



Canterbury heading in right direction with health IT

HiNZ conference: Collaborate: Share. Solve. Achieve. Measure.

Those who made it to the HiNZ (Health informatics New Zealand) conference, hosted this year in Wigram, were greeted by the Canterbury Health System and South Island Alliance display in pride of place right at the entrance to the exhibition hall.

It immediately became a focal point for people to stop and find out the latest on our sector-leading information management systems. It certainly stood out for all the right reasons. It was bright, engaging and told our story from a connected Health IT perspective. Perhaps what stood out the most was our trademark 'typical patient', Agnes, right at the centre of everything we do and the familiar theme of saving everyone's time and improving the health journey by having a connected system with IT products that 'talk' to each other.

It's too early to report on the success of the Design Lab event that followed the conference, but judging on early feedback and the insightful questions and positive comments on the point-to-point tour of our IT innovations, our own health system people enjoyed the opportunity to meet with some experts first hand and gain a fuller understanding of where all these different innovations fit in the health journey, the difference they make now, and their huge potential as we refine and further integrate systems to become more user friendly.



The Minister of Health, Hon. Dr Jonathan Coleman spoke at the opening of the HiNZ conference and praised the Canterbury Health system, and made a particular reference to the stream of interest we continue to receive from health systems from around the world. Other people are interested in the way we do things around here. He also mentioned alliancing and our integrated model of care which are aligned with Government policy. It meant a great deal to the Cantabrians sitting in the audience to hear that endorsement.

This year's conference theme was Collaborate: Share. Solve. Achieve. Measure. It was a relevant theme for us in Canterbury as it sums up much of what we are doing as a connected system.

The Minister talked about IT being a significant strategic investment for Government, from both a health, and a broader social sector investment perspective.

He said IT has a crucial role to play in making the health system more sustainable, improving productivity and efficiency, as well as health outcomes. IT also has a role to play in supporting Government's wider cross-government interests.

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Developing a clear vision for the future of IT investment in health has been one of the Minister's key priorities in his first year as Minister alongside childhood obesity, improving clinical and financial performance and refreshing the New Zealand Health Strategy.

You can read the Minister's full speech [here](#).

Due to the work we are doing with making data visible and usable for everyone in our health system, we supported the visit of keynote speaker Katherine Rowell, an international data visualisation specialist. You can read more about her work and impressions of our health system on page two.

Finally, I hope you managed to get some down time over the long weekend to recharge for the countdown to the end of year and the numerous deadlines and overflowing inbox. As always, when you're a 24/7 operation someone has to work, so thanks to those of you who kept things running like a well-oiled machine.

Have a great week,

David Meates



David Meates
CEO Canterbury District Health Board



Katherine (Kathy) Rowell

US data guru in town for major Health IT conference

An American healthcare data guru is impressed with Canterbury's efforts to enhance collaboration through using data more effectively.

Katherine (Kathy) Rowell was in Christchurch last week as a keynote speaker Health Informatics New Zealand conference.

The co-founder and Principal of HealthDataViz, a Boston firm, Kathy specialises in helping healthcare organisations organise, design, and present visual displays of data to inform their decisions and stimulate effective action.

She says it was impressive to see Canterbury DHB has already made significant progress in how it uses data to work more collaboratively and effectively.

"I have been extraordinarily impressed with the commitment I hear and see from leadership and clinical teams in Canterbury to make data and information readily available to all stakeholders—patients, families, clinicians, managers, and policy makers," she says.

A "powerful" example of this is in the Emergency Department where there are easy to understand displays of the number and types of patients being treated and those waiting to be seen, she says.

"It's a simple but powerful way to share information and signal to patients that they will receive care in a timely manner—that they are important.

"Clinical teams also receive continually updated information to help them deliver high quality and timely care, and to consider and discuss ways to improve care and monitor performance.

"It has been inspiring to see such a high level of commitment and innovation to delivering clear and compelling information throughout the continuum of care, which will empower all stakeholders to make informed decisions and take action."

Katherine was one of eight speakers presenting at this year's HiNZ Conference – New Zealand's premier event for health informatics, which was held in the South Island for the first time in 14 years.

She says data is coming at organisations faster than ever but not everyone knows how to effectively use it and communicate it to make improvements in the system.

"You need to communicate it correctly, clearly and compellingly to all of your stakeholders: patients, clinicians, administrators, regulators, and others," she says.

"But too often, the tables, graphs and dashboards used to communicate healthcare data are poorly designed, at best failing to, and at worst even incorrectly communicating the critical information used to measure performance, educate and inform patients, and identify the right opportunities for change and improvement to our healthcare systems."

In Katherine's interactive presentation at HiNZ she explored the integral role that technology, design and data visualisation expertise, and healthcare knowledge each play in the effective communication of healthcare data.

Right: This screen has been up and running for the past two months in Christchurch Hospital's Emergency Department.

People waiting can see how many ambulances have brought patients in and how many patients have walked in during the past 24 hours.



Facilities Fast Facts

Burwood

Presentations to staff by Dan Coward, General Manager Older Persons' Health, about progress at Burwood are now being run every month. This month's presentation highlighted that planning for the move to the new facilities is now advancing rapidly – including:

- » Migration planning (who moves where, and how, on the day)
- » Decisions made on materials and colours for curtains, carpets and furniture. Furniture has been ordered or is being reused from existing stocks.



- » Decisions made on ward names and how the wards will be “stacked” in the new facilities.

Also in the presentation was an indication of how the new-look signage for the CDHB has been applied at our new facilities in Kaikoura (left) and Rangiora (right). The signage aims for clarity, consistency and no clutter.



