



# ceo update

**Canterbury**

District Health Board

Te Poari Hauora o Waitaha



## Friday 6 June—How are you doing?

Our second Staff Wellbeing survey has just gone live! The survey is an excellent way to take the pulse of our staff and identify ways we can better support you in your roles.

We are aware that life in Canterbury is hard for many of you at the moment, as post earthquake stressors like insurance, housing and traffic problems coincide with major building and repair projects across the CDHB.

The 2012 survey provided valuable insights and from this we have been able to develop a more comprehensive Staff Wellbeing programme. By repeating the survey now, we will be able to get further guidance on what staff need in order to keep providing world class services. I encourage all of you to take the time to fill in the survey so we can get an accurate picture of how our staff are doing and how we can support you better.

Please take the time to do the survey - if we know how you are doing we can work to make things better.

A link the survey can be found on the CDHB intranet or alternatively you can [click here](#). You have until Friday 27 June to complete the survey.

## We're doing very well for our community

The strategy for Canterbury's health system is to reduce medical admissions to hospital and admissions to aged residential care by better caring for people in their own homes and the community. By reducing the in-flow of patients we free up hospital capacity for elective (planned) surgery. The figures below show what a remarkable difference you have made for our community.

The numbers tell the story, and it's a compelling one. More people are getting the surgery they need sooner.

**In 2006/7 Canterbury delivered 14,435 surgical elective procedures**, well below the level Canterbury should have been able to deliver to our population. This was the equivalent of 297 elective surgeries per 10,000 people living in Canterbury.

**Last year Canterbury delivered 21,441 an increase of 7006 elective procedures** compared to 2006/7 and more importantly this is the equivalent of 424 elective surgeries per 10,000 people living in Canterbury, a more than 40% increase.

Cumulatively since 2006/7 Canterbury has delivered 28,916 more elective operations than it would have if it had continued to deliver at the same level as 2006/7.

This has been able to be achieved because over the same time frame the number of people being acutely admitted for medical care has increased by only 4007 and the rate per 10,000 population has increased from 823 to 884, or by about 7% and the rate of acute surgical admissions by 4%. Against a background of an ageing population the increase for both would have been expected to be higher.

It's also important to note that Canterbury already had a low rate of acute medical admissions largely because of the effectiveness of the acute demand programme (ADMS) which has slowed the growth in acute medical admissions since 2000. Compared to national rates Canterbury's acute medical admission rate was already low and has dropped further.

Canterbury has also been effective at managing the number of days people spend in a hospital bed. This has further reduced as community based rehabilitation programmes such as CREST have enabled our health system to support people to recover in their own home.

We have been able to care for more people without using more hospital beds. This is quite a different pattern from what is being seen in other urban DHBs.

By providing better access to elective care and better access to community based services, we have been able to reduce the rate at which older people (over 65yrs) attend our ED and the proportion of people over 75 who end up in aged residential care.

Our vision of an integrated health system that is saving peoples' time and ensuring people receive the right care in the right place at the right time, from the right person is a reality.

The work you do to contribute to this achievement is important and making a difference to peoples lives, so thank you. As I've said before, there's still so much more we can do, and better ways of working together to be developed, but I would like to acknowledge this remarkable achievement. You should all feel proud of the part you play in our health system.

Take care, David Meates

### Burwood

**Concrete pour:** On Wednesday the first main slab of concrete was poured for the foundations of the Back of House building. Although it was a huge task, the contractors were finished by lunchtime, well ahead of their predicted timeframe.

The photo, taken during the pour, gives you an idea of the scale of the Back of House building, which when finished will include kitchens, cleaners' offices, bike stands, staff amenities (showers/WC), the supply and distribution centre, mail room and courier collection/drop off, clean and dirty loading bays, IT services, and plant rooms to support the rest of the new build.



### Christchurch

**Locker survey:** We have been running a Lockers Survey on the Staff Workspaces section of the Facilities Development intranet site. Thanks to all who have had their say so far – we have had over 500 responses. The survey is open until June 10.

**Developed design:** As mentioned by David Meates in his introduction piece last week, a significant project milestone has been reached with the sign-off of the preliminary designs for the Acute Services Building by the Hospitals Redevelopment Partnership Group.

Evan Davies, Chair of the Group, extended special thanks to everyone who's participated in the process so far.

Next week the Developed Design phase begins for Christchurch Hospital, during which the actual detail of what goes in each room is added into the preliminary designs. This will be an intense period for user groups, from June to October.

**C-space work continued:** The Haematology Group went to the Design Lab to test the C-space with the team and had some favourable consumer input. The C-space is the part of a ward that contains the clinical support spaces, areas such as medication rooms, and space for patients to interact with their families.

### General Fast Facts

**Staff input into facilities design:** The amount of work done by the user groups is impressive. There are 25 user groups, with around six participants in each = 150 CDHB staff from across the organisation regularly having an input into the designs at Burwood and Christchurch. Each group meets for around two hours per week = 300 hours of work from DHB staff per week, or around 1200 hours per month (not including ad hoc meetings). That's the equivalent of more than seven extra full-time designers on the projects.

