



Nurses' voices speak volumes: compassion, caring and putting others' needs before your own.

A heartfelt thank you to all our nurses, including those who answered the call to work in new and challenging environments: Rosewood, Ward GG and Christchurch Hospital's COVID-19 Acute Medical Assessment Unit.

This week we have a couple of good reasons to take stock, reflect on the past few weeks and feel proud of what we've achieved and where we are as an organisation, a community and a nation.

The first reason is a move to Alert Level 2 – Reduce, which indicates the disease is contained but the risk of community transmission remains. This reflects the huge commitment from the country as a whole to meeting the challenge posed by COVID-19. This has also been mirrored by the health system responding to a new environment and the need to work in different ways. As the country continues to navigate COVID-19 we all still need to keep up our good hygiene practices, wash our hands regularly, dry them thoroughly, stay home if we're sick, and maintain a safe distance from strangers. But we can reconnect with whānau and friends and get back to some semblance of normality.

The second reason is International Nurses Day tomorrow. Celebrated every year on Florence Nightingale's birthday, this year more than most has really shown the whole country and the world how essential nurses are in protecting and caring for communities.

There has been an enormous amount of work from many people as part of the COVID-19 response. However, I want



to share some messages from three nurses who worked at Rosewood Rest Home and Hospital. Canterbury DHB temporarily took over managing Rosewood when it could not be adequately staffed after a large number of regular Rosewood staff needed to self-isolate. Staff from across the DHB, private hospitals and agencies came in to ensure the safety of residents and support Rosewood until it could be safely handed back to its manager and staff.

To me, the messages below highlight the training and experience of an exceptional group who showed up during a time of great need and difficult circumstances. They provide a glimpse into the resilience, compassion and stoicism displayed each and every day by nurses across the health system. And, importantly, they show another side of the experience, beyond numbers, statistics, restrictions and alert levels.

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The first message is an excerpt sent to the Prime Minister Jacinda Ardern from Danielle Davies, a Registered Nurse and Organiser with the New Zealand Nurses Organisation who recently worked at Rosewood Rest Home. Danielle

says she “felt compelled ... to paint a picture from a frontline health sector perspective and to demonstrate the incredible efforts of the health workers of our country.”

I can only characterise this recent experience as nothing short of remarkable. All the workers were essentially strangers, thrust together for the sake of keeping Rosewood afloat. Despite the diversity of our backgrounds, we all shared the same aims: to care for the remaining residents; and to provide them with routine, compassion and health service.

Those who I worked with at Rosewood came from many health sectors – operating theatre nurses; older persons mental health support workers; nurses newly out from

retirement; student nurses working as caregivers. The level of work ethic and comradery was second to none – what bonded us was our mission in caring for the Rosewood residents and the ease at which working together fell into place was extraordinary.

The positive and pragmatic way in which Canterbury DHB coordinated Rosewood cannot be understated. The high level of communication, provision of PPE, occupational health consideration and general professionalism is something to be commended.

The second excerpt is from a letter sent to me from Jo Hathaway, Regional (South Island) Programme Facilitator – Palliative Care with the South Island Alliance Programme

Office (SIAPO), who volunteered to be redeployed to work at Rosewood as a Palliative Care Clinical Nurse Specialist.

As I start to return to my usual role, I wanted to take some time to reflect on the last couple of weeks and acknowledge and thank the vast number of people in Canterbury DHB who have poured countless hours in to supporting the patients, families and staff of Rosewood Rest Home and Hospital.

It is still hard to describe the situation we were faced with. Firstly, we changed in to scrubs in the clean area, then got in to our PPE in the transition zone (under the watchful eye of our fabulous PPE Champions). Then it was brief introductions to those who would be our colleagues for the day (Registered Nurses, Enrolled Nurses, student nurses, theatre nurses, paramedics, dental nurses and caregivers, all redeployed from other services) and straight in to the ward. Everyone worked tirelessly in PPE to keep up with the heavy nursing tasks required, while still taking time to fuss over the personal touches for each patient, like finding the right station on the radio or singing happy birthday complete with a little cake and candles. The most heart-breaking of all of this though will always be the inability to unite families with their loved ones in their time of need.

Meanwhile, on the other side of the glass door separating us from the outside world, we could see many others working equally as hard. Deliveries arrived; a constant stream of clean linen, more scrubs, boxes of PPE, equipment, food for patients, food for staff, medical supplies, gifts for “Rosewood” from neighbours and industry colleagues, all of which we were using as fast as they arrived. More staff arrived, ready for induction in to their new roles as receptionists, cleaners, administrators, or to receive training on the use of PPE in preparation for work within the clinical areas. Beyond that, there were

security guards who stood alone on the footpath in 10 hour shifts, protecting us from unwanted intrusions.

And then unseen but greatly appreciated, the ECC team who co-ordinated us all and devoted themselves to ensuring the smallest details were accounted for. I cannot begin to imagine the mammoth task of staffing and operating an aged care facility in the throes of a deadly pandemic, and all from afar. But what I can say is that I’m deeply grateful to each and every person who sorted their piece of this giant puzzle and kept us all safe. I am also humbled by the continuation of care for those of us who stepped in and out of Rosewood. Having unrestricted access to a full range of PPE during my work, as well as health assessments and swabs on completion, has been a significant psychological support throughout, and has enabled me to feel confident about my safety at work. One less thing to worry about in this extra-ordinary set of circumstances. Thank you.

