# CEO UPDATE





# **Changes at The Princess Margaret Hospital**

The first group of staff are moving tomorrow from offices at The Princess Margaret Hospital (TPMH) into leased offices near Christchurch Hospital.

This is part of the overall shift of services off the TPMH site. The main moves of staff and patients to Burwood will take place from 13 – 16 June, leaving a range of services still operating from TPMH for the next 3-5 years.

All corporate services will move in a phased manner over the next few months. We don't have exact dates at this stage, as the moves from TPMH to Burwood are also taking place during June. The main ward moves are planned to take place from Monday 13 June - Thursday 16 June, with two wards moving each day.

I've fielded a number of questions from people wondering what's happening to The Princess Margaret Hospital with such a large number of staff moving out: There are around 400 staff moving to the new corporate office, and more than 250 moving from TPMH to Burwood next month.

Nothing will be happening to the buildings or the site anytime soon as there will still be hundreds of staff remaining on site, working in a range of services which will continue to be based at The Princess Margaret Hospital. And we'll even have some guests from The Fire Service joining the teams at TPMH during the day.

A number of services will remain at TPMH for the next 3-5 years while alternative locations are identified. Some remaining services including eating disorders, child and youth mental health inpatient services and the Mothers & Babies unit are subject to a business case process which will be prepared for consideration by the Hospitals Redevelopment Project Group (HRPG) and Capital Investment Committee. The Board have not made any decisions on the future of TPMH site. The majority of the ground floor of TMPH main building will remain open. Seagar on the ground floor of the Heathcote Building will remain open, floors above will continue to house CAF (Child & Adolescent Family) services and OPH & R (Older Persons' Health & Rehabilitation) community teams.

Services remaining at TPMH include:

- » The transport office (and the majority of fleet vehicles will remain on site at TPMH, with some going out to Burwood)
- » Mothers and babies unit
- » Child and youth mental health inpatient services
- » The eating disorders service
- » Adult long-term mental health will remain in their current home 'Seagar' on the ground floor of the Heathcote Building.
- » There will be a kitchen, and on-site café with reduced opening hours from Monday 13 June. The new opening hours will be 7:30am – 3:00pm Monday to Friday. The café will be closed at weekends and on public holidays. The last day for hot main meals will be Sunday 12 June.
- » The equipment store will move from the basement to the Riley Day Unit lounge
- » Reception will be staffed during business hours
- » On-site security/orderlies
- » On-site maintenance
- » Older persons' community teams who consolidated in the Heathcote Building.
- » A Pharmacist on site Mon-Fri, who will be at Hillmorton one half day each week - note: no dispensing on site.
- » The Addington Fire Brigade will park an appliance and have four firefighters based in the Riley Day Unit end of the facility, Monday - Friday during the day.

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### The finish line is in sight for new facilities at Burwood

The culmination of many years of hard work is coming to fruition with our new facilities at Burwood nearing completion. As the move-in date gets closer, activity on the site is ramping up. Training and orientation is going well and those who have been into the training ward DG can't help but come away impressed. The thought that has gone in to the design of the facilities is evident. They are a far cry from the old wards at The Princess Margaret Hospital. I know a lot of people are putting in extra effort right now to ensure things run smoothly for the transfer of staff and patients next week. Special thanks to everyone working behind the scenes including the ISG team, support services, procurement, communications, the contractors and their subbies and all those directly involved with the moves. With only four weeks til teams move in, the end is in sight!

### Dates for your diary:

- » Burwood Blessing 8:15am, Thursday 26 May
- » Burwood staff open day Friday 27 May. All staff are welcome: 10am 12pm or 3pm -5pm
- » Burwood public open day Sunday 29 May 10am 2pm

# Congratulations to the People & Capability team – finalists in the 2016 NZ Workplace Health & Safety Awards

For the second year running our Wellbeing programme has made the finals of the annual NZ Workplace Health & Safety Awards. Our entry is focused on managing psychosocial risk through an holistic Staff Wellbeing programme. If you haven't checked out the Wellbeing page on the intranet lately you may be surprised to see the range of activities on offer. The Award winners will be announced at a ceremony in Auckland next Wednesday, 25 May.

A screen shot showing some of the opportunities is shown to the right. Read the full list here.

### Staff Wellbeing Programme









Click the image above to acces the NHS emotional wellbeing to "How are you feeling today?



Employee Assistance Programme (EAP)



Be Active - Term 2, 2018
Be Active is an eight week programme for people wanting to
establish or restart their activity, and have fun along the way.
Various locations across Chintchurch, Starts mof E-busay
Click here far more information
There is also a spendip programme for those with prior diabetes or diabetes.
Click here far more information

CDHB Wellbeing Presentation
Dr. Carolline Bell & Claram Fox
An opportunity to learn about the importance of taking care of curselves
Click here to also presentation notes.
Email this link to yourself and watch at home into a //youtu berKUHVII-qix

The single most important thing you can do for stress Email this link to yourself and watch at home https://www.youtube.com/watch?v=i6402Qup52M (11 minutes)

> 23 and a half hours (physical wellbeing) Email this link to yoursef and watch at home ps://www.youtube.com/watch?v=aUainSEHCo (5 min

Social Interest Groups

### Our health system featured in The Irish Times last week

Two Irish members of Canterbury DHB's staff, Geraldine McGettigan and Dr Lisa McGonigle share their ideas on what can be done to improve the Irish health system. The article, which appeared in the Irish Times on 5 April interviews ex-pat Irish health professionals working all around the world. It was great to see the strategies and goals of our health system transformation mentioned in the article.

Read the full article here.

David Meates

**CEO Canterbury District Health Board** 

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### **Facilities Fast Facts**

### **Fast Facts - Burwood**

The construction team is now working around the clock at Burwood. Up to 450 construction workers are on site every day.

Open days are being held on Friday 27 May (for staff) and Sunday 29 May (for the public).

If your service or area requires a poster to advise the public that you will be moving to the new facilities at Burwood, click on the image – it links to a printable A3 poster. Radiology, which is moving in late May, has its own version of this poster.

### **Artwork at The Princess Margaret Hospital**

If your office or workspace at TPMH has an item of artwork on the wall that belongs to CDHB, please leave it on the wall. Do not pack it or bring it with you to Burwood Hospital. All CDHB artwork at TPMH will be catalogued once the moves have taken place, and appropriate works will be brought over to the new site.