**The digital hospital vision:** Find out more about our "Digital Hospital" vision at a drop-in session during Digital Hospital Week from 23 – 27 June.

There will be a short presentation on the Digital Hospital environment, comment by international experts on how this has been achieved in other hospitals, and then the opportunity to ask any questions you may have about how technology can improve our patient journey.

The introductory sessions are from 12:00 – 1:00pm at the following locations:

- Monday, 23 June: Padua Lecture Theatre, LGF Christchurch Hospital.
- Tuesday, 24 June: 5<sup>th</sup> Floor Lecture Theatre, Princess Margaret Hospital.
- Wednesday, 25 June: Hagley Outpatients Seminar Room, Christchurch Hospital.
- Thursday, 26 June: Marshlands Room, Burwood Hospital.

See the intranet for details of the workshop most convenient for you or text FUTURE to 8808 for meeting times and venues (texts cost 50c). If you can't make it, the presentation will be available to view on the intranet.



## Demolition at Ashburton

Demolition on the Ashburton Hospital outpatients and therapy services building began last week, with the crew making short work of the buildings.

The site is due to be cleared by June 6.

Demolition of the theatre block is on hold pending a review of the options associated with this work, however, detailed planning continues on the new Acute Admission/Theatre complex.

Planning is also underway for the upgrading and strengthening of ward blocks.



## Always Open for Better Care – managing Surgical Site Infections better

With the large number of Canterbury patients undergoing hip and knee arthroplasty surgery and the dynamics of working across multiple hospital sites, implementing a Surgical Site Infection Improvement Programme was always going to be an interesting challenge.

Backed by a very capable team, perioperative nurse manager at Christchurch Hospital, Marie Lory, agreed to take up the challenge of coordinating an SSII Programme. Marie and her team soon realised that the Programme was not just an infection control programme but rather a multi-team responsibility.

“Every service that comes into contact with the Programme has a representative on our local SSII Programme governance group, including quality, surgical, orthopaedics, anaesthesia, information technology and of course, infection control,” says Marie.

“Once we had the right people, we wanted to make sure it was set up in a way that provides the greatest benefits. This meant looking at the big picture and making sure the Programme could be sustained in the long term, particularly with cardiac surgery coming on board,” she explained.

“The idea of surveillance wasn’t new to us but the amount and type of data we needed to collect was. For it to be sustainable at Canterbury DHB we needed to work out how to collect the information electronically rather than manually.”

To do this, the SSII Programme team worked with decision support, Canterbury’s IT service, to identify what data was already being collected electronically and what else would need to be captured. They then looked at solutions to establish new auto feeds for missing data to reduce the need for collecting data manually.

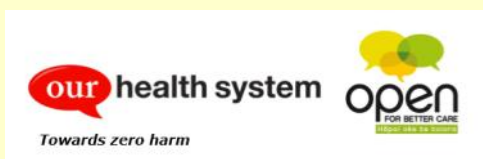
“The information from decision support has been invaluable. They can email us a list of patients that have had certain procedures so that we can track them, or a report of patients who have been readmitted to hospital,” says Marie.

“This narrows down the information required for follow up, so people collecting the data don’t have to hunt for it. The information is sent to them in a report so they can follow up more easily, which makes a huge difference,” she says.

On a day-to-day basis, Marie acts as a central coordination point for the Programme, keeping the wider Programme team and governance group well informed. Service level representatives on the governance group are responsible for communicating information about the SSII Programme back to their colleagues. “One benefit for us as a DHB is that we were able to confirm that we are already aligned to the best practice clinical interventions for reducing SSIs in hip and knee surgery, as recommended by the national SSII Programme. We have made a number of small improvements, but no major changes.

“It’s provided us with a level of quality assurance by enabling us to see that we are on track and providing patients with best practice care that reduces SSI risk,” says Marie.

“The concept of having a national programme here in New Zealand and being able to report SSI data is immensely worthwhile. Some of the simplest practice changes or improvements can really improve health outcomes for patients,” she adds.



*Right: Infection, prevention and control group. Note, Marie Lory absent when photo taken.*



# Bouquets

## **Burwood Hospital**

To everyone at Burwood, from the bottom of our hearts, words will never express how much we appreciate everything you all did to help with .... recovery. Thank you for getting her home to us.

Thank you for everything you all have done for.... We are so fortunate to be taking her home to start her life again!

## **North Inpatient Unit, Acute Inpatient Services**

To the admitting staff at North Inpatients, thank you for your care, especially the sandwiches on admission....

Thank you for your great care and understanding during my time with you. As a family we all appreciated the way you included us and listened to our concerns during this time. Your time and kind words will not be forgotten. I will always remember the strength you helped me to find during what was one of the hardest times in my life.

Thank you all very much for your wonderful care and compassion looking after our family member. I know she felt happy with you all. With our best wishes and gratitude.