Christchurch

Concrete pour number seven for the foundation slab of the Acute Services building was completed this weekend, closing the gap across the site. The final pour, which will join the two pieces of slab together, is scheduled for 7 November.



The photo above shows progress on the electricity substation building on St Asaph Street, in the former car park of the Eyes department. The block walls for the lower storey are almost finished. The roof beyond belongs to the Endo labs, and behind that on the left is the main Labs building.



A huge amount of reinforcing steel is going in to the foundations, as this photo above shows. Spot the workers lacing all the steel together!

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This aerial photo, taken on Saturday 24 October, shows the huge area of the Acute Services building foundations compared with existing buildings. The orange-tinted area is where the final pour will be. The darker rectangular area just above it is this weekend's concrete, drying out.

Ashburton



The site preparation work for the new theatre block at Ashburton Hospital has begun. Once the soil is removed, the next stage is creating the foundation slab with reinforcing steel and concrete. Also under way is the refurbishment of upper level Block C (ward 3). This work started on time in early September and is expected to be complete this year.

Canterbury Grand Round

Friday 30 October 2015 – 12.15 to 1.15pm, with lunch from 11.45am.

Venue: Rolleston Lecture Theatre

Speaker: Speaker; Russell Wills, Children's Commissioner

"Protecting Vulnerable Children – an Update"

Children's Commissioner and Hawke's Bay paediatrician Dr Russell Wills will discuss the recent reports on the care and protection system, including CYF's Workload and Caseload Review, the Office of the Children's Commissioner's State of Care Report, and the Draft Report of the CYF Modernisation Panel, led by Paula Rebstock. It is clear that major change is coming for the care and protection system in New Zealand. Come and hear what has been learnt so far, what's coming next for Christchurch and what health services need to do to prepare.

Chair: Nicola Austin, Neonatal Paediatrician

Video Conference set up in:

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

All staff and students welcome

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

Next Clinical Meeting is Friday 6 November 2015

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



Bouquets

Orderlies, Christchurch Hospital

We would just like to say a big thank you to the orderly, Phil 'with the beard', for your enthusiasm in your job and the kindness and respect you show to patients and the staff around you. Your efforts do not go unnoticed. Thank you for all you do.

Intensive Care Unit, Christchurch Hospital

ICU staff amazing and sensitive during family group meetings. "Can I help" staff (volunteers) also amazing even just seeing them around is very comforting.

From the Emergency Department to Acute Medical Assessment Unit (AMAU)

We would like to comment very favourably about an orderly called Phil who took Mum from ED to AMAU. We have been in ED most of the day and this guy was amazing. He introduced himself well and talked really positively to Mum (90 years old) about where she was going and what it would be like for her. He warned her of bumps etc and was always considerate towards us (two daughters). Above and beyond! Thank you Phil.

Great Escape Café, Christchurch Hospital

Great Escape meals are good value for money, thanks.

Oncology, Christchurch Hospital

A huge thank you to all those who have treated my wife during her radiation therapy. We are extremely grateful for the excellent/ personal service we have received.

Oncology, Christchurch Hospital

Everyone has treated me so well, I

feel looked after every time I come in. I just wanted to say how much easier seeing the smiling, helpful staff here makes my treatment. You are all a credit to the hospital.

Hagley Outpatients, Christchurch Campus

The staff are very nice and friendly. Quick response upon arrival of patients, very caring. Good service. I appreciate their help. They make patients comfortable. Thanks a lot.

Neurology and Radiology

Patient (name supplied) had a sudden stroke. Due to promptness in investigation and marvellous availability of new technology, clot retrieval, she's recovering rapidly. We cannot thank all involved enough. Wonderful care.

Nuclear Medicine, Christchurch Hospital

Very impressed with procedure and with the staff whilst having bone scan and CT.

Christchurch Hospital

I have been a regular patient at several departments of this hospital with many specialists involved and procedures carried out. I have nothing but praise for every aspect of your service and expertise, and multi-million dollar equipment. The staff right from the tea ladies, porters, wonderful nurses who work so hard, receptionists, surgeons etc. The prompt appointments when a problem arises, the food is well presented and excellent. Park and Ride service is a big plus too. Thank you all, you have saved my life several times due to the above comments.

Wards 10 & 12, Christchurch Hospital

...At 66 years of age, I never expected to be able to recover to my previous level of fitness after heart surgery. But I feel as fit or fitter than ever. Please pass on my thanks and best wishes to all concerned - Mr Shaw, Mr Bridgman, ICU and Wards 10 & 12 staff.

Ward 15, Christchurch Hospital

I had a week in Ward 15....I had wonderful care but at times the nurses were so busy. Most of the nurses were lovely and caring. A nurse aide in the ward called Johnno was so busy everywhere and helpful. The food was very good... I do think we are very lucky here after what I hear about other hospitals.

Oncology Ward, Christchurch Hospital

Nurse Katrina is wonderful, friendly, cheerful, and professional. Nurse Katrina is very skilled at finding veins and inserting needles with care.

Vascular, Christchurch Hospital

Just want to thank all staff who did my catscan for my blocked vein in my right leg. They were so caring. All the Theatre staff that put two shunts in my right leg. What marvellous people. So humble and caring. Nurses back at the ward were so lovely also. Give them all a big thank you.

Musculoskeletal and Spinal Interventional Radiology

I cannot thank you enough for how you changed my life from a constant terrible pain to comfort. I'm still anxious to believe this is reality. Anyway thank you again.

