mix for our midwifery and nursing staff requires at least a year's worth of reliable data and is starting this month.

The other core CCDM workstream, variance response management, is planned for June, she says.

Tāngata Ora

Our People Survey | 2021

Survey open NOW until 23 May -
Check your DHB email address for
your individual email invite

- Feedback anonymous & confidential
- Takes around 15 minutes to complete



‘Speed dating’ workshop explores digital solutions

Thirty-five adventurous staff gathered recently to participate in an experimental ‘speed dating’ workshop presented by Canterbury DHB’s Via Innovations Team and Te Papa Hauora Health Precinct.

The aim of the workshop was to explore how implementing digital technologies and automation tools could improve healthcare outcomes, says Innovation Director, Via Innovations, Anya Hornsey.

“Another goal was identifying ideas that are likely to echo similar problems experienced in other parts of the health system nationally, thereby increasing the impact that could be delivered from solutions.”

The workshop started with a warm mihi whakatau from Executive Director Māori and Pacific Health Hector Matthews.

Keynote speeches were made by Emerging Health Technology and Innovation, Data and Digital, Ministry of Health and Board member of New Zealand Health Innovation Hub Jon Herries, Chief Digital Officer (Acting) Savita Devi and technology company Smudge Managing Director Reuben Bijl.

These set the scene for the afternoon with some high-level observations of the national digital strategy; the potential impacts of transformational changes that are underway to the public health sector; insights into the current IT operating environment; and an industry perspective on co-designing IT solutions with public organisations, Anya says.

“The statistics given by Savita were eye opening as to the extent of different IT systems operated by Canterbury DHB, including: five systems used nationally, 57 IT systems for South Island DHBs and related providers, and over 450 IT systems used by Canterbury and West Coast DHBs.”

Ten individuals and five teams of two presented their workplace-based innovation ideas to 15 health system subject experts in a fast-paced five-minute speed dating session format, with feedback ranging across the spectrum from fun and enlightening through to intense and exhausting.



Participants, rear from left, Nicola Scott, Shannon Carter, James Weaver, Karyn Ballance, Jacques Loubser, Helen Heenan, Edward Coughlan, Kate Gibson, Anthony Spencer, Olivia Willoughby, Tylee Beaumont, Claire Scott, Rowena Woolgar, Maria Yamit, and Yvonne Williams
Front, from left, Angela Deken, Ryan Radecki, Kevin Taylor, Robin Munro, and Leanne Bayler



Executive Director Māori and Pacific Health Hector Matthews opening the workshop: Ngā Ohia Manomano mō te Hauora Pai Ake | Speed Dating Ideas for Better Healthcare

The participants then each presented their idea and insights from the workshop back to the room through one-minute stand-ups.

The workshop aimed to connect innovators and key stakeholders involved in the assessment and implementation of digital innovations and to identify themes that could be combined to deliver a greater impact for business cases, Anya says.

"We were really pleased with the level of energy in the room, the passion of the innovators who brought forward their ideas, and the commitment of the 15 speed mentors to invest their time in the workshop."

Via Innovations Clinical Innovation Director Helen Lunt says it was great to see how well the innovators and speed mentors communicated and engaged with each other.

"Their joint passion for finding solutions that improve patient care, plus the rapid-pace speed dating format, seemed to encourage an honest exchange of opinions."

Many of the innovators came to the meeting with ideas about fixing specific problems within their individual departments, only to find that other departments had similar problems. The meeting helped to kick-start conversations that explored what cross-departmental solutions to these shared problems might look like."

Via Innovations will now review the ideas and outcomes with members of the Executive Team to explore pathway options for each of the ideas and aims to support up to three ideas.

For more information go to:

www.viainnovations.co.nz

www.healthprecinct.org.nz



From left, Health Promoter Leanne Bayler discussing Privacy Act considerations with Corporate Solicitor Elizabeth Browne



Speed Mentors, rear, from left, Kiki Maoate, Reuben Bijl, Neroli Nicholson, Matt Dean, Richard Hamilton, Susan Wood, Ralph La Salle, Michael Sheedy, and Andrew Summers
Front, from left, Heidi Badger, Richard Dove, Jon Herries, Saxon Connor, Maira Patu
Absent, Elizabeth Browne



Emerging Health Technology & Innovation, Data and Digital, Ministry of Health and Board member of New Zealand Health Innovation Hub Jon Herries, providing national context to the data and digital strategic framework



From left, Emergency Department Specialists Jacques Loubser and Ryan Radecki exploring their patient-facing electronic health record interface concept with Jon Herries

Backpacks making a difference for young people in hospital

Many young people admitted to hospital did not expect to be there, feel unsettled in the unfamiliar environment and don't have everything they need with them.

A 'backpack project' for patients aged between 12 and 24 by Canterbury DHB's Youth Advisory Council (YAC) is helping with that.