To all staff, especially Luke, Dom, Annie, Clayton and Sandra, thank you from the bottom of our hearts for caring for our family member. We appreciate the effort all of you have contributed.

## **Christchurch Hospital ED and AMAU**

I recently spent three days in Christchurch Hospital. This letter is really to pass on my very grateful thanks for all the help I received....My overall impression from a patient perspective was of incredible efficiency and excellent support and I would be grateful if you could pass on my very grateful thanks to all concerned....The two staff members from St John Ambulance were excellent, supportive and very efficient. I was feeling much better even before I arrived at ED. In ED the staff again were very supportive and efficient and looked after myself and my wife extremely well. After being fully assessed there I was transferred to the Acute Medical Assessment Unit. I can have nothing but the highest praise for the care I received in AMAU. I would be grateful if you could share with them my grateful thanks. Whilst I would not wish to single out any individual (the standard was universally high) I would like to specially thank Dr Jardine, the consultant in charge of my care....[I had] a very professional, compassionate and caring team who cared for me. I was able to have the utmost confidence in the care I received.



## **Canterbury Grand Round—13 June 2014, 12.15-1.15pm (lunch from 11.50am)**

**Venue: (Rolleston Lecture Theatre)**

**Speaker: Anthony Hill, Health and Disability Commissioner**

**Title: A view from the HDC**

Anthony Hill was appointed Health and Disability Commissioner in July 2010. Since that time, Mr Hill has clearly articulated to the health and disability sector his vision for a system that is centred on the consumer. A consumer-centred system includes the concepts of seamless services, engagement, transparency, and culture. Mr Hill will discuss what it means to provide consumer-centred services, and the role of complaints in informing learning and quality improvement, within the context of the provision of hospital services.

**Chair:** Rick Acland, Director of Medical Services, Burwood Hospital

Video Conference set up in:

- Burwood Meeting Room
- Meeting Room, Level 1 PMH
- Wakanui Room, Ashburton
- Telemedicine Room, Admin. Building 6 – Hillmorton

**For more information contact:** [ruth.spearing@cdhb.health.nz](mailto:ruth.spearing@cdhb.health.nz)

## Diabetes device with a twist

Patient innovator, Peter McDonald, has developed a prototype 'low tech', convenient device to help people on insulin injections manage their diabetes.

The "Sweet Levels" calculator helps people on variable (flexible) doses of insulin to simply and accurately calculate the amount of insulin needed to cover meals. The calculator is designed to fit over a standard glucose test strip 'pottle'. Users twist the calculator to work out the maths for their next insulin dose.

How much insulin a person with diabetes needs depends on their blood sugar level and what they are about to eat. It can be quite a complex calculation, combining two equations known as insulin: carbohydrate ratio and insulin: sensitivity factor.

Peter, who was diagnosed with type 1 diabetes at the age of 17, says he first came up with the idea in 2009 when he found that working from an A4 size hand out or "in my head on the fly" was not very precise.

"People can struggle with the maths. I felt I could do something better and in a way that was not paper based."

While phone apps that do the maths are available most people did not use them regularly for various reasons, he says.

Peter has had the first (prototype) calculator device 3-D printed. Local patients have reviewed it and their ideas have been helpful for the development of the next prototype.

The Nelson inventor is being part-'sponsored' by CDHB. In exchange for the Christchurch Diabetes Centre's help with patient feedback on his early prototype device, Peter, who is a graphic designer, has been helping with some labelling/educational materials for patients with diabetes.

Peter has received support from Via Innovation, the business unit that has been established to accelerate innovation within the Canterbury Health System and connect with the New Zealand Health Innovation Hub of which CDHB is a foundation partner.

He has also had free consultation sessions with Sarah Cross of EverEdge IP Ltd, Australasia's largest technology and intellectual property commercialisation firm which provides specialist advice, resources and networks to help people assess, develop and deploy breakthrough technologies and ideas into major markets.

Prior to getting in touch with CDHB, Peter had difficulty accessing the right people to give him advice and ideas around future development."

"Maybe because I was seen as just a diabetic with an idea and no medical credibility," he says.

CDHB on the other hand saw the potential and was able to put him in touch with international and national contacts.

Clinical Director, Health Innovation, CDHB, and Physician, Christchurch Diabetes Centre, Helen Lunt, has been acting as a liaison between Peter and the Diabetes Centre. She says his invention is a novel concept that has the potential to be very popular.



Above: Peter McDonald with his "Sweet Levels" calculator.



CDHB's Diabetes Centre has facilitated early product development and partly as a 'thank you' for this, Peter has extended his ideas to include a labelling system that will help the local nurses and dietitians with education for patients on insulin.

Peter has been working with DHB's Medical Illustration department to make sure the graphics for the labelling are of a very high standard. He has also been working with a patent lawyer and is looking for investment. He has filed a patent in the U.S and U.K.