I would also like to acknowledge the often unsung heroes of our health system; the staff working in aged residential care. Without knowing anything about [the] patients when I arrived, it was still very obvious that these people were not just well cared for, but loved. The little messages left around the place signalling to others that ‘Bob’ likes fruit with his weetbix but ‘Nancy’ hates mushy carrots, the smiling faces in photos on the wall of outings with staff. The smiles from patients on their return told us they were greatly missed. No doubt it will take a long time for the Rosewood community to pick up the pieces and move forward. I hope we will all continue to offer them the support and resources they need.

With my most humble gratitude for all the mountains that have been moved by many in recent weeks.

Canterbury DHB Nurse Coordinator Roxanne McKerras – who usually works at Burwood Hospital and also in the Quality and Patient Safety team – worked in the Rosewood

Rest Home hospital wing. She says it was an amazing opportunity and she worked with some good people:

For the two weeks I worked at Rosewood Rest Home, none of the staff had worked there before. We arrived not knowing any of the residents, their whānau, or where anything was. Those first few days felt quite chaotic until we found our feet, where everything was and got to know the residents. It was hard for them to adjust to having staff caring for them in full PPE as it made it difficult for them to see us or hear us well.

Overall, I was absolutely blown away by the outstanding nurses and caregivers I had the pleasure of working with from all specialities and from all over Canterbury – many of whom had very little experience in dementia care. Their

dedication and empathy were humbling. Their courage and strength got us through some very long days and I thank them so much.

I was fortunate enough to be in the last support crew when the Rosewood staff were transitioning back and met some fabulous Rosewood staff. They did it pretty tough on the outside not knowing how their residents were getting on and if we were looking after them. To everyone at Rosewood, I can assure you we did. The smiles on the faces of the residents when you returned was absolute gold. Their family had come back.

I want to also acknowledge the work and courage of the staff who worked on Ward GG. Please see page 11-12 to read more about their experiences and feedback from families of residents about the exemplary care they provided.

The past few weeks have been a tough time for nurses

across the Canterbury Health System. Tomorrow is your day, International Nurses Day, and I hope as you reflect on your experiences and your profession, you feel proud of the contribution and difference you and your colleagues have made in caring for your community and each throughout an extraordinary time.

First to stand up an Emergency Operations Centre and likely the last to wind down – this week we also salute the hard-working team at Community & Public Health

This week we provide a snap-shot of a day in the life of our public health team. Sixteen weeks ago this team stood up their EOC in just two hours. They've been involved in our response in many 'behind the scenes' ways, working airside at the airport greeting incoming and then screening outgoing passengers; they are at the port, have dealt with cruise ships in Akaroa and super-yachts in Lyttelton. They cover Canterbury, West Coast and South Canterbury and

have worked closely with aged residential care providers including those with clusters. They've been involved in setting policy, case investigation, contact tracing, isolation and quarantine facilities; they've provided advice to general practice, presented in the community and answered hundreds of media queries related to cases, numbers and contacts. Find out more about the team at Community & Public Health on page 9-10.

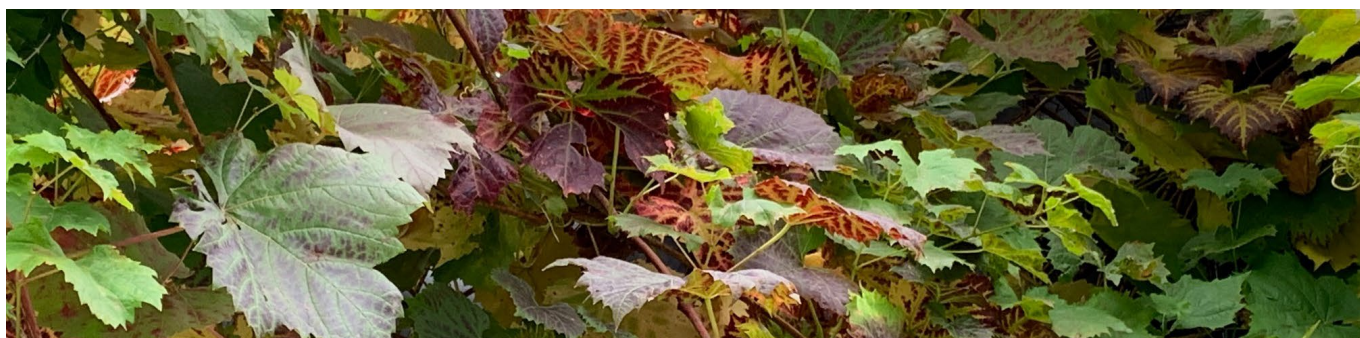
Haere ora, haere pai
Go with wellness, go with care



David Meates
CEO Canterbury District Health Board

If you have a story idea or want to provide feedback on *CEO Update* we would love to hear from you! Please email us at communications@cdhb.health.nz. 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](#).