Data leads to individual approach for Peripherally Inserted Central Catheters (PICCs)

A PICC is a centrally placed [intravenous](#) access device that can be used for a prolonged period of time, such as in long [chemotherapy](#) regimens and extended [antibiotic therapy](#).

At the beginning of 2013, a new type of PICC was introduced to Christchurch Hospital. This coincided with a change in practice in the Bone Marrow Transplant Unit where PICCs were being inserted (instead of tunnelled cuffed catheters) for patients undergoing a stem cell rescue.

In the first few months, following these changes, it was noted that a number of patients were experiencing an upper arm vein thrombosis (blood clot), says Clinical Nurse Specialist, Bone Marrow Transplant Unit, Wendy Jar.

"It was unclear if this was the result of the new PICC or the result of doubling the use of these lines. It was at this point that a decision was made to audit the PICCs," she says.

Data collected for the audit included the length of time the PICC was in the vein, reason for removal, which arm the

PICC was sited in, as well as age and diagnosis of the patient. This gave the Haematology service a clear picture about what happens with these lines and it is helping to improve care and decision making.

In the first year of collecting data, the rate of upper arm vein thrombosis was 18 per cent, says Wendy. A literature review, undertaken by one of the haematology registrars, found that in cancer patients the expected rate of thrombus should be around four to eight per cent.

Over 2014, in partnership with both the Central Venous Access Device Nurse Educator Elizabeth Culverwell, and Clinical Nurse Manager Interventional Radiology, Pip Francis, a number of theories were tested.

"And we settled on the current PICC insertion and management practices. Now the current rate of upper arm vein thrombosis for 2015 is sitting at around five per cent. This is a vast improvement and is in keeping with international data," Wendy says.

The rate of PICCs migrating out from the insertion site was noted to be around 10 per cent. Solutions to remedy this issue are now being tested and have included the use of an indwelling securement device and surgical glue.

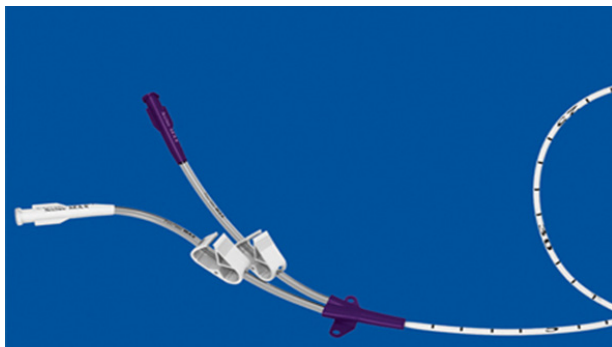
Because the data is in the third year of being collected, the impact of these changes on management and complications can be easily assessed.

"Until now, the type of central venous catheter used has been decided by disease and treatment trajectory but with the information from the audit we are now exploring the use of chest inserted central catheters and are using the data to develop a more individualised approach to line placement and management," Wendy says.

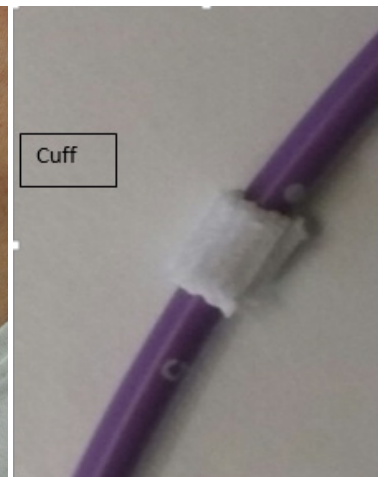
If you have been involved in a quality improvement project and would like your story featured here please email communications@cdhb.health.nz

To read about other improvement activities [click here](#) and select 'Improvement Activities' library.

Upper arm PICC with reverse taper



Upper chest inserted central catheter (tunnelled CICC)



Take action and know your risk – Diabetes Action Month

Over the past 10 years the number of people with diabetes in New Zealand has more than doubled from 125,000 to 257,000. There is also a significant number of people with pre-diabetes.

Diabetes Action Month is a new awareness campaign happening in November which encourages people to become more aware of their own personal risk factors for the disease.

From 1 November a new interactive awareness tool will be available on the Diabetes New Zealand website.

During the month of November a national roadshow will tour 14 towns and cities throughout New Zealand. This will promote physical activity and healthy eating as a means to prevent and manage diabetes. Supermarkets and key community locations will be among the stops.

Diabetes New Zealand Staff and local identities will encourage the public to go online to assess their risk of developing diabetes with the new online tool and take part in the fun Action Month activities.

Saturday 28 November is National Activity Day. Sports and recreation organisations around New Zealand will be opening their facilities to their local communities to promote healthy activities.

Diabetes New Zealand and its partners also have an exciting publicity campaign with social media competitions, targeted advertising via health service waiting rooms and widely circulated pamphlets and posters.

More information about the campaign is available from:
Nicky Steel, National Communications Manager,
Diabetes New Zealand
Email: nicky@diabetes.org.nz
Phone: +64 4 499 7143
For membership and general enquiries: 0800 342 238

diabetes
action month >>



diabetes
 new zealand

Sad passing of a highly respected diabetes nurse specialist

Colleagues are mourning the sad passing of a highly respected Diabetes Nurse Specialist, Marianne Wilson.

Before working at the Diabetes Centre for 22 years as Nurse Specialist and Acting Unit Manager, Marianne worked in patient education for Canterbury DHB in other services. She was awarded lifetime membership of the local Diabetes Society in April this year.