Often, young people are admitted into hospital unexpectedly, so we provide backpacks containing a few things they may need until they can get personal items brought to them, says YAC Co-Chair Chelsea Skinner.

"As well as toiletries, the backpacks contain distraction items to keep them busy and feel more supported, and resources and information about things such as what they can expect in hospital, and good shows to watch on Netflix.

"We just want to make their stay in hospital easier and also to let them know that they can contact us if they ever need to. Our rangatahi here in Canterbury have gone through so much, and for a young person to be admitted into hospital is huge, so we want to support them in this small way."

Being in hospital is a difficult time and hopefully receiving a backpack will be comforting and encourage them to look after their wellbeing, she says.

The backpack project started a few years ago before any of the current YAC members' time. It was put on hold for a couple of years when other things took priority.

"We have re-started it this year because it has been so successful, and it is a need we can address. We're incredibly passionate about it because we know how beneficial it is for our rangatahi when they are at their most vulnerable."

Charge nurse managers reported that the backpacks have a positive impact on the young people who receive them.

"When they run out they ask us to provide more because they know how valuable they are."

Items are fully funded through donations and sponsorships. Collection points are being set up so that members of the public can donate items if they wish.

YAC are also looking for more businesses to sponsor this project, Chelsea says.



From left, Canterbury DHB Youth Advisory Council member Jem Stevens and Co-Chairperson Chelsea Skinner with the backpacks and their contents

The Canterbury DHB YAC was formed in 2014 to provide a youth voice to the DHB's health services and Canterbury health sector overall. It advocates for young people aged 12–24 years old within youth health services in Canterbury.

If you would like more information on how to help you can email the YAC on cdhbyouth@gmail.com

For more information on the YAC visit Canterbury DHB's website: <https://www.cdhb.health.nz/about-us/clinical-consumer-input/youth-advisory-council/>

You can follow the YAC on Facebook: [CDHB Youth Advisory Council](#) or Instagram: [@cdhbyac](#)

‘Breakfast Group’ helps patients after a stroke

Breakfast is more than just the first meal of the day for a group of stroke patients in Christchurch Hospital.

Last week they attended Ward A8's first ever 'Breakfast Group' and enjoyed interacting with others on similar healthcare journeys.

The breakfast group is an interdisciplinary team initiative led by occupational therapists (OTs) utilising the fantastic communal heart space in Waipapa as a part of the acute and early rehabilitation process, says Ward A8 (Stroke and Vascular) Charge Nurse Manager Cindy Gibb.

"Patients who are reasonably mobile and able to prepare their breakfast independently or with minimal assistance are helped to attend."

The breakfast group facilitates social interaction and communication between patients who are experiencing similar diagnoses and rehabilitation needs. Feedback from the first attendees was positive with everyone saying they enjoyed it.

Patients who attended said:

"Can we do it again?"

"When can we do it again?"

"It was nice talking to others having the same experience as it can get boring in the room alone."

After the first breakfast group staff noticed later in the day that patients had benefited from it. In the case of one patient, seeing the strengths the person showed at breakfast confirmed to OTs that they could be discharged directly home without the need for facility-based rehabilitation, Cindy says.

"Overall, there are several benefits to the breakfast group, including improving cognitive function, visual scanning (the ability to efficiently, quickly, and actively look for information relevant to your environment), as well as balance, mobility and upper limb tasks."



From left, patient Annette Dyke, Wellfood Catering Assistant Diana Washington, Occupational therapist Gail Thomson and patient Stuart Thompson



From left, patients Annette Dyke and Stuart Thompson, Occupational Therapist Shona Galbraith, patient Janet Owens, Allied Health Assistants Aimee Taylor and Liliane Maybury-Jenks and Occupational Therapist Gail Thomson

It's a way of providing a safe environment for the assessment of routine activities in both stroke and vascular patients in the ward and enhancing restorative care principles while also completing therapeutic assessment.

Ward A8 is looking to have the breakfast group as a regular activity a couple of times each week with ongoing collaboration between nursing staff, OTs and WellFood catering assistants, Cindy says.

One minute with... Tanya McCall, Manager, Health Protection (Environment) and Health in All Policies Teams



What does your job involve?

The Health Protection (Environment) Team at Community and Public Health investigates, and takes action on, environmental issues that impact public health outcomes, as well as contributing to the management of sustainable environments. Examples include air quality, biosecurity, hazardous substances and resource management. At the moment, the team are heavily involved with the COVID-19 response including case investigation, contact monitoring as well as having a presence at the air and maritime borders. The Health in All Policies (HiAP) team work involves building strong partnerships and working collaboratively with other organisations and sectors to consider the positive and negative impacts that policies and decisions have on health and wellbeing for the people of Canterbury, South Canterbury, the West Coast, and the Chatham Islands. The work of the team ensures health, wellbeing, sustainability and equity issues are explicitly addressed in all policy, planning and decision-making processes – to improve health outcomes and mitigate health disparities.