### Watch this week's video from Dan Coward

He talks to sustainability advisor James Young about alternative ways to get to Burwood - watch here. Dan's staff forums are also online. Click here to view.



For some information, please with utilitied that Extend

Centerbus

### **Fast Facts Christchurch**



The steel for the ground floor of the western tower of the Acute Services building is nearly all in place, as the photo shows. Christchurch Women's Hospital is in the background.

A reminder to staff to lock bicycles securely and to use the secure bike compounds on site whenever possible. In particular, a good D-lock is recommended. Make sure your lock goes through the frame of the bike, and attach it to something immovable such as the bike rack.

### **Outpatients update**

Users have continued to meet this week to review plans and refine the layouts of the workspaces for the Outpatients Building. The design team will meet with the users again next week with the aim of signing off on the workspaces plans.

The Ministry of Health has recently appointed CCM/Destravis to undertake a health planning assessment for the current buildings on the Christchurch Hospital campus – Parkside and associated buildings. The health planning assessment will inform a carefully staged master plan for all future facilities across the Christchurch Hospital campus, focusing on those services not accommodated in the Acute Services and Outpatient buildings, and taking into account the complex series of earthquake repairs to the existing buildings that is already underway.

The assessment will begin in mid-May 2016 and will take around 4 months. It will aim to produce the master plan and associated business case by the end of 2016.

The process will review all available operational data and will engage with clinical groups to inform options for the future use of the hospital's clinical services and buildings.



# YOU'RE INVITED TO AN OPEN DAY BURWOOD HOSPITAL

Sunday, 29 May between 10am and 2pm

### Come and see Burwood Hospital's new facilities. Find out about:

- The philosophy behind the new models of care for older persons' health
- Innovative ward layouts that give patients extra privacy and better views out to the gardens.
- Construction features such as courtyards for light and solar shading panels for temperature control



MAIREHAU ROAD

### We look forward to seeing you there!

Please Note: Burwood Hospital does not have an accident and emergency department. In an emergency, call 111. Phone your general practice team 24/7 for all other health care.



# **Bouquets**

#### Ward 28, Christchurch Hospital

I would like to acknowledge the absolutely amazing care my partner received during his four month stay on ward 28. He was in a post coma unresponsive state and has since passed away. He was in this coma state for 27 months, I had him transferred home to Christchurch from Brisbane. Whilst on Ward 28 he not only received top quality, kind, caring compassionate nursing care but I myself received the support I also needed.

I can't thank them enough for this. They bring a new meaning to the term TEAM. This ward and everyone in it work amazingly as a team to ensure everyone involved receives the best care package and outcome. All of the staff on Ward 28 are amazing human beings, they are all very special people who in turn make their patients and patients' loved ones feel important also. Previous to arriving on ward 28 and as my partner's advocate and voice I had battled hard to get even the most basic care needs for him.

He had been badly treated in Australia so our journey through the Australian healthcare system was traumatic and nothing short of awful. I brought him home to New Zealand in the hope of good care for him. Ward 28 exceeded all of my expectations. They cared for him in a way that I could only dream of and what surprised me more was that I didn't have to ask for it nor fight for it! The fight for appropriate care was over.

I can't tell you what a relief this was. The care was provided without question. It soon became clear to me that this is just how nurses roll in New Zealand. With my partner finally getting the proper

care he deserved this enabled me to relax and it allowed me to spend proper time with him. I knew he was living on borrowed time so bringing him home to New Zealand was about not only a quality of life for him but also the quality of time with him, spending precious time together. I spent mostly every day all day with him.

These are days and moments I will hold dear to my heart forever. I would like to thank all the staff on ward 28 for allowing me that time with the love of my life, they made it comfortable and stress free for us both. I feel they completely understood my goals and expectations and we worked together to achieve this. They all totally respected him as a human being not just a patient, they bring a whole new level to nursing and caring. These people make me feel proud to be a New Zealander.

Each and every one of the staff of ward 28 go above and beyond the call of duty. They are all angels. Thank you.

#### Ward 17 (General Surgery) and Emergency Department, Christchurch Hospital

My wife, was admitted to Ward 17 after midnight on May 1-2, with pneumonia of the left lung, after being driven from home by St John Ambulance to the Emergency Department. She was finally discharged with antibiotic treatment on 3 May. Please accept my compliments and praise for the excellent care she received from all staff. Their competence, respect and compassion were first class. Just two days later, on 5 May after advice from the freephone helpline, I myself presented at the ED with blood in my urine, including clotting. Again I was promptly treated in

like manner and admitted for one night to the Urology Ward for "irrigation" of the bladder, and discharged on May 6. Full marks to all at CDHB, two hospital admissions in four days!

## **Birthing Suite, Christchurch Women's Hospital**

To whom it may concern, I would like to acknowledge the professional and friendly manner of the staff (also the midwife). The efficiency of the staff this evening (in a potentially life threatening situation of a new born) is to be commended. Thank you to those of you involved. Your hard work is greatly appreciated.

### Day of Surgery Admission (DOSA), Christchurch Hospital

The staff were fantastic here. Receptive, courteous and helpful and appropriately apologetic for Mum being in at 0700 for afternoon surgery (at 89 years old). This was an early morning wake-up call. However, we are very grateful for the hospital care and the service and attentiveness to our needs was exemplary. Please convey our thanks to the team on the day.

### **Respiratory, Christchurch Hospital**

Fiona Fulton conducted a breathing test in the Respiratory Department. She was very polite, helpful, professional and patient. A true 'ambassador' for Christchurch Hospital and should be commended for being a STAR employee.

## **Colposcopy and Hysteroscopy, Christchurch Hospital**

Great service, very friendly and informative.

### **Oncology, Christchurch Hospital**

Once in a while, someone stands out in

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their field of work, not good, adequate or proficient, but exceptional. They have the 'you are welcome and important to us' factor. For us, having had many treatments at Oncology, Joanne Gore (nurse) is this person. Always well groomed, with a cheerful, welcoming smile, she remembers something about you; to make it personal. Calm, unflustered, organised, but with a definite sense of humour which is uplifting. This is so appreciated, in a situation that may make it difficult for any of us, to be calm, warm and positive at times.