In her speech accepting the Lifetime Membership Award, Marianne said she had met a lot of inspirational people, faced a few challenges and worked with some dedicated and amazing colleagues.

Marianne worked right up until her death, as always putting her passion for patient care first.

Diabetes Clinical Director, Juliet Berkeley, says working with Marianne was always a pleasure.

"Her work ethic and dedication to providing high quality care to her patients has been outstanding."

While she preferred to avoid the limelight, she always stepped up to do whatever was needed including being acting charge nurse manager on multiple occasions.

We will miss her expertise, her dedication and her calm and gentle wisdom, Juliet says.

Our hearts reach out to Marianne's partner Steve and her family.



Marianne Wilson receiving her Lifetime Membership from Diabetes Christchurch. Right, Peter Moore, long term colleague and former Diabetes Clinical Director who presented the award.



New Eating and Activity Guidelines released

Last Monday Minister of Health Hon Dr Jonathan Coleman announced a plan to address childhood obesity. This included the new Eating and Activity Guidelines for New Zealand Adults.

The new Eating and Activity Guidelines for New Zealand Adults are an easy-to-use reference for health practitioners and others who provide advice on nutrition and physical activity. The Guidelines will provide evidence-based, population health statements on nutrition and physical activity, including maintaining a healthy body weight. Although these guidelines are focused on adults, they provide a good basis for healthy lifestyle advice for families. They complement the Ministry's work on childhood obesity.

The new Guidelines will replace the existing Food and Nutrition Guidelines for Adults (2003) and the Physical Activity Guidelines for Adults (2007).

Alongside the Guidelines document, three short documents for practitioners and two health education resources for the public will be released. The short documents include:

- » a guidelines summary
- » the key changes between the old and new nutrition and physical activity advice

» and a topical questions and answers paper.

Why are the guidelines changing?

The development of the Eating and Activity Guidelines Series started after an independent evaluation of the Ministry of Health's Food and Nutrition Guidelines Series.

The evaluation involved stakeholder interviews as well as an electronic survey of health practitioners. Results showed that many health practitioners valued the current guidelines, but felt that they could be improved with some changes to the format and the way they were developed.

The new series aims to meet the needs of the sector, particularly:

- » a more comprehensive and transparent evidence-base
- » more timely information
- » the combination of nutrition and physical activity information
- » guidelines that are easier to access and use.

More information [online](#)

Lincoln Maternity Hospital receives gold award

Lincoln Maternity Hospital received a second gold award last week at the annual Lincoln Responsible Business Awards.

This follows a gold award last year and a silver award achieved in 2013.

Acting Charge Midwife Manager, Lincoln Maternity Hospital, Kay Faulls, says it was a real pleasure to accept the award on behalf of all the Lincoln staff for their hard work recycling, conserving energy and also the hospital grounds hosting the Lincoln Community Garden.

Responsible Business Award Assessor, Roddy Hale, congratulated the hospital on its efforts to be an

environmentally and socially responsible business.

"Lincoln Maternity Hospital demonstrates a good all round approach to recycling waste products wherever possible, including re-using non-confidential waste paper."

Lincoln Envirotown appreciates the support and space for the Lincoln Community Garden that you continue to provide, he said.

It was encouraging to hear of the hospital's pro-active policy of employing local midwives and hospital aides where possible as this contributes positively both to the hospital and wider community.

Occupational Therapy Week

Site visits are one of the many services Occupational Therapists (OTs) offer to help ensure safe discharge of patients back into the community.

Occupational Therapy Week being celebrated this week is a good opportunity to recognise the important role that OTs have in the hospital setting.

Clinical Nurse Manager, Ward 19, Karen Wilson, says one of the important services OTs offer is a site visit.

"In about 2006 the Ward 19 Interdisciplinary Team began to notice an increase in the discharge planning needs of the multi trauma patient and began to plan for their discharge after the first operation."

A site visit was suggested as a way to determine if the home was suitable for discharge. There had been occasions where the length of stay was increased due to the need to put in ramps or where the house was inaccessible.

"These site visits helped to establish the need to look at alternative accommodation due to stairs or unsuitable bathrooms etc, and gave families the opportunity to discuss the discharge needs of their family member with the occupational therapist in their homes."

In 2007, after negotiations between hospital management, the Occupational Therapy Department and Interdisciplinary Team, the Site Visit Service was able to be offered and has become a hospital wide service.

The home visit team strongly believe in Canterbury DHB's vision of an integrated health system that keeps people healthy and well in the community by providing the right care and support, to the right person, at the right time and in the right place and aim to incorporate these values into their everyday practice.

In addition to site visits the now called, Acute Community Occupational Therapy Home Visit Service also receives referrals for pre-discharge, discharge and post discharge visits. The work is varied and often involves collaboration with other community services. The home visit service receives referrals for anyone discharged from Christchurch Hospital within a six-week timeframe.

Staying true to its occupational therapy roots, team members are able to provide a holistic approach to this acute service and aim to ensure a patients needs are met to ensure they remain safe at home, Karen says.

This often involves basic housing modifications such as handrails, ramps and equipment to aid daily living. Occasionally, due to the nature of the services acute time frame, complex housing projects may be undertaken including wet area shower installation and the modification of access into the home.

Recycling equipment saves money

Reusing air conditioning units from the demolished 41 St Asaph Street building to the new Rangiora Health Hub has saved about \$70,000.

The St Asaph Street building was refurbished in 2010, just before the first of the Canterbury earthquakes and most of the equipment it contained was still in very good condition.