If anyone has an innovation idea they think may have marketable potential please contact [helen.lunt@cdhb.health.nz](mailto:helen.lunt@cdhb.health.nz)



Open for better care E-update - Issue 10 [8 May–1 June 2014]

**In this issue:**

[Clinical leads congratulate Open on its first anniversary](#)

[Surgical safety checklist video released](#)

[Collecting patient stories to support improvement activities in theatre](#)

[Case study template](#)

[Checklists, briefings and debriefings: an evidence summary](#)

[Invite another surgical team to watch your team complete a checklist](#)

[Complete a survey of checklist behaviours](#)

[To see the full newsletter click here.](#)

## It's all go for a Dry July

Now that we're into June, our Dry July is not far away and you can sign up now!

You can get directly to the sign up link from here <https://nz.dryjuly.com/sign-up/>.

If you go via the home page of [www.dryjuly.co.nz](http://www.dryjuly.co.nz) make sure you're on the New Zealand site by scrolling to the bottom of the page and checking that New Zealand is chosen as your country.

In addition to the official Dry July site we've created a webpage for CDHB [www.cdhb.health.nz/Dryjuly](http://www.cdhb.health.nz/Dryjuly). You'll find much more detailed information here about our bid to raise funds for the Canterbury Regional Cancer and Haematology Centre. And from 1 July there will be a new daily message for DJs and their supporters.

Don't forget about our launch event.

If you're still wondering about whether you should get involved, read Jim's story on the following page. Jim has come through his cancer treatment and is (along with his wife) lending his support to Dry July. Get all inspired and sign up now!



**You're invited**  
**Dry July Launch**

**Monday 30 June 2014**

**4.30pm-6pm**

**Annex off the Great Escape Café**

**Christchurch Hospital**

Come along to help us kick off our Dry July Mocktails, food and entertainment provided!

Please RSVP [Vicky.heward@cdhb.health.nz](mailto:Vicky.heward@cdhb.health.nz) by Monday 23 June.

**DRY JULY**  
Clear your head, make a difference



## Jim the builder helping to fix it



Jim Sutherland reckons Christchurch has been pretty good to him.

It has given him an opportunity to be involved in the post-earthquake rebuild of the city and helped in his recovery from cancer.

In 2010 licenced builder Jim was working on his own house in New Plymouth when a fall from scaffolding led to a hospital visit and scan. The full body scan revealed abnormalities and the diagnosis was Lymphoma.

"I thought I'd had it, as you do when you hear the word cancer," says Jim. He had his first chemotherapy treatment at Taranaki Base Hospital in New Plymouth.

After the September 2010 Darfield earthquake Jim and his wife Judy packed up and moved to Christchurch. They arrived on 14 February 2011. Little did they know that the February earthquake would provide more opportunities to get involved than they could have imagined. They were grateful they could help.

Jim started work with Fletcher EQR and later joined Stream as a Project Manager. His second round of Chemotherapy was completed at Christchurch Hospital.

"I coped very well. I used to take my computer into Ward 26 and worked from there while the Chemotherapy was being put in through a PIC line. People receiving my work emails had no idea I was sitting in a hospital ward. And my hair did fall out this time," says Jim.

The second round of chemo was followed by an operation to drain fluid from one of Jim's lungs and a subsequent procedure to prevent the fluid build-up happening again. "I went from one hospital department to another and felt so fortunate to receive such genuine care each time.

"Being able to connect with the outside world via wireless and escape by watching movies helped a lot," says Jim.

Then he had a stem cell transplant to replace stem cells which had been harvested three months previously.

"I spent several days in the day ward before going into isolation for ten days. My immune system had been destroyed and then had to be built back up again. I usually read a lot of books but I was unable to concentrate during this time. I watched a bit of telly and played cards with Judy. It was an odd feeling I had for a few days – I am a very positive, jovial person but I couldn't get that spark to light. Funnily enough the one thing that helped me get my 'get up and go' back, was watching the Die Hard movie!" says Jim.

Jim's feeling much better now and just has regular check-ups to make sure he remains well. He remembers in particular how wonderful the staff were during his treatment.

"It was the simple things. When I couldn't face food the nurses would bring me a chilled milkshake. That was just heavenly. And being in such a comfortable room with a view to the park outside," says Jim.

Jim and Judy have both signed up to take part in Dry July. "Having been there myself, I am keen to do anything to help improve the comfort level of people being treated for cancer. I like a glass of wine or a bottle of cold beer but think I can give it up for a month to help others," says Jim.

Join Jim and Judy in supporting the service - sign up now through [the official website](#).



**DRY JULY**  
Clear your head, make a difference®  
[www.dryjuly.co.nz](http://www.dryjuly.co.nz)



Applications are now open for the 2014 Administrative Professional of the Year Award. This is a fantastic opportunity to have your administrator(s) recognised for their professionalism and experience. If you have a stand-out administrator in your team please encourage them to consider applying for this award.

Entries for the award close 11 June 2014 and must be accompanied by a \$60 non-refundable application fee. Pauline Clark General Manager - Medical-Surgical and Women's and Children's Health has agreed to sponsor up to three applications. So if you have someone in your team who would like to take advantage of this funding to cover their application fee, please ensure their completed application is with [Kay Strang](#) by **5pm Monday 9 June**.