Bouquets

Ward B1, Burwood Hospital

Just to let you know that we are so pleased with the wonderful care from the staff on Ward B1. As a family we are so happy with the way the staff have kept us so well informed all the way through, despite the COVID-19 restrictions. We were amazed by and thankful for Dad's birthday celebrations and Facetime call, and we are extremely grateful for the photos sent to us of Dad's birthday party on the ward. It made up for us not being able to be there. Please pass on my sincere thanks to all the staff on behalf of the family.

Emergency Department, Christchurch Hospital

The young doctor who treated me ... was extra helpful. He answered all my questions and he was very kind and caring. I only know him by his first name: James. He saw me around 8pm on 1 May. Also, the receptionists and triage nurse were very efficient and helpful. I'm very impressed by all who helped me at such a busy time of the night. Thank you.

Ward 28, Christchurch Hospital

I was a patient in Ward 28 (Neurology) way back in October 2005. Last year, I wrote something to share of my recovery, and a nurse I know suggested that I share it with the ward, should anyone still be working there from that time, or if not as a

perspective from a patient to any of your hard workers there. I am forever grateful for the care and support I received, and even though I have no recollection or memory of this time, I would not be where I am today without it.

Health Protection Officers (COVID-19 isolation follow-up process)

Thank you for following up with this information. We really appreciate the support we have been given. The staff were fantastic – so positive and personal and you didn't feel like just a number.

Surgical Progressive Care Unit (SPCU), Christchurch Hospital

We would like to pass on our heartfelt thanks and gratitude to the nurses and staff of SPCU in looking after our mother up to, and at the time of, her passing. Mum received wonderful care and compassion from everyone, and this same compassion was shown to us, her family, that last day. We were extremely grateful that we were still able to come in and see Mum in her last moments, especially with the tight restrictions with COVID-19. Everyone was fantastic.

Reception, Christchurch Women's Hospital

What a wonderful job you all do. I was greeted with such warm smiles and you were all so helpful. Thank you.

Eye Outpatients

Your care and attention was awesome. Thank you so much, I am very grateful.

Big Shout Out

A massive thank you to all the theatre, recovery and anaesthetic staff for the wonderful way you have treated our patients and staff as we moved electroconvulsive therapy (ECT) treatment to Christchurch Women's Hospital Day Surgery during lockdown. Everyone has been so helpful and kind to us; so willing to help us work in what is an unfamiliar environment! We have felt so very welcome. It has been wonderful that you have all been able to help us continue this essential treatment over this time and be part of maintaining our patients' wellness. Looking forward to seeing some of you back at our place in the near future!

From the Specialist Mental Health Service ECT team

#carestartshere



2020
INTERNATIONAL YEAR
OF THE NURSE AND
THE MIDWIFE



International Nurses Day is celebrated across the world on Florence Nightingale's birthday, 12 May. This year marks her 200th birthday but also the World Health Organization's International Year of the Nurse and the Midwife. Nursing is not an easy career, particularly in times of great stress and clinical need – it is hard work, challenging, and rewarding.

Today and over the coming week, I would like you to take the time to reflect on the impact you have on people – the patients/clients/consumers in your ward/unit or on your community case load, their families/whānau/support people, and your colleagues too both within your team and external to your team.

In 'normal' times we would celebrate with gatherings, afternoon tea and a commemoration service, but due to physical distancing, the inability of all nurses to partake in any gathering we will postpone these sessions presently. We are used to working in a busy system, and the public and people we care for have high expectations of us as nurses this is no different now. As Nurses you regularly go above and beyond for our people and some of the most vulnerable and stigmatised members of our community, and at times, like this, in a pandemic situation that takes real courage on your part.

I suspect you often take for granted your knowledge and your skills and not recognise your worth. So, take the time to recognise the true value and importance of what you do – you are providing care that at the very least improves lives and can in fact be lifesaving.

Ask the patient/client/consumers and their family/whānau members what they appreciate about the nursing they have experienced during their period of care – and they will talk about what the nurses did – the nurse who would patiently explain why something could not happen as they had hoped; the nurse who made them a cup of tea and some toast; the nurse who managed to get them some medication prescribed and delivered; the nurse who recognised the early subtle clinical deterioration that may well have saved their life and the nurse who just sat quietly with them for a while even though s/he was really busy; and the nurse who refused to let them go on leave because they were at risk, and the nurse who kept directing them to their room for some quiet rest or spent some time with them in the sensory room. But most importantly they will tell you how the nurse made them feel – the nurse who was there for them; the nurse who was kind and was optimistic and accepting – leaving them feeling that they mattered.

You are essential to the people of Canterbury and beyond and safe, compassionate and effective care cannot be provided without you. Thank you for all your hard work, the kindness and compassion you share with others, and the expert knowledge and skills that you share and use every day.

Happy International Nurses Day.

Mary Gordon
Executive Director of Nursing
Canterbury District Health Board

Nurses making lives better

Trevor, Susan, Hilda and Tina have been patients in the Canterbury Health System and share their experiences and thanks to the nurses who cared for them. Watch the videos on Vimeo [here](#).

The voices of nurses, a celebration of International Nurses Day

As we celebrate the International Year of the Nurse and the Midwife, and in particular Nurses Day tomorrow on 12 May, thoughts turn to why nurses do the job they do, what leads and inspires them to continue in the profession, particularly in this year with the theme of 'Nurses: A Voice to Lead – Nursing the World to Health.'