The air conditioning units were assessed and found to still be current models, says Site Redevelopment Unit Project Manager, Construction, Brendon Groufsky.

"We still had to pay to have them serviced before they were installed at Rangiora but it still saved us around \$70,000," he says.

Some of the Building Management System components were also re-used at Rangiora. This saved about another \$7,000.

A further \$30-40,000 was saved by reusing other items from the St Asaph Street building such as ceiling tiles, roller blinds, carpet tiles, desk screens, trunking around the walls for data and power cables and light fittings on several other projects undertaken by the Site Redevelopment Unit.

"It took a bit of organising but all up we recycled around 80 per cent of the equipment from St Asaph Street. We were able to reuse just about everything and even taking into account the time and costs for removing it all we still saved money."

It went to various CDHB sites including Site Redevelopment's own new office at 230b Antigua Street.

Some of the equipment was craned off the roof of 41 St Asaph Street.



Above: Two large outdoor air conditioning units that produce the primary heating and cooling to be used by the indoor units.



Above: The ceiling cassette units that provide individual heating or cooling at the Rangiora Health Hub.

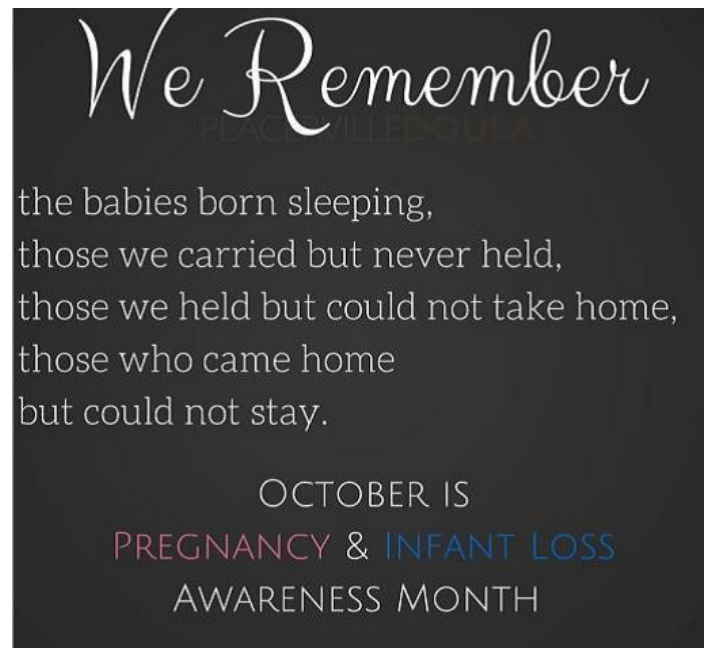
International Pregnancy & Infant Loss Day 15 October

This was our third Service of Remembrance held at Christchurch Women's Hospital to recognise pregnancy and infant loss. The service acknowledges parents, families and hospital staff.

The service was led by our Chaplin Hilary Barlow and supported by Maori Health worker Kathy Simmons. A gathering of prayer, song and silence involved staff from throughout Christchurch Women's Hospital and families who had experienced a death of their baby.

We were blessed with a calm cool morning as we stood alongside the nurse's chapel for the service and then enjoyed conversation with morning tea at the Great escape.

Di Leishman, Canterbury PMMRC Coordinator



National Social Workers Day 2015

About 80 Canterbury DHB Social Work leaders attended a full day workshop focused on working with vulnerable people. The event was held to coincide with National Social Workers Day.

Children's Director, in the new Children's Action Directorate, Peter Whitcombe and Shane Whitfield presented on the Children's Action Plan. The plan is the result of government Green and White Papers on Child Protection, and will change how child abuse and neglect is reported.

Under the plan concerns and reports about children and young persons will go to a hub, be triaged and a lead professional assigned where necessary. Further referrals to the Department of Child Youth and Family Services will take place where indicated, and linkages made to the appropriate organisation.

Community Geriatrician Anne Roche presented a series of scenarios involving older people, and asked social workers to consider what they would do if they were asked to be involved.

Melissa McCreanor and Donna Ellen, from Pegasus Health, were joined by Partnership Health Community Worker at Linwood Avenue Community Corner Trust, Maureen van Venrooy, to describe how they work together to provide good outcomes for families in need of support.

Ministry of Social Development Community Investment Advisors, James Prendergast and Geoff Giller, explained the decision-making process for allocating government funding to community groups.

Sebastian Morgan-Lynch and Octavia Palmer from the Office of the Privacy Commissioner, gave a light-hearted informative wrap-up on how to interpret and use privacy legislation.

Staff Wellbeing Programme: Final Wellbeing Workshop & Understanding Incontinence

Final Staff Wellbeing Workshop – places available 12 November at TPMH, 0930-1200

Due to the cancellation and rescheduling of a workshop we now have several places available at this workshop – the last for 2015

[Click here](#) to register or [click here](#) for more information

Understanding Incontinence

Due to the success of the presentation at Christchurch Campus in July we have arranged for the presentation to be delivered at other main hospital sites

The next presentation will be at Ashburton

» Wednesday 28 October

[Click here](#) for more information or [click here](#) to register

See www.continence.org.nz for more information on incontinence.

Be Active, Take Notice

Over 20 yoga, Zumba, Pilates and Mindfulness sessions running each week across main CDHB sites. [Click here](#) for more information

Free counselling available to all staff

Free and confidential counselling is available to all staff – for work or personal issues. [Click here](#) for more information

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


Andy Hearn


Staff Wellbeing Coordinator

Canterbury and West Coast DHB


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Understanding Incontinence



Following last year's highly successful presentation titled **Managing Menopause** we are running **Understanding Incontinence** presentations at main hospital sites during 2015/16. The first Understanding Incontinence presentation was held at CHCH Campus in July and was booked out. **Presenter: Julie Day**, physiotherapist CHCH Women's Hospital.