Why did you choose to work in this field?

I had no interest in public health before I started working at Canterbury DHB. I was working as a lawyer in private practice and I saw a job advertisement to join the Tobacco Control Team at Canterbury DHB. The job involved drafting submissions and appearing before the Health Select Committee to address the proposed changes to the Smokefree Environments Act and was a six-month contract. That was my first taste of public health and 18 years later, I'm still here and loving it.

What do you like about it?

I love the variety of my work. On any given day I can listen to the news, log onto *Stuff* or read *The Press* and I can guarantee that there is at least one news item which involves the work of Community and Public Health.

What are the challenging bits?

There have been lots of challenging bits, for example, the public health response following the February 2011 Christchurch earthquake and the current COVID-19 response. But the challenging bits are also the bits that I like the best.

Who inspires you and why?

Professionally, my General Manager, Evon Currie. She is amazing and has taught me what courageous and compassionate leadership looks like. Personally, my mother, for so many reasons that I can't even begin to list them all.

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

The Canterbury DHB values are an integral part of the work of Community and Public Health. Listening to the communities we work with, and respecting tikanga and their values is a fundamental part of our everyday work. Acting with integrity and transparency (matatika) is an important part of promoting collective responsibility with our partner organisations to achieve equity of health outcomes (kotahitanga).

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

I'm a third Dan (Sandan) black belt in Seido Karate.

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

Aitutaki, Cook Islands.

What do you do on a typical Sunday?

As little as possible. Usually, a walk around Hagley Park or a hot flow yoga class.

What's your favourite food?

Ika mata. It's a traditional Cook Islands dish made from raw fish, usually tuna fillet, marinated in a mixture of lime (or lemon) and coconut milk and garnished with raw vegetables.

And your favourite music?

My Spotify play list is very eclectic, including Aerosmith, the Cranberries, Fleetwood Mac, Marlon Williams, R.E.M, The Commodores, Etta James, and Six60.

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



Something For You

Something For You is the Canterbury DHB employee benefits programme.

The deals offered are from the Canterbury business community to say thank you for all that you do.

This week's featured offer is from Torpedo7. From Wednesday 19 May to Wednesday 2 June. You and your *whānau* and friends can receive up to 30 per cent off instore and online at Torpedo7.

See [the flyer](#) for a discount code to use.

We also have plenty of other great deals from local businesses, check them out [here!](#)

CDHB- GEAR UP FOR ADVENTURE

Torpedo7
UP TO
30% OFF
OUR HUGE RANGE OF GEAR

AVAILABLE IN STORE AND ONLINE NATIONWIDE 19/05/21-2/06/21

HOW TO REDEEM

INSTORE: SHOW THIS FLYER AND YOUR CDHB ID CARD AT THE TILL
ONLINE: AVAILABLE ONLINE ENTER **CDHB521** AS THE PROMO CODE AT THE CHECKOUT ON OUR WEBSITE **WWW.TORPEDO7.CO.NZ**

*Discounts are off RRP. If the product is already on promotion customer will receive the lower of offer or promo pricing. Not all products are eligible for a discount. Not available in conjunction with any other offer. Excludes Bikes and Frames, Electronics, Freight, Gift Cards and Workshop Services. Valid 19/05/21 - 2/06/21.

Techie Brekkie

A feast for
mind and body



Ageing and Addictions: Hidden issues

For people who work with over 65's



Matthew Croucher is a psychiatrist of old age working in Christchurch. He will be speaking about what makes older people with problematic substance use or gambling the same and what makes them different from younger adults, as well as talk about the pros and cons of various assessment scales that services might like to use to capture some of the issues that older people in their services face.



Dr Towers will provide highlights from a 3-year Health Promotion Agency-funded project exploring drinking in New Zealand's aged 50+. This will include a comparison of drinking patterns between older New Zealanders and counterparts in 8 other countries, an assessment of the level of hazardous drinking in older New Zealanders, the different types of drinkers evident across the country and an up-to-date overview of the nature and harms of gambling in older adults internationally.

A panel interview with local services.

Come with some questions and leave with some answers.

BOOK NOW!
Will sell out.

Friday, 21st May 2021

8.45am to 3.30pm

**The McFaddens Centre, 64 McFaddens Road,
St Albans. Christchurch.**

Cost \$50.00 (*subsidy available*)

Register at www.eventbrite.co.nz by 17th May 2021.

Any questions to Lynne: lynne.g@odysseychch.org.nz

Canterbury
District Health Board
Te Poari Hauora o Waitaha



COMMIT TO QUIT

**31ST MAY WORLD
SMOKEFREE
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