### Orthopaedic Outpatients, Christchurch Hospital

Thank you Dr Cockfield for taking the time to explain everything about my daughter's condition and treatment. I know you are very busy and it was greatly appreciated.

### Acute Medical Assessment Unit (AMAU), Christchurch Hospital

Thank you for all of your attendances, doctors and staff.

#### **Gynaecology Ward**

Thank you Catherine, Sandra and the wonderful Lorna and the young English lady (Gynae team). Very professional service - very thorough every step of the way explaining the procedure. I felt very calm from start to finish. Thank you for your empathy at a sad time for my partner and I.

### Park & Ride Shuttle, Christchurch Hospital

We are from out of Christchurch and want you to know how great the shuttle service is. We didn't know about it at first and we paid meters – once we were told of the shuttle it took away stress and every person we had drive us or help us was wonderful. It is exactly what we need as stressed out people.

#### **Lincoln Maternity Hospital**

Midwives at Lincoln Maternity hospital are absolutely fantastic and would recommend to anyone having a baby. Baby, mum and dad had the most stress free time in our stay and found all staff extremely friendly and helpful. Will definitely return with our future children!

### **Lincoln Maternity Hospital**

What a lovely experience staying the night at the Lincoln Maternity Hospital. The midwives do a fantastic job of reassuring, supporting and educating. The Hospital Aides and Ruth are an asset to the team. Thanks for all your help while I adjust to life with a new born.

### **Maternity Ward,**

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

I stayed in the Maternity Ward from the 23/03 - 28/03 and one midwife who I will never forget is Katie. She was absolutely lovely and took such great care of me, such a funny lady! I only had her for a short while looking after me but I'm so lucky to have had her, such an awesome

lady! Thank you so much Katie.

### Maternity Ward, Christchurch Women's Hospital

I stayed in the Maternity Ward after having my baby seven weeks early. I stayed five nights and the midwives were all lovely but one who really stood out was Alice. She was so warm, kind and helpful. She really made my stay special and I am very grateful to have had her looking after me. Thank you so much Alice.

### **Neo-natal Intensive Care Unit (NICU), Christchurch Hospital**

Absolutely wonderful Neonatal staff who made a stressful stay for our premature baby girl very comfortable and put our minds at ease.

### Ward 21 (Paediatric Surgery), Christchurch Hospital

I just want to say a huge thank you for all the support, kindness and distraction over the last four days. Rebecca from the Activity Room was fantastic. Went over and above her job. Sorry I can't recall all the nurses' names but what a great bunch of ladies they are! No doubt we will see you again in the follow up visits.



The theme of International Day of the Midwife 2016 was 'Women and Newborns: The Heart of Midwifery'. Midwives around the world work hard every day to ensure women and newborns receive the quality care that they deserve.

Among the activities held this year Canterbury DHB Midwives enjoyed a shared lunch.

Right: Level 5 staff, Christchurch Women's Hospital.



# Ideal time for new Charge Medical Imaging Technologist

Charge Medical Imaging Technologist (MIT) at Burwood Radiology, Karen Wilson, is stepping down from her role at Burwood Radiology. She has worked there since 1995.

"We have been a very small department, with just two to three of us working in two xray rooms. Most of us have been here for 20-30 years. I had become part of the furniture," she says.

As part of the re-development of Burwood Hospital, the Radiology Department is expanding to meet the combined radiology service needs of Burwood Hospital, Older Persons Health & Rehabilitation (OPH&R) and community referred patients.

Karen is excited about the new facility which will mean the introduction of digital equipment and the arrival of CT, Ultrasound, Bone Density and MRI services at the new expanded Radiology Department.

"It will be huge compared to our little 50 year old department," she says.

Karen has taken the opportunity to retire from her role and let some-one else take it on when the new facility opens at the end of this month.

"I thought this would be an ideal time to have someone here right from the start to drive this much bigger radiology department," Karen says.

The new Charge MIT is Kim Rolton who currently works at Christchurch Hospital.

We welcome Kim to this role and take the opportunity to thank Karen for her contribution over so many years. Karen says she and Kim have been given a "tremendous opportunity" to work together for "this crucial two to three weeks".

"It's a rare opportunity that you can work alongside your replacement."

Kim says she is looking forward to starting her new role and is

fortunate to be able to work with Karen.

"I am excited to get into the new Burwood site. The new department will be such an advantage, for patients and staff."

There are many changes happening and I hope I can help to make the transition smooth for everybody involved, she says. Karen will continue to be on the team, working as a staff MIT for two days a week from July.



Above: Karen (left) and Kim.



May 2016 - latest news

2016 Conference registration now open. The HealthPathways Conference brings together the entire HealthPathways Community to network, collaborate and discuss best practices for developing HealthPathways.

Registration closes on 19 September 2016.

# **Canterbury Grand Round**

Friday, 20 May 2016 – 12.15pm to 1.15pm with lunch from 11.45am

Venue: Rolleston Lecture Theatre

**Health Research Society Canterbury Student Speakers** 

The effect of hydrogen sulfide synthesized by cystathionine-gamma-lyase on inflammation and liver sinusoidal endothelial cells in polymicrobial sepsis in mice

Ravinder Reddy Gaddam(1), Robin Fraser(1), Alireza Badiei(1), Victoria Cogger(2), David Le Couteur(2), Isao Ishii(3), Madhav Bhatia(1)

- 1) Inflammation research group, Department of pathology, University of Otago, Christchurch, New Zealand,
- 2) Biogerentology research group, ANZAC research institute, University of Sydney, Sydney, Australia,
- 3) Department of Biochemistry, Graduate School of Pharmaceutical Sciences, Keio University, Japan.

### Activation of immune cells in live carotid plaque

Hannah Prebble(1), Sean Cross(1), Edward Marks(1), Vicky White(2), Justin Roake(2), and Steven P Gieseg(1,3)

- 1) Free Radical Biochemistry Laboratory, School of Biological Sciences, University of Canterbury, Christchurch, New Zeala
- 2) Department of Vascular Surgery, Christchurch Hospital, Christchurch, New Zealand,
- 3) Department of Radiology, University of Otago, Christchurch, New Zealand.