The session will cover:

- Types of incontinence
- Normal bladder function
- Role of the Pelvic Floor Muscles/Gadgets
- Bladder retraining and urgency strategies

Location	Date	Room	Time
Ashburton Hospital	Wed 28 October	Museum room	1200-1300
TPMH	Wed 25 November	5 th floor lecture theatre	1200-1300
Hillmorton	Wed 24 February	Lincoln lounge	1200-1300
Burwood	Wed 30 March	The Chapel	1200-1300

Registrations will be processed on a first come, first served basis. The presentation is part of the Staff Wellbeing Programme and is free of charge. [Click here to register.](#)

Contact Lee Tuki lee.tuki@cdhb.health.nz or 027 689 0285 if you have any questions

For information regarding incontinence visit <http://www.continence.org.nz/>

CDHB Submissions

Submissions are an important way for Canterbury District Health Board to have a say on policies that impact on health and wellbeing in our community.

Our staff regularly write submissions on all sorts of public documents and consultations, from the local to the national level.

In such a large organisation, it is important for us to ensure we keep track of the submissions that any of our divisions may be writing. That's why we have a policy that all Canterbury DHB submissions (from any division or department) are coordinated through Community and Public Health.

Check out the [submissions page](#) on the intranet to see the kinds of submissions we have completed in the past, and to see what we are working on now.

Any staff member can identify submission opportunities and send suggestions through to submissions@cdhb.health.nz.

Reflections on the Aegean Sea Nursing Sisters Tour 2015

A very emotional wreath laying ceremony was held at the Mikra British War Cemetery, Thessaloniki 2 September 2015.

Maree Sheard, past Director of Nursing, Royal New Zealand Nursing Corps lead the ceremony.

Nigel Harrison (great nephew of Margaret Rogers) laid a wreath on behalf of Canterbury District Health Board in remembrance of Margaret Rogers of Wainui and an unidentified nurse.

Their bodies were found in a damaged lifeboat that washed up on a beach at Zagera. They are presumed to have died at sea after the sinking of the troop ship 'Marquette' 23 October 1915. The unknown nurse is now known to be Helena Isdell.

Susan Nicholls, a survivor, wrote a letter to the Editor of Kai Tiaki identifying the nurses and describing their funerals.

Margaret Rogers trained at Christchurch Hospital and prior to leaving was a district nurse under Nurse Maude.

In a letter home to her family, she wrote:

"There is no romance about war; it spells suffering; hunger; filth. How thankful I am every day that I came to do what I could to help and relieve our brave boys."

Photos below:

Top right: Nurses Ann Fletcher, Wendy Maddocks, Nyle Maddocks-Hubbard, Elinor Wood, Maree Sheard in period costume, courtesy of the TV company that produced 'Anzac Girls'.

Top left: Under Mikra British Military Cemetery, Thessalonika: CDHB Wreath

Bottom left: Nigel Harrison standing beside his Great Aunt's gravestone.

Reflections of the Aegean Sea Nursing Sisters Tour 2015



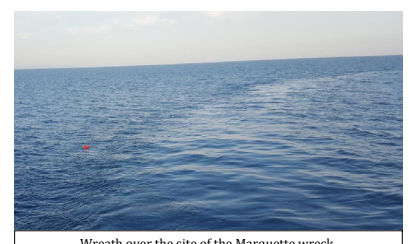
Mikra British Military Cemetery, Thessaloniki



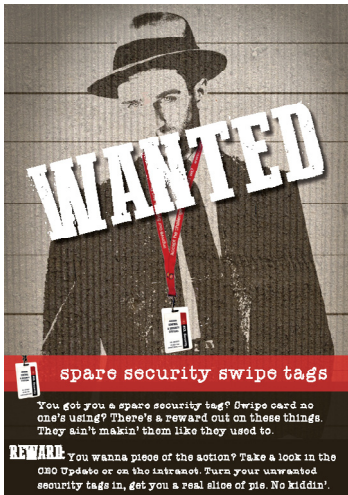
Lemnos Island, Greece 1915 – Photo AW Savage The state Library of New South Wales
Australian Nurses led by Matron Grace Wilson
2015 – Re-enactment wearing the uniforms from the ANZAC Girls TV series



Photos courtesy of
Wendy Maddocks, Nigel Harrison



Wreath over the site of the Marquette wreck.



Wanted: spare security swipe tags



If you've ever lost or forgotten your Canterbury DHB security swipe tag (the one that provides access into staff areas) you'll know how inconvenient it is.

But did you know?

» That each staff security access card costs around \$20

people). One draw is made each week.