Here are the voices of nurses across Canterbury DHB responding to the following prompts: "I love my job," "Being a nurse means" and "I chose nursing."

Their thoughts and answers will surely resonant with all of us. As one nurse said, "I chose nursing initially not being certain I would like it, but knowing it would probably give a platform for working with people in an empowering way. As it turned out, I do like it."

"Being a nurse means I may go for hours on end before I get to the toilet, or my pager will go off right when I'm about to sit down for lunch. I have funny stories that only other nurses will 'get' ... but nursing for me will never be 'just a job'. To come to work every day and do a job you love is a privilege. I know that a simple smile of thanks from a patient is all that is needed to know I have made a difference." *Kerry Winchester, Clinical Nurse Specialist Christchurch Hospital.*

"I love my job because I enjoy the variety of the role. No two days are the same. I love the life lessons I learn from each and every patient I am involved with." *Asra Stanley, Registered Nurse, Specialist Mental Health Service.*

"I chose nursing because of the variety of opportunities that are provided, that enable me to support people through their health and wellbeing journey." *Dinesh Lal, Nurse Educator.*

"I love my job, and, after being a nurse for many years, I wanted to give back to others by sharing my experiences on teaching others. Simulation gives me the opportunity to work alongside other professions to improve patient care. I love the diversity and delving into why people do what they do. This role allows this in an interactive and an



Medals kindly loaned by Nurse Coordinator Projects, Nursing Workforce Development Training Cathy King, who has completed these three trainings

Top left, New Zealand Registered Nursing Medal (1998)

Top right, New Zealand Psychiatric Nursing Medal (1991)

Below, New Zealand Registered Community Nurse (Enrolled Nurse) (1975)

exciting way that allows us to test theories and find new and innovative ways for doing things." *Chris Beasley, Manawa Simulation Centre Coordinator and Canterbury DHB Joint Simulation Lead.*

"Being a nurse means making a difference by improving health outcomes for people. My current role is Infection Prevention and Control (IP&C) Nurse. In the past I was a mental health nurse in the UK, New Zealand and Australia. During my 30 years as a nurse, I have enjoyed being able to develop and share my nursing skills and knowledge with student nurses, graduate and experienced nurses, and now especially with the COVID-19 pandemic, being able to support and prepare nursing and healthcare staff with the skills and resources for them to clinically assess and provide safe nursing cares to patients in hospital and community settings or their own home. This has been at times challenging but also a great privilege." *Suzy Rogers, Clinical Nurse Specialist, Infection Prevention and Control.*

"I love my job, it can be beautiful, wonderful and so rewarding. Some days I leave work, my face hurts from smiling because I am replaying those fantastic conversations with the exciting people I have met. I think about the people I help, with those little conversations or actions that made a difference in their lives no matter how small that difference may be. But I am so glad that I am able to do that." *Rupinder Kaur, Enrolled Nurse, Specialist Mental Health Service.*



"I chose nursing because I want to make a real difference in people's lives. To be there to support people in some of the most vulnerable and uncertain times in their life." *Gabrielle Kerdemelidis, Clinical Nurse Specialist Older Persons Health & Rehabilitation.*

"I love my job because mental health has always been an interest of mine. I really enjoy working with a variety of people from all different walks of life. My passion is to listen and support people who are going through a tough time." *Jo Meyer, Hospital Aide.*

"Being a nurse means having the skills, willingness and ability to be what is needed. My nursing position involves being a role model, an educator, a knowledgeable practitioner, a team player, a counsellor to others, and most importantly an advocate. I work alongside vulnerable individuals who may struggle to have a voice. I see my ability to support and be the spokesperson for these individuals as the most rewarding, complex and important part of my role." *Ainslee Elliott, Psychiatric Services for Adults with Intellectual Disabilities.*

"I love my job because it has allowed me to follow many varied opportunities over the years in a way that has allowed for my diverse interests in social justice, human interaction through to the use of technology." *Warren Nairn, Acting Nursing Director, Women's & Childrens.*

"I love my job because I don't have to put on a different persona when I come into work. Being comfortable in my job that also compliments my personality, allows me to nurse from a place that is of compassion, empathy, service, respect and love – values that are of great importance to myself and the culture that I hold dear to my heart. It's a job that allows connection on all levels of Hauora (wellbeing)

and what gives me the most satisfaction in my line of work is the warmth and appreciation received from families and individuals who feel at peace when coming into an unfamiliar and scary environment like the hospital. I get to look after individuals who have either no family or have family who are far away. As sad as the situation may be it's a privilege to be able to care and be there for this individual who sometimes just needs the company of another person. Finally it has given me an opportunity to serve my Pasifika community who are needing the help and guidance in navigating the health system and improve our health inequalities/inequities – My biggest joy." *Philomena Petaia, Registered Nurse.*

"Being a nurse means I have the best job in the world! I work with patients and their families in times of great stress and vulnerability. My role combines both physical and mental health assessment and interventions so I get to work in a truly holistic way. Whether I am providing hope when all seems lost, supporting someone through a crisis or exploring better ways of managing a physical problem, I use all my skills. Nursing is compassion, empathy, clinical and technical skills and of course the therapeutic relationship. Patients and families are the who and why we exist. Their strengths and challenges inspire me to be a better nurse. It is an absolute privilege to be trusted into someone's life and to support them in recovery and wellness however that is defined for them." *Jane Foley, Registered Nurse Specialist Mental Health Service.*

Happy International Nurses Day!