The award which is sponsored by the AAPNZ (Association of Administrative Professionals of New Zealand) and Drake NZ will be announced at the AAPNZ Conference in Hamilton from 8-10 August.

[To apply click here](#)

[To download the above poster click here.](#)

[For more information click here.](#)



### Staff Wellbeing Programme: Managers wellbeing workshops – registrations now open for another 10 workshops

#### Wellbeing Workshops for managers/supervisors

Registrations are now open for another 10 of these very popular workshops! The first two workshops are: Ashburton 19 June; Hillmorton 2 July...

Are you a manager/supervisor with responsibility for other staff? Do you want to know more about how you can manage and promote your own wellbeing?

For more information on what the workshop covers and details about how to register, visit the Staff Wellbeing Programme intranet page <http://cdhbintranet/corporate/HealthandSafety/SitePages/Staff%20Wellbeing.aspx>

**Weight Watchers @ Work** – final call for registrations for TPMH and CHCH Campus. Only a few more registrations needed to ensure these groups run. Café drop-in information sessions are planned for both sites in coming days. Check global emails for days and times

Hillmorton and Burwood groups started last week and this week respectively – late registrations still possible. More information available on the Staff Wellbeing Programme intranet page

**Zumba, Yoga, Pilates** – check out updated information on Staff Wellbeing Programme intranet page

<http://cdhbintranet/corporate/HealthandSafety/SitePages/Staff%20Wellbeing.aspx>

Check out this page for information on yoga, Zumba, Pilates, mindfulness, 30 minute walk 'n workout groups, Earthquake Support Coordinators, Finance/Retirement seminars, Employee Assistance Programme (EAP - free counselling for staff), and more...

**Something for You - employee benefits** – new intranet page containing up-to-date information on discounted products and services for CDHB Staff <http://cdhbintranet/corporate/EmployeeBenefits/SitePages/Home.aspx>

**Andy Hearn**

Staff Wellbeing Coordinator

Canterbury and West Coast DHB

Phone: 03 337 7394 | Ext: 66394 | Mobile: 027 290 0937

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

## Wellbeing workshops

“  
The greatest  
wealth is health  
-Virgil”

### For CDHB Managers/Supervisors

To support your wellbeing, the CDHB Staff Wellbeing Programme and MHERC are running a series of two-hour wellbeing workshops for managers/supervisors.

The CDHB acknowledges the crucial role you, as a manager/supervisor, play in supporting your staff and facilitating the delivery of high quality care to the Canterbury community. In the current Christchurch environment it is more important than ever that you take the time to focus on your own wellbeing.

Two hours to focus on YOUR wellbeing!

We are running a number of workshops in 2014 to allow you to put your wellbeing first. Evidence suggests that by doing this, those around you – your family and friends, your colleagues and patients will also benefit.

#### Workshop Overview:

- The importance of wellbeing; psychological and emotional effects
- Learn about stress responses and how to cope with stressful environments
- Understand the science and practice of applications of self-care
- Appreciate the progress of recovery for communities and individuals
- Gain skills and take ownership of tools for increasing your own and others' wellbeing
- Improve your health and wellbeing: 5 Ways to Wellbeing, All Right?, Staff Wellbeing Action Group
- Enhance positive relationships and social connections

#### Workshop Details:

- All workshops run for 2 hours and conclude with a further 30 minutes for refreshments and informal conversation
- For dates and to register for a workshop – [click here](#)

Facilitated by Alison Ogier-Price MSc Psych, B.Comm, BA Hons, C.AT, MNZAPP

[Click here to register](#)



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

 **MHERC**  
Mental Health Education & Resource Centre

For more information contact:

Lee Tuki  
Lee.Tuki@cdhb.health.nz  
027 689 0285

Andy Hearn  
Andy.Hearn@cdhb.health.nz  
027 290 0837



## WERO—Smoking Cessation Challenge

WERO is a smoking cessation competition that gives whānau the opportunity to quit smoking as part of a team. There are also fantastic prizes they can nominate for local charities and community organisations.

In Aotearoa, Māori have a higher rate of smoking (41%) than the general population (18%). While our people currently use existing services to help them quit, we still have a big challenge in addressing smoking rates and their effects on whānau.

Michelle Manuel (Iwi), based at Te Puawaitanga ki Ōtautahi Trust is the Christchurch coordinator for the WERO kaupapa.

Michelle says that, “Māori will often give up for everyone else except themselves, there are some who quit because they are fundraising for their local kōhanga and thought they would give it a go. WERO is unique as it has been created by Māori for Māori. However the competition is not exclusive with strong representation from Pacific communities and New Zealanders from all walks of life that enjoy working as a team”

WERO was developed by researchers at the University of Auckland, and is funded by the Ministry of Health Pathway to Smokefree New Zealand 2025 Innovation Fund.

Past experience with a recent pilot programme in 2012 shows that teams most likely to succeed are those who meet regularly to support each other.