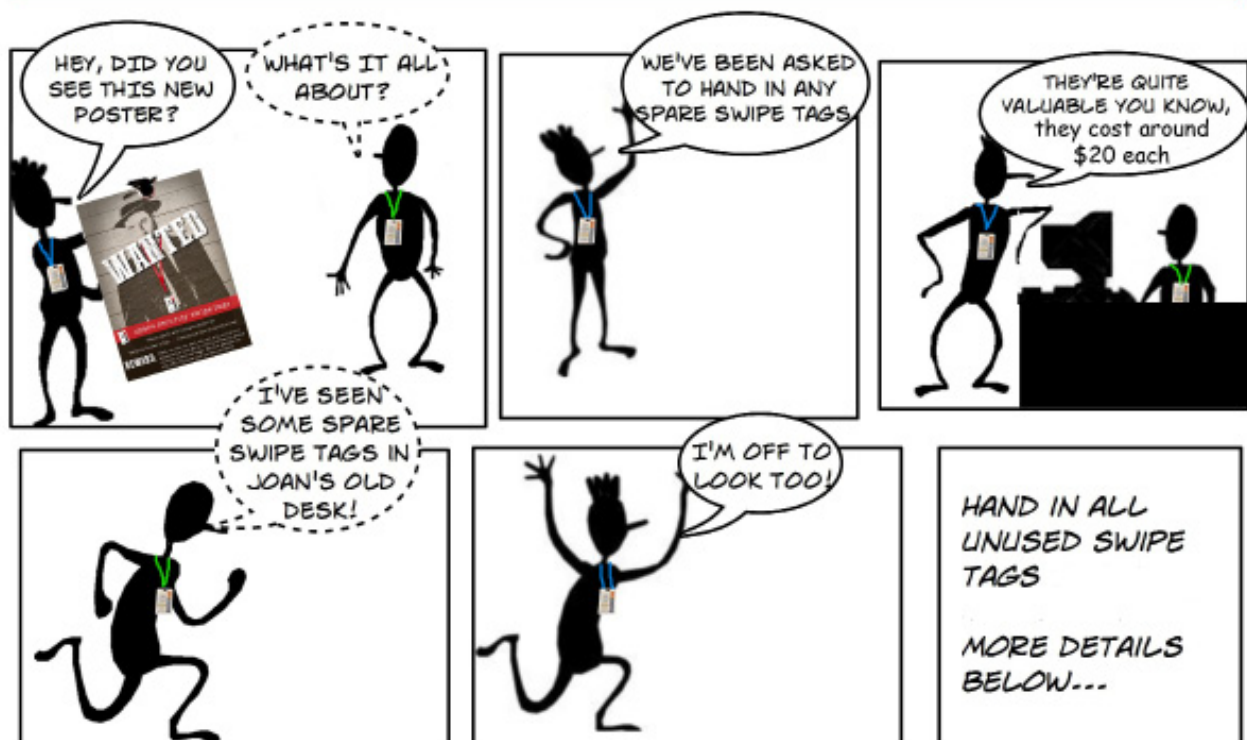
- » These can be recycled and re-used
- » There are thousands of un-used cards in staff drawers, work areas etc. This is a real security risk – and there are other people who need them.
- » Our current style of security card is no longer being made by our supplier. CDHB is moving to a new system and card but this won't be in operation until next year.
- » So we need your help to quickly gather back in any unused security swipe tags. As with anything that is "Wanted" there's a small reward for people doing the right thing – here's how it will work.
- » Anyone who hands in an unused security tag will go into the draw to win a morning tea shout for their team (up to 10

- » So have look in desk drawers and shelves to see if there are any unused security tags.
- » Write your name, team, location and phone number on a piece of paper and attach it to the security card.
- » If you work at Christchurch Campus, take the card down to the ID Badge Office. This is the only place for collection – not orderlies or reception areas.
- » If you work at a CDHB site elsewhere, call them on x 81164, give them the five digit security card number (so they can deactivate it) on the card and then pop the card and paper into the internal mail addressed to the ID Badge Office at Christchurch Hospital.
- » The draw for the first morning tea was made last Friday 23 October. Congratulations to Pauline Tootell, Service Manager at The Princess Margaret Hospital who has won the first morning tea shout. There are three still to be given away.

Get your spare cards in now! Any questions contact Vicky.heward@cdhb.health.nz.

Details also on the staff internet and daily email notices.

Wanted: spare security swipe tags



CHOOSE a career with us...

WHAT WILL YOU DO TOMORROW?

#PLANNING&FUNDING

Planning & Funding Opportunities

Every day our planning and funding team come to work and do things that they know will make a difference to the lives of people - solving problems, making things happen and knowing that at the end of it - there's a patient that's getting the right care.

We are looking for people from any employment background who have the passion to make a difference to other people's lives.

This is your chance to discover your health system as an endlessly complex, fascinating place to work, where each day you come to work and can contribute and do something that means somebody else's life will be better. Improve how we deliver our services, change the way things work and support the system in managing the change.

On a day-to-day basis what we do is ask how can we help? How can we help make it better? How can we help make things work for people?

We need creative, intelligent, problem solvers who can walk into a room and build relationships, so if that sounds like you

we would really like to have you come and work with us.

Check out what our fantastic team have to say about working in this fascinating part of our health system

www.whatdidyoudotoday.co.nz/

Speak to Sarah Carnoutsos, Recruitment Team Leader
+642 7472 7113 for more details on this rare and exciting opportunity.

Digital Health SMO Lead

Here in Canterbury we are progressing very well in the areas of clinical information systems. As we design our facilities and continue to build on our work in developing an electronic health record/digital hospital we need strong clinical engagement and leadership to ensure we have systems that support our new ways of working.

We are looking for expressions of interest from Senior Medical Officers to take on the 0.5 FTE Clinical Lead in HCS and VIA Innovations. Key attributes for your success include excellent communication skills, a keen interest in IT and a strong focus on quality.