The Public Health Unit – driving our response to the pandemic

It can be easy to forget that behind the COVID-19 statistics there's a real person. Well, behind every one of those people is at least one of ours.

Community & Public Health (CPH) is the quiet, solid engine that supports our community to stay well, making sure our drinking water is drinkable, championing health initiatives like smoking cessation programmes, working with Environment Canterbury on air quality and home heating or looking after the mental wellbeing of our community through the *All Right?* campaign. However, during a crisis, the public health team and their skillsets come to the fore like no other.

With the training, understanding of diseases and their transmission through populations, and enviable knowledge of our communities and support systems, this team was ready to take the lead on stamping out and managing a pandemic like COVID-19. Measles, hepatitis, whooping cough and a raft of other communicable disease outbreaks have helped hone the skills of the team.

Community & Public Health is responsible for tracking, tracing, comforting and advising those who have tested positive for COVID-19 in Canterbury, the West Coast and South Canterbury.

Within a matter of hours of being alerted, 'business as usual' for our Public Health Unit ceased to exist, and every effort, hour and individual has been focused on the response since. They were the first of our health system's Emergency Operations Centres to 'stand up' and dedicate resource to manage the public health response to COVID-19.

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Every day begins with the Emergency Operations Centre (EOC) teleconference. Many government agencies work with the Coordinated Incident Management System (CIMS) structure; for Public Health, it is the backbone of everything they do during a pandemic. It dictates roles, responsibilities and tasks for the response and because this EOC has been run during many local and regional emergencies, team members step easily and quickly into their new positions.

At around 10am, the first positive cases come through from the lab and the phone calls begin.

Each new case is allocated to a case investigator who informs people their test was positive and they need to isolate immediately. They help people trawl back through

By the numbers



100%

Cases isolated within 24 hours of diagnosis



More than 8,000

Direct interactions with Cantabrians since the outset



100 (now) 300 (at the outset)

Calls made every day to new and existing cases



80% Of cases and contacts that have since come out of isolation



5 – 45 Minutes on the phone for each isolation check



5 Questions asked during daily isolation check calls



2 Hours to switch from business as usual to establish a Community & Public Health pandemic response Emergency Operations Centre

their movements to uncover close and casual contacts, and then connect with each close contact to let them know they too need to go into isolation. These calls generally take at least an hour and call on the unique skills of the team to ask questions, prompt recollection and identify casual and close contacts who may be at risk of infection.

This team also works to uncover where the initial infection came from, and this can take some days. It's imperative this work is done so cases can be linked and the virus tracked.

The ideal is to have all contacts contacted and isolated the same or following the day of notification. Our CPH team has an impressive rate of 87 percent of all cases and their contacts isolated in the first 48 hours of notification.

A separate team makes check-in calls throughout the day to those already in isolation. These calls ensure those in

isolation haven't left their property or had any visitors; check on physical and mental wellbeing; and analyse any developing symptoms. Calls are made every day and can take just a few minutes or half an hour or more, depending on the circumstances of the person in isolation. If needed, referrals are made to welfare and support agencies or Civil Defence Emergency Management.

While most people are in isolation for 14 days, this can increase depending on living circumstances. If, for example, Dad is the initial case, at 10 days after his symptoms began, so long as he's been symptom free for at least 48 hours he can be released from isolation. As close contacts, the rest of the family need to start their full two weeks of isolation, and if any member of the family gets COVID-19 during that time, the clock is reset. It can be a very complex situation, depending on how many people are in the household and how complete the isolation is for the positive case. The contact managers keep track of all this, talk to every person in every household in isolation, and make calls to 'release' people from isolation.

Not everyone is on the phone. Part of the unit is out at the airport, greeting passengers arriving by plane, providing health advice and information on symptoms and what to do if you get sick. Unwell travellers have their temperature checked, and now everyone is required to be quarantined for 14 days after their arrival, and Public Health's border team helps with arrangements such as accommodation if it hasn't already been sorted. We also have a presence at ports to ensure the current restrictions apply to any crew or passengers who disembark in New Zealand. This team is also involved in pre-flight screening for repatriation flights departing from Christchurch, and while the number of flights departing and arriving is significantly reduced, the team are also called on to meet private jets which arrive at all hours of the night or early morning.

The unit has six Medical Officers of Health, three of whom started just a few weeks ago in this statutory role but have all been working as public health physicians for many years. This group of clinicians are trained in public health and are the final decision makers on any complex cases. They are led by Clinical Directors Dr Ramon Pink and Dr Cheryl Brunton whose names are frequently in the media as spokespeople for the team. They're also the quality controllers overseeing the whole process and spend a great part of the day answering a lot of questions from colleagues, individuals, stakeholders, other health providers, the Ministry of Health and media. They make the final decisions about releasing cases and contacts or managing cluster outbreaks and they have some very impressive powers to quarantine people or close premises. Often the public face of public health, they can be some of the busiest people in the team, which says a lot for a team as busy as this one!