Cognitive impairment in Parkinson's disease: a study of early-phase amyloid PET and arterial spin labeling perfusion MRI

Megan Stark(1,2), Ross J Keenan(2,3), Steven Marsh(1),

Daniel J Myall(2), Leslie Livingston(2,4), John C Dalrymple-Alford(2,5,6), Tim J Anderson(2,4,6), Tracy R Melzer(2,4,6)

- 1) Department of Physics and Astronomy, University of Canterbury,
- 2) New Zealand Brain Research Institute,
- 3) Pacific Radiology Group,
- 4) Department of Medicine, University of Otago, Christchurch,
- 5) Department of Psychology, University of Canterbury, Christchurch, New Zealand,
- 6) Brain Research NZ, Centre of Research Excellence

# The effect of irreversibly electroporated cell dynamics on drug transport in electroporated tissue

Finbar J Argus(1), Sid Becker(1), Bradley Boyd(1)

1) Department of Mechanical Engineering, University of Canterbury, Christchurch, New Zealand

Chair: Steven Gieseg

Video Conference set up in:

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

All staff and students welcome

Talks will be available within two weeks on the intranet

Next Grand Round is on Friday 27 May 2016

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

# Donate blood at Christchurch Hospital





NZ Blood is back collecting blood at Christchuch Hospital (Annex Lounge off Great Escape Café) on Thursday 26 May from 10am until 3pm.

 $Appointments \ are \ preferred \ and \ can \ be \ made \ online \ \underline{www.nzblood.co.nz} \ or \ by \ phoning \ 0800 GIVEBLOOD \ (0800 \ 448325).$ 

One blood donation can save the lives of three people.

SAVE LIVES, GIVE BLOOD...... To see how and where visit www.nzblood.co.nz



# Nepali and Christchurch emergency specialists share stories

A Nepali doctor who played a key role in the health system response to devastating earthquakes in his country has shared his experience with local doctors.

Dr Ashis Shrestha is an emergency physician and disaster co-ordinator at one of Kathmandu's tertiary hospitals. He visited Christchurch as part of a teaching initiative between the University of Otago, Christchurch, and Patan Academy of Health Sciences, Kathmandu. During his visit, Dr Shrestha gave a grand round lecture about how health services coped after Nepal's 7.8 magnitude earthquake, then a 7.2 magnitude aftershock less than a month later. He also toured the emergency department with Professor Mike Ardagh.

Dr Shrestha said because Nepal is quake-prone, the hospital developed a disaster management plan more than a decade ago, which has now been adopted across the country by the Ministry of Health. Hospital staff did a major emergency drill less than six months before the first big quake on 25 April, 2015.



Above: Dr Ashis Shrestha (left) and Professor Mike Ardagh.

While the plan helped later, the first few hours were chaos. Fifty nine bodies arrived at a hospital with capacity for dealing with two. Thousands of patients flooded into hospital grounds, joining more than 400 evacuated patients.

A field hospital was set up within four hours, thanks to the drill experience.

"The interesting thing was we planned everything inside the hospital but we had to take everything outside. We set up a triage outside the hospital .... All the surrounding alleyways and grounds were filled. For some time we were not sure where patients were, data gathering was missing. But once we activated the disaster plan things started going smoothly. We started dressing and plastering outside," Dr Shrestha said.

Thanks to prior planning, the make-shift hospital had power from a small generator powered by 50 litres of fuel, and water and food for three days.

When the 7.2 magnitude aftershock hit on May 12, the hospital was evacuated again. No one wanted to go back into the building. The field hospital this time took an hour to erect. It included two operating theatres in a tent.



Above: A field hospital operating theatre set up in Kathmandu after a 7.2 magnitude aftershock.

Dr Shrestha said they had learnt many lessons from the experience. Having a disaster management plan and practising it was undoubtedly valuable.

Professor Mike Ardagh said it was interesting to talk with Dr Shrestha and show him Canterbury's facilities and processes. While they had many common issues, it was clear Canterbury's resources and the nature of its integrated system were an advantage, he said.

# New Smokefree signs available for public events

New Smokefree signs given by Community and Public Health (C&PH) will help promote the Smokefree message at council events in the city.

Health Promoter, Heather Kimber, says C&PH has enjoyed a long standing partnership with the Christchurch City Council (CCC) on Smokefree initiatives. The provision of Smokefree signs to be used at council events helps promote the Smokefree message and is part of encouraging healthy public places.

The council has a number of community events within their parks each year and has had a policy for Smokefree events since 2009.

"Clear Smokefree signage at these events is an important part of promoting that they are Smokefree. In the spirit of close partnership, CDHB has helped out by providing the council with some Smokefree signs."

The signs will also be made available for events on parks and green space in the city. As they are mobile the signs can be easily stored away at CCC and be transported between events or organisers.

The signs do not indicate a ban on smoking, but rather, promote the preference for a Smokefree environment, she says.

"It's about reducing the visibility of smoking and encouraging good role modelling especially to children and young people, who often take their cues from others and copy what they see."

A 2014 C&PH survey of Canterbury/West Coast residents showed 73 per cent supported Smokefree outdoor music or sporting events and 35 per cent would be more likely to visit these events if they were Smokefree.

Councillor Glenn Livingstone says "the council runs a lot of family focused events in our parks and recreation areas and promoting them as Smokefree sends a very positive message to everyone, especially children".

"I would like to thank Canterbury District Health Board for their support in providing the council with Smokefree flags to help with this message."



Above: Councillor Glenn Livingstone and Heather Kimber.

# **Congratulations to Bone Marrow Transplant Unit**

The Christchurch Hospital-based South Island Bone Marrow Transplant Unit (BMTU), working with the New Zealand Blood Service (NZBS), has been accredited as a centre of excellence in the field of bone marrow transplantation for the treatment of blood cancers.

The award comes from the Foundation for the Accreditation of Cellular Therapy (FACT) and is especially important because Fact-accredited centres have better outcomes for patients undergoing transplantation. Around one half of patients require bone marrow from an unrelated donor from overseas and the FACT seal ensures that NZ patients will continue to be able to access these donors.

Dr Andrew Butler, Haematology Consultant/ Transplant Programme Director, says the award demonstrates that Christchurch Hospital's BTMU provides the highest quality care for South Island patients needing cellular therapy treatment.