The coordinator’s role involves supporting our Christchurch teams, providing information and support during the competition, and assisting whānau with links to team coaches and services that can support our whānau towards healthier smokefree lives.

Michelle says people can feel quite isolated when they try to quit by themselves. “This competition helps to break down that isolation. We love to fund raise especially for a kaupapa and we like working together and competing. Shaking off anything that is addictive is a real challenge and it can take many attempts before finally quitting... the main thing is to give it a go”

### How does it work?

- 10 smokers (16 and over) form a team and register on the website [www.wero.me](http://www.wero.me)
- Each team nominates a kaihautū (coach) and a kaiwhakatere (support worker) to provide motivation, support and nicotine resources to help you stay quit.
- Teams meet regularly to support one another. There are also weekly updates on the team web page and messages of support from coaches and teams all over Aotearoa, supporting one another to stay on the waka.
- Team members take a test at the beginning and end of the 3 month challenge to confirm they are no longer smoking.
- The team with the most members not smoking at the end of the competition wins!

### Prizes

1<sup>st</sup> prize \$5000

\$500: Team in front at four weeks

\$500: Team in front at eight weeks

\$500: Team that used the website the most

Pregnant mum’s prize category

Spot prizes awarded throughout the competition

### Upcoming competitions:

Matariki (Māori New Year) Challenge: 1 June 2014 - 31 August 2014

1 September 2014 - 30 November 2014

### How to get involved?

If you, your whānau, or the organisation you work for would like to take part you can contact Michelle Manuel at Te Puawaitanga ki Ōtautahi Trust [michelle.manuel@omwwl.maori.nz](mailto:michelle.manuel@omwwl.maori.nz) or check out:

[www.wero.me](http://www.wero.me)

[www.twitter.com/werochallenge](http://www.twitter.com/werochallenge)

### Other services:

Aukati Kaipaipa (Māori & their whānau)

Community & Public Health

Ōtautahi 0800 4 257 00

Hakatere 03 307 6903

Timaru 03 687 2606

Māwhera 03 768 1160

[www.aukati.org.nz](http://www.aukati.org.nz)

Quitline 0800 778 778—[www.quit.org.nz](http://www.quit.org.nz)



Above: Michelle Manuel, Christchurch coordinator for the WERO kaupapa.

South Island Patient Information Care System

# Show & Tell



## The South Island Patient Information Care System is coming to Canterbury DHB

The South Island Patient Information Care System, in partnership with Orion Health, is running a series of demonstration workshops throughout the region's five DHBs.

We would like to show you how the South Island Patient Information Care System will become our regional, single portal solution for the day to day management and administration of the patient journey, and how it will transform the way healthcare is delivered for the future. Please join us at...

### Canterbury District Health Board: four sessions

**At Ashburton on Thursday, 12 June**  
Session time: 10:30am-12:00pm  
In Museum Meeting Room,  
15 Elizabeth Street

**At Burwood Hospital on Tuesday, 17 June**  
Session time: 09:30-11:00am  
In Marshlands Room

**At Christchurch Hospital on Tuesday, 17 June**  
Session time: 2:00-3:30pm  
In Oncology Lecture Theatre

**At PMH on Tuesday, 24 June**  
Session time: 12:00-1:30pm  
In Hakatere / Rakaia Rooms, PMH

In agreeing a collaborative regional direction, the South Island DHBs have committed to a *best for people, best for system* alliance framework to negotiate a way into the future.



West Coast District Health Board  
*Te Pouni Hauaurua a Rotorua e Tei Poutini*

Canterbury District Health Board  
*Te Pouni Hauaurua a Wairarapa*



Nelson Marlborough District Health Board



South Canterbury District Health Board





The Canterbury Medical Research Foundation  
proudly presents  
*The 2014 Athol Mann Lecture*

*“The Future of Health Depends on  
Delaying the Ageing Process”*

Professor David Le Couteur

David Le Couteur is Professor of Geriatric Medicine at the University of Sydney, Director of the Centre for Education and Research on Ageing (CERA), Director of the Biogerontology Laboratory of the ANZAC Medical Research Institute and Senior Staff Specialist Physician in Geriatric Medicine at the Concord RG Hospital in Sydney.

His research is translational gerontology, spanning from biogerontology (nutrition, liver pharmacology and physiology, liver endothelium and ageing); clinical research (geriatric pharmacology and the application of evidence based medicine to older people) and epidemiology (chief investigator and pharmacoepidemiologist on the Concord Health and Ageing Male Project CHAMP).

Please join us at 5.30pm at the Rolleston Theatre,  
Christchurch Hospital  
24th July 2014

*Complementary refreshments will be served*



## “Stool” cake a hit

It is a well-known fact that those of us working in palliative care are obsessed with bowel management, says the Oncology Palliative Care team.

This is because our patients are impacted by constipation and unfortunately it can be poorly assessed and treated, adding to their pain and distress.

The Bristol Stool chart has been adopted for use throughout CDHB as a tool to educate staff and patients alike, on the importance of good bowel management. The chart is a medical aid designed to classify the form of human faeces into seven categories ranging from those that indicate constipation to diarrhoea.