- » Provide a support mechanism for staff to develop their innovation into implementation
- » Support and enhance the success of the New Zealand Health Innovation Hub (NZHIH)

For further information please call Liz Hill on 337 7954 or email liz.hill@cdhb.health.nz

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

Tuesday 27 October 2015, 12:30pm – 1:30pm

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

Title: "Cultural Psychiatry"

Presenter: Dr Sebastian Alvarez-Grandi

Vinod Kozhissery will also present. He is an experienced specialist in Cultural Mental Services.

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, 7th Floor, from 12 noon.

Psychiatrists can claim CME for attending these meetings.

The sessions will be broadcast to the following sites:

- » For TPMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at PMH.
- » 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... **Emily Arps, All Right? Campaign Health Promoter**

What does your job involve?

The All Right? Campaign works to support and improve Cantabrians' mental health and wellbeing as we recover and rebuild from the earthquakes. As a health promoter for this campaign, I find myself engaging in a range of activities including running wellbeing workshops, promoting All Right? Wellbeing messages at events (and sometimes being one of the All Righties!), in addition to developing and promoting a range of resources and campaigns, such as the All Right? App, AWA Trails, and #ThatTimeYouHelped.

Why did you choose to work in this field?

Growing up with a chronic respiratory condition, I have always been interested in health and health services. I chose to work in health promotion as it is closely aligned with my own values and passion for helping others, and personal experience in improving my health and wellbeing has made me all the more motivated to support others to lead healthier lives.

What do you like about it?

I like having the opportunity to try out new initiatives, to engage with our community, to challenge myself in new areas, and to work alongside like-minded people. I also enjoy the opportunity to learn new skills and knowledge in everything from health promotion and mental health, to communications and marketing. Working in mental health promotion, I also enjoy having the opportunity to apply my knowledge and interest in positive psychology.

What are the challenging bits?

Being relatively new to the field of health promotion, a key challenge would be all the knowledge and skills there are to learn - all of which I'm embracing!

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

I admire my entire team! Everyone brings so much to the work we do, and I have learned so much from each of them.

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?

Canterbury DHB's values are core to my role as a Health Promoter, right from using different approaches to ensure that our messaging reaches different populations, through to ensuring that the messages and practices we promote are research based.

The last book I read was...

I can't remember the last book I read as I've just finished my thesis on gratitude which had me reading a lot of research!

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

Laos, such a beautiful country where time passes so slowly, and the locals are so humble.

My ultimate Sunday would involve...

A big brunch with family, an afternoon mountain biking in the Port Hills, followed by a relaxing evening (that is, falling asleep in front of the TV!).

One food I really dislike is...

Pork.

My favourite music is...

Jack Johnson.



Emily Arps

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

Latest news from the regional South Island PICS Team



Included in this issue:

- » New SI PICS Super users at Wairau
- » Canterbury DHB SI PICS team road show - Akaroa, Ashburton, Dartfield, Elsmere, Oxford Hospital and Waikari.

Check out [what else has been happening](#) in the region.

In brief

University of Otago, Christchurch new two- year nursing Masters

**Considered a
career in nursing?
Have a degree
already?**

Find out about the
two-year Master of
Nursing Science course
we are planning for
2016, subject to Nursing
Council (NZ) approval.

**otago.ac.nz/
nursingmasters**



**Do you already have a degree?
Are you interested in Nursing?**

A joint initiative between the University of Canterbury and CPIT gives degree holders a chance to gain two qualifications in two years: a Master of Health Sciences Professional Practice (Nursing)* and a Bachelor of Nursing.

Info Night – Tuesday 3 November

5pm – 6pm
Wheki 102, UC Dovedale Campus
Christchurch
Email: healthsciences@canterbury.ac.nz

*Subject to NZCUP approval



Resilience in healthcare: Understanding and creating “safer care” as a daily practice

**Part 1: A patient perspective:
“Engaging the Citizen-Patient”
by Carolyn Canfield**

Tuesday 3rd November 2015

12:15 to 13:15

Rolleston Lecture Theatre
Ground Floor, Otago School of Medicine,
Christchurch Hospital Campus

**Part 2: A clinical perspective:
“Life on the edge of Chaos”
by Dr. Paul Lane**

Friday 6th November 2015

12:15 to 13:15

Oncology Lecture Theatre
Christchurch Hospital Campus



SEXUAL HEALTH SEMINAR

THURSDAY 5 NOVEMBER 2015
FROM 1.00PM – 4.30PM

Community and Public Health
310 Manchester Street, Christchurch

1.00pm - 2.00pm

WELCOME

Time to catch up with work we are currently involved in, to share information and new resources, and projects planned for this year.

2.00pm - 3.00pm

CONTACT TRACING FOR STIS

PRESENTER: SEXUAL HEALTH CLINICAL NURSE SPECIALIST,
CHRISTCHURCH SEXUAL HEALTH CENTRE

A presentation and opportunity for discussion on contact tracing for sexually transmitted infections.

3.00 - 3.30pm

AFTERNOON TEA

3.30 - 4.30pm

PREP – PRE-EXPOSURE PROPHYLAXIS FOR HIV

PRESENTER: DR EDWARD COUGHLIN, CLINICAL DIRECTOR,
CHRISTCHURCH SEXUAL HEALTH CENTRE

Edward will talk about PrEP, medication that can be taken to prevent HIV infection. It is used in the U.S. for people who are at high risk of becoming infected with HIV, but is not yet available in New Zealand. It also presents some challenges for prevention programmes.

4.30pm

CLOSING

There is no cost for these seminars and afternoon tea will be provided.

Please let me know if you will be attending.

Diane Shannon, Health Promoter
Community and Public Health
(a division of Canterbury District Health Board)

P 03 378 6755
E diane.shannon@cdhb.health.nz