"Our patients know that not just the Haematology team within the BMTU, but the whole hospital system supporting us have been designated a centre of excellence. The FACT accreditation wouldn't have been possible without continuous expert advice from just about every CDHB department from ED to ICU. There's just too many teams and people to acknowledge individually," says Andrew.

The process towards accreditation began in 2011 with a business plan that led to the establishment of a FACT Coordinator and Quality Manager in August 2012. Support from service managers Jane Trolove and Kimberley Reimers helped develop a business case that supported the clinical goals. A core haematology team comprising of the lead transplant clinician, Dr Andrew Butler, Meghan Heaphy and BMT coordinators Jenny Roberts and Ali Trengrove (now retired) led the accreditation process fully supported by all Haematology staff members.

The FACT inspectors review every single step of the transplant process that might affect a patient's wellbeing, from checking basics like the water safety, cleaning schedules and air filtration on the ward right through to the long-term follow up care afterwards.

Our patients will experience better outcomes in bone marrow transplantation through this attention to detail and can continue to benefit from access to bone marrow donors worldwide into the future.

Find out more about FACT.



Above: Staff from the Bone Marrow Transplant Unit.



# Studies on ceasing medication and minimising disease spread funded



Dr Pippa Scott

Two up-and-coming Christchurch researchers have won Health Research Council Emerging Researcher First Grants' for projects that could improve the health of a great many people.

Dr Claire Heppenstall does research for both the University of Otago, Christchurch, and Canterbury District Health Board. She won a grant for a project focused on taking rest home residents off unnecessary medicines.

Older people living in rest homes are often prescribed multiple medications to prevent future illness, not to treat symptoms. For some residents with a short life expectancy, this polypharmacy may not be necessary and could affect their quality of life. Dr Heppenstall will use a scale to identify people with limited life expectancy and provide the information, with medication prompts, to GPs. She will assess the feasibility of this intervention, and whether it reduces numbers of medications prescribed and outcomes for this vulnerable population.

Dr Pippa Scott is a trained vet who now works as a researcher with the University's Department of Pathology. Her project will investigate the transmission of infectious bacteria between cattle and people in rural communities

About sixty per cent of microorganisms causing human disease are passed between animals and humans ("zoonotic" pathogens), and changing farming practices are creating conditions promoting pathogen transfer between species. Dr Scott's project aims to identify interventions to control transmission to humans. She will look at the frequency of two common zoonotic bacteria in cattle and humans in a dairy farming community. The bacteria are Shiga-toxin producing *Escherichia coli* (STEC) and *Staphylococcus aureus*. STEC causes severe diarrhoea, while S. aureus causes serious skin and bloodstream infections. Identifying effective interventions could reduce the burden of STEC, particularly in young rural New Zealanders, and reduce transfer of antibiotic resistant S. aureus to humans, maintaining treatment options for infections.



# Team work leads to cycling win

Health Protection Officer for Community and Public Health Fiona Humpheson and Intensive Care Unit Nurse Trish Jones have both qualified for the World Cycling Championships in Perth in September after winning at the New Zealand Club Nationals Cycling Championships.

Fiona won two gold medals at the Nationals in Alexandra last month. In the Women's Masters three grade 25km time trial she was more than three minutes ahead of second place in her grade, faster than all the other women masters grades and faster than any under 23 women. Fiona's second Gold Medal was in the Women's Road Race event.

"The best part though is that Trish helped me win by fantastic team work in the road race event," Fiona says.

"We had four girls in our team. We all worked as a team together and it worked really well."

Trish has also qualified for Perth by finishing in the top quarter of her age group at the Grape ride in Blenheim in March this year.

Fiona took up cycling at school but gave it up around 20 years ago due to study and family commitments. She then took up cycling again about two years ago and competed in her first road race in 2015 after a friend asked her to ride for her team.

"I got dropped from the main bunch very early on and rode most of the race on my own. I continued to compete in races with the aim of staying with the main competitors for longer, until I eventually I managed to gain the fitness and confidence to finish with the central group."

Fiona loves being outside in the fresh air cycling and her favourite rides are around the Port Hills. She enjoys the challenge of riding up hill and the spectacular views once you get to the top.

She currently trains around 12 hours a week and relishes the social side and teamwork involved with racing.

'The chance of becoming a World Champion in Perth is such an awesome thought, hence I will be training incredibly hard over the next four months,' Fiona says.

"Our whole family cycle, including my husband, 14 year old daughter and 11 year old son. I have constant family support and could not do it without them."

Trish began cycling as it was one of the disciplines required for triathlon racing. For the last few years she has been racing in ironman distance races and has taken up cycle racing to improve her cycling fitness.

"Being able to cycle and run in and around the Port Hills can be challenging, but it is one of my favourite parts of training," Trish says.

"Being part of an enthusiastic triathlon and cycling community enables great teamwork, which breeds success."



Above: Health Protection Officer for Community and Public Health Fiona Humpheson.



Above: Intensive Care Unit Nurse Trish Jones (right).



Above: Fiona on the podium (middle).

# From the other side of the bed: Why Releasing Time to Care really matters to patients and their families

Child health Nurse Educator Becky Conway has been part of the Women's & Children's Health Releasing Time to Care (RT2C) planning group since December 2014. She has given permission for this reflective account of a family member's admission to Christchurch Hospital to be printed.

When a family member had a serious condition diagnosed, followed by unexpected surgery, we experienced some fantastic healthcare which for me, as a CDHB employee was both humbling and comforting. However, there were some things that troubled both of us and we have spent much time discussing how we felt about the care that was neither all good nor all bad.

#### How do we care?

As healthcare professionals, we throw around the word 'care' pretty freely. But what is it that we do that actually shows patients and their relatives that we really and truly care about them?

I can tell you, from our brush with 'the other side' that it is the seemingly basic aspects of health care behaviour that really made a difference to us. Here are some examples of how we felt truly cared for:

- » People who asked "how are you?" or "what matters to you?"
- » The offer of tissues and a comforting shoulder-touch
- » When the call bell was answered
- » When analgesic medication was given regularly and with care
- » When the plan for the day was communicated and negotiated with us
- » When food, drinks and call bells were placed within reach
- » When we could see hand hygiene being done

Being a recipient of the RT2C ways of working showed me that:

- » Intentional rounding really makes sure that those little needs are attended to
- » Bedside patient handover made us feel safe
- » When the above-bed boards were used, we not only felt informed, we also felt part of the plan for the day... conversely, when the board was not filled in, it felt as if no one cared.