Community & Public Health, the hub of the local response to COVID-19



CPH staff at the airport, ready to carry out health screening on passengers departing for overseas



Around 300 calls are made by case and contact managers every day to those who have recently tested positive and those in isolation

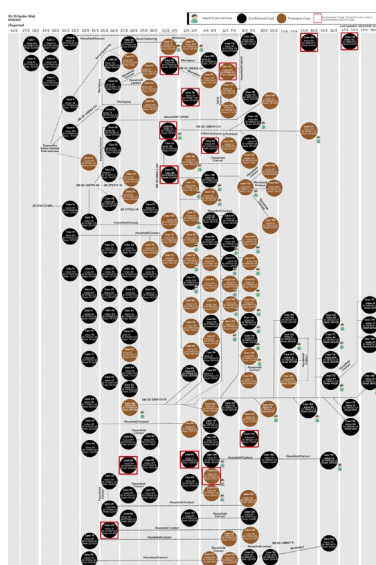
Another branch of the Public Health Unit, with a focus on mental wellbeing and the psychosocial response to the pandemic, has been equally as busy. The *All Right?* campaign, which came to the fore after the Canterbury earthquakes, has been scaled up to a national level alongside the Mental Health Foundation with Getting through together - Whaia e tātou te pae tawhiti. The response to this new campaign has been overwhelming with many thousands of people reaching out through Facebook.

All the while the unit continues to work alongside community groups, maintaining vital contacts and creating important links to ensure we are ready to help with the recovery at the end of the pandemic.

Behind all of this sits the incredible work of the Intel Team which collects, collates and ensures that the mountains of data being gathered goes into the system and comes out as useful information. Community & Public Health feeds its data into the national system and, in addition, has a unique and robust case and contact management system called CCAT (Cases, Contacts And Tracing). This was developed in-house for other outbreaks and has been revamped to use for COVID-19. Intel Team staff have also been contributing to the development and trialling of the new National Contact Tracing System.

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While many of the Public Health team do much of this on a daily basis, others rise to the challenge when called on to drop their 'day job' and step into their new roles within the emergency response. The unit is designed to do this, but its ability to scale up and manage a complex and changing situation – like the one presented by this exceptional virus – has put the team's work in a long overdue and very much deserved spotlight.



The locally developed information system is key to keeping track of the mountains of data obtained to track and stop the spread of COVID-19. Tracking and tracing contacts takes time and a lot of phone calls

Incident Summary: COVID-19 CPH Locally Managed Cases and Household Contacts Only	
Summary	
Total records in database	1,141
Cases Confirmed or Probable	1,141
Under Investigation	1,141
Not a case or Other	1,141
Number of records with at least one contact	1,141
Identified contact records in database	1,141
All contacts of records in database (identified + estimated)	1,141
Highest number of contacts per record	1,141
Mean number of contacts (with at least one contact)	1,141
Cases who are identified contacts of another case	1,141
Exposure Settings	1,141
Isolations at any time	1,141
Releases from isolation at any time	1,141
Current Total in Isolation (on basis of isolation / release records)	1,141
In Isolation at some time on this day (on basis of isolation dates)	1,141
Isolations starting today	1,141
Isolations ending today	1,141
Released today	1,141
People eligible for release who have not yet been released	1,141
Cases (confirmed, probable) that do not have a notification date	1,141
Cases (confirmed, probable) that do not have an isolation end date	1,141
Records that do not have either isolation date	1,141
Records that were not recorded as isolated	1,141
Hospitalised	1,141
Died	1,141
copy to windows clipboard	
Status summary	
Sex by status	1,141
Age group by status	1,141
Ethnicity by status	1,141



An orderly line is often formed by those needing answers from a Medical Officer of Health



The daily Emergency Operations Centre meeting is an essential part of the Community & Public Health response. Many of the team is working remotely, and the daily catch up includes teams in South Canterbury and the West Coast

Extraordinary people, doing extraordinary things: Ward GG

During the response to COVID-19, teams have been called upon to work in unfamiliar environments. We are sharing some of their stories here.

At Burwood Hospital Ward GG, one such team came together to care for Rosewood Rest Home and Hospital residents.

As nurses, compassion is in your DNA and COVID-19 conditions have extended all nurses personally and professionally. Despite this, there have been many moments each day where teams work together reaching another level of exemplary, professional and heartfelt care. The following four nurses were the original team at Ward GG who received the Rosewood residents, and are wonderful examples of the nurses we are fortunate to have working amongst us, caring for people at the end of their lives. It's important to acknowledge everyone else who worked on Ward GG or behind the scenes in a support role.

Steffany is a Clinical Team Coordinator (CTC) at Burwood Hospital. Ordinarily, she works afterhours shifts troubleshooting clinical issues with nurses, undertaking advanced nursing health assessments and liaising with medical teams. Steffany has a wide breadth of nursing experience and stepping in to a senior leadership role on Ward GG has been a seamless transition for her. An example of Steffany's exceptional practice has included working tirelessly with whānau, who could not be there to offer comfort to their family member, to complete the Sunflower Chart, so she could offer as much personalised support to each resident as possible. A Sunflower Chart is a



Ward GG staff in their PPE and nicely physically distanced

pictorial representation of a patient's personal background, listed as items on the sunflower petals. It is used as a conversation starter and to help a patient be seen as a whole person and not just their illness or condition.