Advanced Trainee in Oncology, Clare Pate, has been with the Oncology Palliative Care team for six months and has clearly heard this message loud and clear.

She is now moving to Oncology and her parting gift to the team was this wonderful Bristol Stool Cake! In case you are wondering, it tasted magnificent!



## Department of Psychological Medicine, University of Otago, Christchurch & Specialist Mental Health Service, CDHB Clinical Meeting

Tuesday 10 June 2014, 12:30pm –1:30pm

Venue: Beaven Lecture Theatre, 7<sup>th</sup> Floor, University of Otago, Christchurch School of Medicine Building

### “A Tale of Two Halves”

Rehab- a clinical case presentation -Dr Tegwyn Williams  
Assertive Outreach - Dr Rob Boughton

Chaired by: Dr David Stone

### Special notes:

- A light lunch will be served at the School of Medicine venue from 12noon.
- Psychiatrists can claim CME for attending these meetings.
- The sessions will be broadcast to the following sites:  
For PMH attendees the venue is the Child, Adolescent & Family Inpatient Unit, Ground Floor. Access is from the main reception at 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.



135246 - Cardiology Research Coordinator  
135149 - Project Managers – Site Redevelopment  
134204 - Registered Nurse - Darfield Hospital  
134112 - Administrative Co-ordinator  
135467 - Laboratory Assistant

[Click here to see more opportunities on the careers website](#)



## Latest Te Mana Ora now online

Te Mana Ora is produced by Community and Public Health and aims to share kōrero on the mahi happening across our health system and in our Māori communities.

This issue contains Wāhine Ora stories, korero on the support that our whānau are receiving to help them quit smoking, and much much more.

[Read it here](#)



## One minute with...Tere Scott, Registered Nurse, Hillmorton Hospital

### What does your job involve?

My job in the Assessment, Treatment and Rehabilitation (A,T&R) unit at Hillmorton Hospital is to provide care through assessments, treatments and rehabilitation for people with an Intellectual Disability with challenging behaviours.

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

Initially, I chose to work in this field for personal reasons. Then I became intrigued and fascinated by the different syndromes of some of the patients I worked with at the Templeton Hospital and Training School where I trained and worked. I used to look at some of these patients and wonder what made them behave in the manner that they did. I wanted to know what made them "tick". Was it genetic thing, environmental, behavioural or whatever? I could talk endlessly about working in this field. I am passionate about it.

### What do you love about it?

I love the challenge involved in this work. Everything I have learnt in this field of work in my studies and from working in other hospitals that provide the same service, any reading I have done on the subject, and my own life experiences, have all been pushed to the limits at times. Sometimes, you have to look outside the conventional and go with your "gut instinct" for an answer. A good amount of empathy and patience also goes a long way.

### What are the challenging bits?

Caring for a person born with an Intellectual Disability (ID) can be a challenge, depending on the level of disability and how much input the person receives from the time of diagnosis until they come into our service. This will have an impact on the outcome of their treatment and their rehabilitation back into the community. An example of this was trying to formulate a treatment plan that was transportable into the community for a person who not only had an ID, but was also deaf and mute. That was a challenge for our clinical team and the providers at his house but was a great success.

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

Many of my colleagues have brought different strengths and experiences to bear in a positive manner on me. But if there was one person who stood out from the rest, then that would have to be my former Clinical Nurse Manager, Helen Paine. She died in 2012. I believe she had an impact on many staff due to her down to earth nature. She was a hands on manager, who never asked anyone to do anything she wouldn't do (and often did).

She encouraged her staff, especially those who trained in psychopaedic nursing to use the skills they learnt. One of her favourite sayings was "I was a nurse before I became a manager. That says it all in a nut shell.

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

The last book I read was called "The Reunion" by Laura Antoniou, one in a series of 6.

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

I would be in Izmir, Turkey where I lived for a time many years ago. There is so much there I still haven't seen.

### My ultimate Sunday would involve...

My ultimate Sunday would be on One Foot Island, a little Islet or "motu" in Aitutaki with loved ones around me, fresh tropical fruits, bar-b-q'd sea food, raw fish and whatever else takes my fancy.

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

I do not, repeat do not like tripe!!!!

### My favourite music is...

My favourite music is by Claude Challe. His music is often on the Bhudda Bar label.

If you would like to take part in this column or would like to nominate someone please contact

[Naomi.Gilling@cdhb.health.nz](mailto:Naomi.Gilling@cdhb.health.nz)



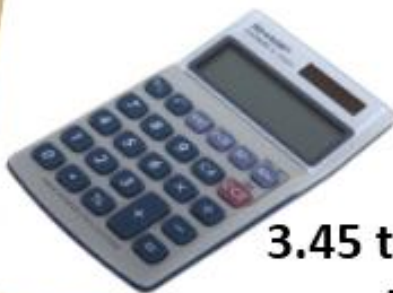
# Health Care Team Challenge (HCTC) Come and support us.....