#### Care and partnership

In healthcare, we talk about working in partnership with patients and their families. True partnership should recognise and respond to each unique situation. In our case, we may not have been functioning at our best (who is when they hear they have cancer), but it was important to us that we felt our opinions and anxieties were listened to. How each health

practitioner responded to our worries and questions really made a difference to how we felt about the care we received.

### The significance of admission and discharge

Admission and discharge are significant events in the patient journey, but they are far from being the beginning and end for the patient and family. Rather, they are critical points in a continuum of what has gone before and what will follow.

Things that really help on admission:

- » A kind word (this is a crisis time for the patient and family); match your emotions with the situation
- » Ask "what matters to you?"
- » Let patients know what to expect

Things that help on discharge:

- » Explain what needs to occur before discharge is complete
- » Go through the prescription, even with the most basic medications, and explain what they are for, what the side effects are, how long to take them, and when each medication is next due

Your words, your smile your touch and wearing your name badge are small acts of caring that make a big difference to patients and families who pass through your department.



Above: Becky Conway.

# More cakeworthy hand hygiene activity



Following on from last week, and because it's a little too early to report back on new hand hygiene initiatives, we promised to share some more of those creative ideas for increasing our focus on better hand hygiene. Again, this is just a selection of ideas that might work for you. More ideas to come next week:

In the UK prior to coming to NZ, the most convincing and effective thing I ever saw was a clever initiative to illustrate how well staff had (or hadn't) washed their hands. We conducted a few training sessions where staff applied a hand cream containing fluorescent particles. An ultraviolet light showed just how many 'germs' had been missed.

From Evelyn Nelson, Service Development Manager – Planning and Funding

We Wash Wet Wrists Well Stopping Stinky Superbugs Hands Hold Hearts & Health

An alliterative haiku from the Maintenance Department

A patient's nurse was so good she washed her hands as she should, Before gloving and touch medications and such, Now there's no bugs in this hood!

A nurse was so tidy and clean there wasn't a bug to be seen,
She used Sterigel and yes you can tell,
'Coz her patients all leave with a beam Some Limerick's from ward 22

We have a change in our House Surgeon rota on Monday and we hold the pagers. Every house surgeon will receive a poster with his or her pager and a verbal reminder about hand hygiene.

From ward 17

Here in Radiology we have embraced the idea of promoting staff vigilance in completing Moment 1 – before patient contact of Hand Hygiene!

Our idea for the 'Look before you Leap' campaign is to reward staff with a yummy chocolate fish when they are seen completing Moment 1 in Radiology.

Below is a photo of Rona Buttimore, one of our Gold Auditors, ready to reward our Radiology Nursing and Radiographer staff for improving their Moment 1 Hand Hygiene practises and cleaning their hands before patient contact!

Big Brother is Watching You.
Whilst love is all around, germs are too
The Nurses on Ward 12
Follow the Rules of Hand Hygiene so well
They know between patients this is a must
No excuses, forgetting or you're bust!

We chant this each morning before entering the ward.

Hand hygiene mantra from ward 12





# New Dean of University of Otago's Christchurch campus announced

Clinical microbiologist and long-time Canterbury District Health Board staff member, Professor David Murdoch, will be the next Dean of the University of Otago, Christchurch.

The infectious diseases expert is currently head of the Pathology Department at the University's Christchurch medical school. The department is home to many world-renowned research groups, and involved in the teaching of fourth to sixth year medical students.

Professor Murdoch has worked at Canterbury District Health Board for more than 24 years. Between 2005 and 2009 he was its Medical Director of Microbiology. He will continue his part-time role as a microbiologist after becoming Dean in September, when current Dean Professor Peter Joyce retires.

Professor Murdoch says he is excited about strengthening the relationship with Canterbury DHB in his new role.

"We have a real strength in producing health research at the University of Otago, Christchurch campus. A large part of this success is due to our collaborations with Canterbury DHB, with its doctors and nurses working closely with scientists on clinical studies."

As an infectious diseases researcher, Professor Murdoch has been involved in some of the most significant infectious disease research projects here and overseas. These include a global childhood pneumonia study funded by the Bill & Melinda Gates Foundation, and a New Zealand-wide Legionnaire's disease surveillance programme. Canterbury Health Laboratories had a major supporting role in both of these projects.



Above: Professor David Murdoch

# A second opportunity to improve our quality reporting to the public



A couple of weeks ago, we asked you to encourage a family member to complete a simple five minute survey on what should be in our quality accounts. Some have, but we could do with more input.

One of the ways we keep people informed is to publish the quality accounts each year - all New Zealand District Health Boards produce them. Ours is called "A Snapshot of How we're Doing".

Each set of quality accounts must include certain content, as required by the Health Quality and Safety Commission, such as performance against national health targets and reporting against quality and safety markers. "Snapshot" also uses stories of patient and staff

experiences to illustrate initiatives and how they contribute to better care.

Your help and their input will help ensure we report on the things that are meaningful, in a format that will encourage more people to read it.

Here's the link to the survey.

For people who aren't able to access this survey online, we would be happy to send a printed version that can be returned by Freepost. Please call 03 337 8713 or email <a href="mailto:communications@cdhb.health.nz">communications@cdhb.health.nz</a> to request a paper copy, stating the name and postal address of the person you'd like it sent to.

Thanks again in anticipation of your help.

# Flowers making a difference

Colourful fresh flowers are lifting the spirits of staff and patients at Christchurch Hospital and Christchurch Women's Hospital.

The flowers are arranged into small reusable glass jars and delivered every Tuesday evening by Darfield resident, Janine, from The Flower Garden, for wards and areas of the hospitals which have agreed to take them.

She picks up the used jars from the week before at the same time.

Janine says she started the registered charitable trust because she wants to make a difference in the lives of people experiencing illness and those looking after them.

With the help of her partner Rick they bring flowers not only to the Christchurch Hospital Campus but also to several Aged Residential Care facilities as well as Ronald McDonald House and Darfield Hospital.

Flowers can be a way of reaching out and showing someone cares, Janine says.