A letter received from the family of this patient said the following:

"A nurse restored my faith in the frontline that we so depend on when she managed to exceed all of my expectations with her warmth, kindness and dedication... She facetime'd me then held the phone in front of my dad, so I could say hi... This wonderful nurse then briefly asked me some questions, so I could tell her what name dad preferred to be called, how he used to earn his living, where he grew up, who his favourite pet was and build a personal picture [of who he was] ... She also let me text her a playlist of some of his favourite music, promising it would be played to him that evening... for this person sitting with dad, holding his hand and giving him the comfort his family can't I am truly grateful, today you made things a

little better for me and I thank you from the bottom of my heart."

Avi is an Enrolled Nurse on the Burwood Hospital permanent staff pool. Ordinarily Avi works a variety of shifts across the Older Persons' Health wards. He is a well-respected nurse and colleague and his work on Ward GG was another example of why he is so deserving of this respect.

Avi always advocates for the utilisation of sensory modulation and person-centred care. His previous experience working in older persons' mental health means he is a natural resource and role model for other staff. Avi's person centred care at Ward GG was summarised well in the following family feedback:

"I will hold a huge part in my heart for Avi. [It was] so kind of him to play dad's video, I'm sure it helped him pass. I hope one day to be able to thank him in person."

Mariah is a Registered Nurse in the Post Anaesthetic Care Unit at Burwood Hospital. Mariah has been

a committed, diligent professional in Ward GG and has consistently gone the extra mile for residents. Mariah assumed a leadership role in assuring the appropriate employment and delivery of tikanga Māori to residents. This included writing out a resident's favourite waiata, so staff could join Mariah to sing with the resident at their bedside. Mariah also led karakia and other culturally appropriate practices (in consultation with whānau) to support the safe passage of a resident as they passed away.

Jane is a Registered Nurse who works on permanent pool and in the Spinal Unit at Burwood Hospital. Jane is always flexible and adaptive in responding to the needs of the residents and the wider team. None of the nurses, in the quickly formed Ward GG team, typically work in full PPE and many of them have not worked together before, or with community residents who have hospital level dementia requirements.

Jane has worked hard to promote wellbeing within the team, with seemingly simple things like ensuring people take timely breaks; and she was instrumental in the development of pair and pod nursing on the ward – meaning less experienced staff are buddied with more senior staff, for a safe and successful shift.

It is not only the nurses who have enabled Ward GG to function to the high standard it does. Every shift, without fail, cleaners clean, linen is washed, food is prepared and delivered, medications arrive, and phone calls are taken.

The people performing these roles worked tirelessly to ensure the comfort of the residents and for those caring for them. Packed lunches are provided for team members, staff rosters are managed, and allied team members offer ongoing support.

Members of the Infection Prevention and Control team stay with the nursing team to troubleshoot management options and offer PPE advice, a community general practice and medical cover are consistently accessible, to ensure the medical needs of the residents are met.

Chaplaincy and Māori Health Services remain on call to speak with residents, their whānau, staff and to provide spiritual support and blessings.

The team at Ward GG has been fortunate to receive incredible hampers, thoughts and well wishes from wider Canterbury DHB colleagues and members of the community, including some children from St Albans, who dropped in some Easter eggs.

Now that the residents of Ward GG have returned to Rosewood, these nurses are heading back to their former Rosewood roles. The experiences they've had caring for this group of vulnerable older people were extraordinary. Thank you for stepping up when we needed special people who cared. You were all outstanding.

To read the experiences of staff who worked at Rosewood check out David Meates introduction on [page 1](#).

To Tatou Ora Wellbeing Series

Managing through challenging times – COVID-19

Associate Professor Caroline Bell outlines normal responses to abnormal events and explains what we know about the things that help us to manage these challenging and frightening events. This talk is useful for both individuals and teams to view, to help reflect on how we can look after ourselves and each other.

Watch the video [online here](#).



Kia Kaha scholarships awarded

Congratulations to nurses Katie O'Byrne and Mereraina Porima who are the successful recipients of this year's Kia Kaha scholarships.

The scholarships were established last year by the College of Nurses Aotearoa for registered nurses or nurse practitioners involved at any stage of care following the mosque attacks on March 15. They consist of two \$500 professional development scholarships.

Katie, who is Charge Nurse Manager in Ward 10 at Christchurch Hospital, says she is passionate about ongoing education. The extra study she has planned will greatly help her ability to be an excellent leader to the nursing team she works with.

Katie will be creating an independent project examining the level of sick leave after the Canterbury earthquakes and the Christchurch mosque attacks. Her aim is to evaluate the impact of these events on nurses' health and wellbeing.



Charge Nurse Manager Katie O'Byrne



Nurse Educator Mereraina Porima

Nurse Educator Mereraina, a former mental health nurse, whose iwi affiliations are Kai Tahu, Tainui and Ngati Manawa, is currently completing her Master of Nursing Science at the University of Otago.