Our patients need multi-professional teams that know how to work together and watch out for the patient and each other.



Four interprofessional teams will compete to show us how



3.45 to 5.30 Wednesday 18<sup>th</sup> June  
Beaven Lecture Theatre  
(7<sup>th</sup> floor Medical School)



# Need help with Earthquake Issues?



## Free Earthquake Support Coordination Service

Earthquake Support Coordinators are available to help people and their families directly affected by the Canterbury earthquakes.

Earthquake Support Coordinators can:

- Support you to work out what needs to be done for you, your family and/or a family member and make a plan
- Provide relevant information
- Support connection with relevant services
- Coordinate meetings between you and the experts.

They can meet with you anywhere you choose - your home, workplace or ...

They can connect you to services that provide (but are not limited to):

- Legal, EQC and insurance help
- Repairs
- Accommodation assistance
- Counselling support and social services
- Financial assistance or information
- Health services
- Winter heating advice
- School or childcare support
- Translation services
- Environmental and infrastructure information.

The support provided is based on your individual circumstances.

**Free Service  
for CDHB Staff  
and their  
Families.**

For advice or to request an Earthquake Support Coordinator,

**Call: (03) 371 5598**

After hours assistance available

or  
Email: [earthquake.support@richmond.org.nz](mailto:earthquake.support@richmond.org.nz)

## Make a difference through the study of Public Health

Are you considering taking your degree to higher places?

- build on your undergraduate degree in any discipline
- develop your knowledge and skills in a related area
- enhance your career prospects

The University of Otago offers postgraduate study in Public Health at their Christchurch campus. Enquiries are welcome and applications for enrolment in second semester papers are now open.



University of Otago, Christchurch

POSTGRADUATE



UNIVERSITY OF OTAGO  
Te Whare Wānanga o Ōtago  
NEW ZEALAND

YOUR PLACE IN THE WORLD

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- Research Methods

### Master of Health Sciences

with endorsed option in:

- Health Management

### Postgraduate Diploma in Health Management

For further information, please contact:

Rebekah Higgs, Programme Administrator  
Department of Population Health  
University of Otago, Christchurch  
PO Box 4345, Christchurch  
Tel: 03 364 3602  
Email: [rebekah.higgs@otago.ac.nz](mailto:rebekah.higgs@otago.ac.nz)



[www.otago.ac.nz/christchurch](http://www.otago.ac.nz/christchurch)



...ARTIST DOCTORS PRESENTS...



*Last night of the*



# PROMS

25 YEAR ANNIVERSARY

WE ARE CALLING FOR PERFORMERS  
TO TAKE PART IN THIS YEAR'S  
VARIETY CONCERT

4TH OCTOBER 2014

Singers, dancers, comedians, soloists, groups, instrumentalists  
- Get your act together!

To find out more contact Ros McCarthy on 364 1104,  
mobile 027 353 2639 or email us at [enquiries@artistdoctors.org.nz](mailto:enquiries@artistdoctors.org.nz)

[WWW.ARTISTDOCTORS.ORG.NZ](http://WWW.ARTISTDOCTORS.ORG.NZ)



Multiple Sclerosis  
& Parkinson's  
Society of Canterbury

**MS+PD**



## Parkinson's Disease:

"See the person, not just the disease"

Tuesday  
**5 August**  
09:00 - 16:00  
Lunch Provided

### Nurses & Allied Health Education Day

- Learn practical tips to improve your practice
- Support people with Parkinson's on their journey
- CPD Certificate provided on completion

Our Guest Speakers include

**Professor Tim Anderson**

Neurologist

**Melanie Gamble**

Pharmacist

**Kirstie Koller**

Speech Language Therapist

**Tara Martin**

Physiotherapist

**Helen Skene**

Parkinson's Research Nurse

**Canterbury  
Horticultural Society**

South Hagley Park  
Hagley Avenue

Cost: \$100 (Early Bird Rate: \$80)

For information and to register your  
interest, check our website or contact

**PD Resource Nurse Bronnie**

(03) 366-2857 ext 4

b.alexander@ms-pd.org.nz

**[www.ms-pd.org.nz](http://www.ms-pd.org.nz)**





## SEXUAL HEALTH SEMINAR

THURSDAY 19 JUNE 2014  
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

### ALCOHOL, SEX AND THE DEVELOPING BRAIN

PRESENTER: DR SUE BAGSHAW

Dr Sue Bagshaw has worked in the area of youth health for many years. She is Senior of Paediatrics, University of Otago and Director of the Collaborative for Research and Training in Youth Health and Development Trust. Sue is also Chairperson of the Korowai Youth Well-Being Trust which runs the 298 Youth Health Service and she works there as Senior Medical Officer. This is a great opportunity to learn from Sue's wealth of knowledge and experience.

3.00 - 3.30pm

### AFTERNOON TEA

3.30 - 4.30pm

### QUESTIONS AND DISCUSSION CONTINUE

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](mailto:diane.shannon@cdhb.health.nz)