"By gifting a posy of fresh flowers we hope to reach those who are having a difficult time and need their day brightened.

"We are very respectful and understand the hospital is a place where people are unwell and are healing. So accordingly we conduct our services in a quiet and polite manner."

Ninety per cent of the hospital flowers are donated from Gunn's Flowers NZ, in the Horotane Valley. Janine says without their input and generous donations of gerberas, she would be purchasing flowers weekly.

At times, Janine is able to add to the Gunn's kind donation with donated flowers from florists, weddings, and other events. Since July 2015 Janine has delivered over 2394 jars of flowers. The service is entirely voluntary. Janine covers the petrol costs herself.

Quality Facilitator, Letitia Moorhouse, who helped establish the scheme for the Christchurch Hospital Campus, says it's been operating there since January 2016.





Janine, from The Flower Garden.

"Seven departments are participating thanks to committed staff in these areas who help make the scheme work by returning and collecting the flower jars each week."

A recent evaluation showed strong encouragement for it to continue. Feedback from staff and patients was that the flowers gave them a sense of wellbeing, brightened their day and are special because the flowers and time to assemble them is donated.

"When seeing the improvement the display of fresh flowers makes and reading the contribution they make to staff and patient wellbeing, it would be fantastic if we can continue," Letitia says.

The ongoing supply of flowers through winter is an unknown. If you would like to contribute to the project by donating flowers (low or non-perfumed) or foliage Janine would be grateful.

Janine is also looking for ideas for fundraising to help with costs. If anyone has ideas or expertise in this area she can be contacted on 0211482692 or emailed at

donateflowers@gmail.com

» Article continues on page 16

### Feedback received from patients and staff about the flowers

Beautiful flowers which add colour and texture to an otherwise sterile environment.

Staff, visitors and patients are always remarking on how beautiful they are. It lifts the spirits to see them.

Nice to see some of the outdoors when we have no windows to look out of.

I've really enjoyed seeing the beautiful flowers, they make me happy and I cannot believe they keep coming. Thank you.

They make me smile and feel warm inside.

They are beautiful, free and non commercial. Given in the spirit of aroha. Not showy or pretentious and using recyclable materials (ie: jars).

Please continue with this awesome service.

The flowers make my day a whole lot brighter. They make me feel happy, it is nice to see them when you are stuck inside for 8 hours.

They brighten up my day and make me feel summery

They give a sense of emotional wellbeing. Bringing the outdoors in.

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

Tuesday 17 May 2016, 12:30 pm - 1:30 pm

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

### Title: Watch-house Nurse Initiative: Innovation in a Challenging Environment

Abstract: Since 2008 Nurses with Mental Health and Alcohol and Other Drug (AoD) training have been working alongside Police in Custody units in Christchurch and Counties-Manukau in a joint initiative between Ministry of Health and Ministry of Justice. Alcohol and drug abuse and Mental illness were identified as significant drivers of crime and that up to 80% of detainees had some degree of alcohol or drug involvement at the time of their arrest that had contributed to their offending. Our focus is on screening for both Mental illness and AoD issues, assisting Police staff in management of detainees and making referrals to appropriate services to assist people in Police custody to access treatment and to provide health support and education to detainees in an environment where this is not normally available.

The work we do encompasses all aspects of the health of the individual including Physical, Family, Emotional, Cultural and Spiritual well-being of people who are often very angry, hostile and aggrieved at being incarcerated in an environment that is not very conducive to being engaged in a therapeutic interaction. This poses many challenges to clinicians working in this unique, interesting and varied role.

Presenter: Steve Howie, Watch-house Nurse, Christchurch Police Station

Chair: Joan Taylor, Nurse Consultant

### Special notes:

These meetings will be held on a weekly basis (except during school holidays) and the details of the next meeting will be emailed to you in advance.

- » A light lunch will be served at the School of Medicine venue from 12 noon.
- » Psychiatrists can claim CME for attending these meetings.
- » The sessions will be broadcast to the following sites:

For PMH 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.



# One minute with... Adam Teo, Behaviour Specialist, Intellectual Disability Liaison Team (IDLT) and Psychiatric Services for Adults with Intellectual Disability (PSAID) Community Team

### What does your job involve?

Being part of two small teams at Intellectually Disabled Person's Health (IDPH), I work collaboratively with a range of health professionals across the service at Hillmorton and in the community. Generally, my role focuses on behavioural assessments and interventions, and liaising with community providers in supporting people with intellectual disability to achieve optimal functioning while they are living in the community. As well as the above I provide advice, knowledge and education for clients, their families and staff members who work closely with them. I also conduct home visits as needed to review their progress and report back to the team if there may be an area that requires input from other health professionals.

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

I've taught at Waikato University for a few years and worked as a Behaviour Therapist with families who require behavioural intervention for their child with autism. Although those were enjoyable days, I needed a fresh outlook and experience in another setting and working with adults provided me with just that. This includes facing totally new and different challenges amongst the adult population. Also, this field includes a teaching element which I've always had a passion for.

### What do you like about it?

The differences we are making to our clients each and every single day. Although the role can be really demanding, it is nice to provide these fantastic individuals with new skills to make positive choices to achieve good outcomes for themselves.

### What are the challenging bits?

Resources are often stretched and we have to find ways to navigate through this issue all the time. Liaising with a variety of services can also be quite difficult. We do face verbal and physical aggression from our clients and anger and frustration from their families but we do the best that we possibly can. Some days it can be quite demoralising but we never give up hope.

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

I admire everyone I work with as they are a great bunch of people, each individual has his/her own quirkiness. And we do put out a great morning tea on Friday! But the people that stand out are Ngaire, Chris, Grant and Tina; for their endless support, advice and encouragement.

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

It is similar to the Principles of O'Brien that IDPH has included

in our model of care and we've always worked according to these principles. They are: Respect, Choices, Skill Acquisition, Community Presence and Community Participation.

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

TIME Magazine (4 April 2016), I'm still playing catch up on that...

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

Here in New Zealand. I moved here from Singapore six years ago and I absolutely adore this beautiful country. Ideally I would love for my partner to be here with me.

### My ultimate Sunday would involve...

Squash, brunch, hanging out with friends and household chores. Later, I reward myself with time on my PlayStation 4 for the rest of the evening.