She says her studies will eventually provide evidence based research

to understand some of the factors for Māori accessing mental health services by exploring the enablers/ barriers that Pukenga Atawhai experience when engaging with tangata whaiora (a person who is the subject of care, assessment and treatment processes in mental health).

Nursing vigil

Surgical Cluster senior nurses at Christchurch Hospital stood in remembrance to honour nursing and medical colleagues around the world who have died in the fight against COVID-19.

They were taking part in a vigil organised by the Federal Australian Nursing and Midwifery Federation (FANMF).

Nurses, midwives and carers were invited to participate by submitting a photograph or video of themselves with or without a candle.

The FANMF plans to share the images on social media tomorrow on International Nurses Day.



Recognition for research nurse

Emergency Department Research Nurse Felicity Turner has been acknowledged for her part in an international research study.

She was given an award for "outstanding contributions to the successful conduct of BASEL IX" and commended for her dedication, thoroughness and high recruitment rate.

The BASEL IX Syncope study is an observational research project led by a team at the University Hospital of Basel, Switzerland. Nine countries are involved in the study with Christchurch being the only contributing site in New Zealand.

The purpose of the study is to investigate syncope (a temporary loss of consciousness caused by a fall in blood pressure), in the mature population and in particular, to identify any potential cardiac or cardiovascular cause.

Study participants are initially recruited in Christchurch Hospital's Emergency Department and are then followed up for a period of five years in order to monitor subsequent health events and evaluate outcomes.

Felicity says she has always considered it a privilege to have had the opportunity to coordinate this study in Christchurch.

"I felt very humbled to know I was the recipient of this award."

The BASEL IX Syncope study, which began in 2012, is led by Christian Mueller at the University Hospital, Basel, and runs across 16 sites internationally having recruited more than 3,285 participants.

The Christchurch site is led by Emergency Medical Specialist Martin Than, and recruitment has been carried



From left Research Assistant Antony Watson, Project Manager Alieke Dierckx, Research Nurse Felicity Turner, Emergency Medical Specialist Martin Than, Research Scientist Joanna Young, Research Scientist John Pickering and Emergency Care Foundation Treasurer Matthew Yates

out by Felicity assisted by Research Assistant Antony Watson. The project is supported by the Emergency Care Foundation.

In the BASEL IX newsletter the study's leaders Christian and Dayana Flores say: "We are very happy to have you on board and we congratulate you for your success."

Martin says the award is a fitting recognition of outstanding dedication, energy and relentless attention to detail over many years.



DISTANCE NOT DISTANT

TINANA TAWHITI, WHAKAARO TATA



One minute with...

Emma Bühler, Speech Language Therapist, Acute Paediatric Team

What does your job involve?

Our title can sometimes be misleading in this area as it primarily involves assessing and supporting infants and children with feeding and swallowing disorders, but we do assess acute changes in communication too. Our team and I work closely with the patients, their whānau, and the wider multi-disciplinary team and nursing/medical staff to ultimately support safe and comfortable oral feeding. This can look different for individuals depending on their medical condition, abilities and other variables. We work in a variety of settings across the Child Health Service from the Neonatal Unit, to paediatric wards and outpatient clinics.

Why did you choose to work in this field?

My undergraduate study was in neuroscience which I loved, but I've always enjoyed working with people in a practical sense and was drawn to the health setting. One conversation from a friend (who was a medical student at the time) opened me up to the idea of speech language therapy and I was sold! I originally started my career working in community stroke and Older Persons' Health. When I job came up in acute paediatrics, I thought it would be interesting to try and I haven't looked back!

What do you like about it?

I feel very privileged that I get to work with children and whānau at what can be a very stressful time in their lives. Connecting with people and helping to support them is hugely rewarding and gratifying. I'm constantly in awe of the human spirit with just how resilient and strong people can be in challenging times. It's very humbling. Working with excellent colleagues is also a great part of my job!

What are the challenging bits?

Learning to accept circumstances that are out of my control.

Who inspires you?

Everyday people that no matter what their circumstances, treat everyone with kindness and respect. I think this goes such a long way.

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?

Informing and explaining rationale for our practices with patients and whanau is extremely important for engagement and empowerment. Using clear communication and transparency when we don't have the answers is also important for building and holding rapport as well as helping the patient's journey.



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

I'm not a fan of pineapple on a pizza.

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

Pre-2020: Snowboarding the powdery mountains of Japan. Current times: at home in Aotearoa.

What do you do on a typical Sunday?

Take my dog Ted for a hikoi in the hills or along the beach, play a round of golf (with a very high handicap) and finish it off with dinner with friends and family.

What's your favourite food?

Salmon nigiri and, if I'm truly honest, McDonald's chicken nuggets.

And your favourite music?

Difficult question! I really like a bit of everything, but consistent favourites are Young Fathers, A Tribe Called Quest, Aldous Harding and Leon Bridges. I'm really enjoying 1950s playlists on Spotify at the moment too.

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



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Something For You

The Canterbury business community appreciates all the hard work you do. Check out the new, temporary deals offered to all Canterbury DHB staff to say thank you! Find all the details on the [Something For You webpage](#).



Cough or sneeze into your elbow

It keeps the virus off your hands, so you won't spread it to other people and make them sick too.

Find out more at
Covid19.govt.nz

[New Zealand Government](#)

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