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

I've never been an avid fan of sweet desserts, particularly cake and chocolate (dark), or anything too sweet.

#### My favourite music is...

I'm proud to say I am a big fan of Taylor Swift.

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



Above: Adam Teo at Roys Peak



# The Canterbury Health System Quality Improvement and Innovation Awards are back!

Improvement projects can be submitted in poster format or the standard written submission.

Entrant materials are now available, please visit the Awards Page. at Quality and Patient Safety.

We are accepting Expressions of Interest for written submissions from project teams until 20 May.



# Canterbury Health System Quality Improvement and Innovation Awards 2016

The Awards recognise, reward and publicly acknowledge the excellent quality improvements and innovations taking place within the Canterbury health system.

Entrants are invited to submit EITHER the FULL Written
Improvement Project Submission OR an Improvement Poster
Submission outlining the quality activity

### Enter your improvement project in 2016

Improvement	Pro	ect S	ubmis	sion
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Expression of Interest form due 20 May

Written Project Submission due 22 July

### Improvement Poster Submission

Expression of Interest form due 26 August

Poster Submission due 30 September

### Quality Improvement and Innovation Awards

31 October

The awards are open to all DHB staff and providers whose services are funded by the DHB. For more information including entrants guides visit the Awards page on http://cdhbintranet/Corporate/Quality/SitePages/Home.aspx or email Amanda.Bielski@cdhb.health.nz

### Canterbury

District Health Board Te Poari Hauora o Watsha

# In brief



We still have a few spots available for the PDRP New Assessor Training session on 24-25 August 2016.

### PDRP New Assessor Training

The PDRP New Assessor Training session is a two day course which is facilitated by the Open Polytechnic and will be held at TPMH.

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

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

We look forward to receiving nominations from interested parties.

# Nursing News – May 2016

Included this issue:

- » Flow and Interruption Information Technology and Nursing
- » Lippincott Procedures update
- » Dedicated Education Unit update
- » Great learning opportunities coming up
- » Releasing time to care
- » "It's Ok to ask me…" Hand Hygiene Campaign launched

Read the full newsletter.

# Park & Ride shuttle reminder

A reminder that the Christchurch Hospital Park & Ride shuttle bus service is for patients and visitors.

Staff can park at the Park & Ride if they wish. It is a 15 minute walk across Hagley Park.

The shuttle buses are for patients and visitors shuttling only. We have never provided staff shuttling from the Metro/Brewery car park. The staff afternoon car park at the Metro/Brewery site remains open, as does the staff car parking building.

### **ROSC Coordinator**

Secondment opportunity now available!

This a part time, opportunity working 16 hours per week for up to 6 months.

Are you a passionate mental health professional who has good all-round office experience, along with excellent customer service skills? Join our Team Residential and Enhanced Mobile Options Service Coordination Team (ROSC), at Hillmorton Hospital.

Responsibilities:

- » Complete support plans and reviews for clients
- » Participate in MDT discussions
- » Provide information and suggestions relating to community placement options

The ideal person will have experience working in autonomous mental health community settings with skills in facilitating meetings between multiple stakeholders.

To apply please go to our careers website <a href="https://cdhb.careercentre.net.nz/">https://cdhb.careercentre.net.nz/</a>

# News from the Office of the Children's Commissioner

In this issue...

- » What does it really mean to be "child-centred"?
- » Voices Project update
- » OCC in the media
- » Child Poverty Monitor postcard campaign
- » Our latest submissions
- » Introducing...
- » Watch this space...

Read the full newsletter



# Annual Artist Doctors & Friends Variety Concert

17 September 2016

We are looking for.....

Artists, Sculptors, Photographers, Crafts People, Jewellers to exhibit in our Art Show.

Musicians, Dancers, Comedians, Bagpipers, Ensembles to perform in our concert.

For more information:

Visit our website ARTISTDOCTORS.ORG.NZ

Or email is at enquiries@artistdoctors.org.nz

Event Organiser Ros McCarthy Ph. 364 1104 M. 027 353 2639





### DIABETES SYMPOSIUM

### & 60<sup>TH</sup> DIAMOND ANNIVERSARY DINNER





Presented by Diabetes Christchurch Inc. and Canterbury Diabetes Consumer Group Saturday 28<sup>th</sup> May 2016, Te Hāpua: Halswell Centre

### Full programme on our website

Pharmaco PHARMAC Conterbury Clinical Network

## DIABETES CHRISTCHURCH INC.

Ground Floor 550 Hagley Avenue Christchurch 8011

www.barnabybee.com

og 378 6266





YOU COULD COME IN CONTACT WITH INFLUENZA ANYWHERE, ANYTIME. **GET IMMUNISED.**THE VACCINE IS FREE FOR ALL STAFF.

# Staff influenza vaccination clinics

### Influenza can be anywhere - get immunised

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

View the clinic times here.

### Community Energy Action News

In this edition:

- » EECA Insulation subsidies ending in June -Refer now!
- » Possible changes to the tenancy act and insulation subsidies
- » Celebrating 21 years of free curtains at the Curtain Bank
- » An invitation to the Curtain Bank's educational afternoon tea

Read the full newsletter



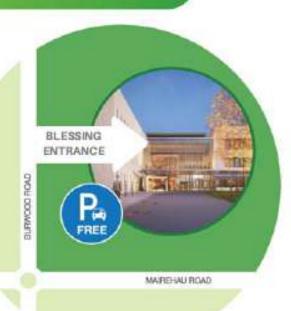
# YOU'RE INVITED TO A BLESSING AT BURWOOD HOSPITAL

Thursday, 26 May at 8:15am

Canterbury DHB warmly invites you to join a Blessing service of the new facilities at Burwood Hospital.

Please gather outside the front of the main entrance of the new building. The entrance is off Burwood Rd.

There will be an opportunity to join the procession through the hospital while each area is blessed. The blessing is expected to take approx 2 hours.



Refreshments will be served in Ward BG following the Blessing

RSVP: communications@cdhb.health.nz before 23 May

# Save money and share driving costs

Have you thought about carpooling?



# DID YOU KNOW?

Over 10,000 Waimakariri residents travel to work in Christchurch daily. Around 80% of these vehicles have only one occupant during peak travel times.

You could save money on petrol and parking by sharing driving costs with one or more passengers







**More information here** 

