



Acting Chief Executive
Peter Bramley

Thank you for the warm welcome

I'm the first to admit that it was with a degree of trepidation that I agreed to take up the interim Acting Chief Executive Officer role following David Meates' departure last week.

I know how integral David has been to the growth and achievements of the Canterbury Health System over the past 12 years and I know that there are massive boots to fill for his successor.

I will be in the Acting Chief Executive role until Andrew Brant takes over in mid-October. Andrew will be Acting Chief Executive until the end of the year, by which time the Board should have recruited a new permanent CEO.

I had the opportunity to spend some time with David over the past week and meet with many of you. This whistle-stop orientation and handover has helped me get the lay of the land before picking up the reins this week. I was honoured to attend his farewell last Thursday and can report he had a great send off.

My usual job is CEO of Nelson Marlborough Health, so I'm familiar with the Canterbury Health System, but there's nothing like 'total immersion' to appreciate the complexity of an integrated system with multiple stakeholders and challenges on many fronts. And that's before I've been across to the West



The first landing at the Christchurch Hospital Hagley helipad took place last week – read all about it on [page 5](#)

Coast, where there's another set of unique challenges to put my mind to.

I am keen to do all I can to support the Canterbury Health System continue to deliver fantastic care for its community. In particular, I want to assist those who have stepped into leadership roles. You have so much to be proud of in the way you are

providing and supporting care and we don't want to see this eroded at this time.

Suffice to say there's a lot on the drawing board and I will be working to keep things moving following David's departure. This week I would like to update you on a few things...

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Executive team – acting roles and recruitment

Next Friday 18 September is sadly the last day of work for Mary Gordon, Executive Director of Nursing. Mary also has responsibility for facilities projects. A farewell event is planned for Mary, but due to COVID-19 Alert Level 2 restrictions, numbers are limited. The event will be recorded and a link will be circulated following Mary's farewell.

Stella Ward, Chief Digital Officer, leaves on Friday 30 October and I'll provide more on arrangements and cover closer to the time.

Sue Nightingale, Chief Medical Officer, leaves on Friday 18 December.

I am working on the recruitment process for all seven (out of a total of 11) executive roles.

The Board is responsible for appointing the Chief Executive and that process is also underway.

We expect that there will be interest from New Zealand and overseas for these roles.

The Programme Management Office – Accelerating our Future

A small Programme Management Office (PMO), headed by Dan Coward, is gearing up to support us all on delivering the programme of initiatives that sit under 'Accelerating our Future'.

This is the programme of work based on our most recent annual plan, looking into how the DHB could operate more sustainability for the long term and achieve target savings approved by the Board of \$56.9m this financial year.

This work is about doing the right thing, right now, to operate sustainably and deliver for the Canterbury

community. This plan has been structured to achieve targeted savings with the least possible impact on patient care in one year, with a broader three-year plan to break even.

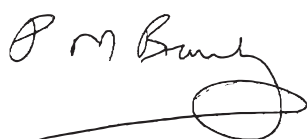
While things are at an early stage further details will soon be shared on various initiatives as they get underway. A PRISM page is being established on the intranet to share more detailed information. In the meantime, if you have any questions or other ideas for the Accelerating our Future team, please email pmo@cdhb.health.nz.

Move to Christchurch Hospital Hagley – go/no go decision time in a few weeks

I am pleased to report that it's a case of so far so good in terms of meeting the various milestones as we count down to the planned move to Hagley. I have been so impressed with the commitment to detail and the thoroughness of planning to ensure we have a wonderful new facility to move into and a meticulous migration plan. At this point

the first patient moves are still scheduled to happen mid-November, but a final decision will be made when progress is reviewed on 25 September, which is our first go/no go decision point. I'll keep you updated on progress. In the meantime, thanks to everyone who is working so hard to ensure we will be ready to move.

Ngā mihi nui



Peter Bramley
Acting CEO
Canterbury District Health Board

If you have a story idea or want to provide feedback on *CEO Update* we would love to hear from you! Please email us at communications@cdhb.health.nz. Please note the deadline for story submissions is midday Thursday.

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



Bouquets

Bone Marrow Transplant Unit, Christchurch Hospital

A huge thank you to the great staff looking after my dad in the Bone Marrow Unit. He has been raving about staff there and how grateful he feels to be under their care. Thank you.

Ward 11, Christchurch Hospital

I recently spent time on Ward 11. The staff were incredible. At every shift change the nurse who would be supporting me came and introduced herself. They were so respectful towards me and my husband. I would really like them to know what a terrific team they are and how much I appreciated everything they did.

Gynaecology Unit, Christchurch Women's Hospital

I cannot fault the wonderful service that I experienced this week at Christchurch Women's Hospital. Every member of staff I encountered was friendly, informative, professional, and very caring. The facilities are top-notch, as are the people. Thank you so very much.

General Medicine team and Ward 24, Christchurch Hospital

Please pass on a sincere thank you to the General Medicine team, the staff on Ward 24 and all others for their care and attention during my recent stay. It is a great place when you need help.

Dermatology, Level 3 Outpatients, Christchurch Hospital

I have only gratitude for the professional, wise, warm care I have received and am receiving, as I journey through this health event. From the outset I received an immediate response. Time was given generously, and warmth, humour and a constant cheerfulness were the norm. Excellent professional skills were always offered thoughtfully. I thank Caroline for her expertise, grace and concern plus the whole team for their interest and genuine desire to see me well again. This is a precious gift beyond words. The facilities are excellent, your warm welcomes and constant care so special.

Ward 24, Christchurch Hospital

To all the wonderful staff in Ward 24. Thank you very much for the care and professionalism that you showed towards our loved family member. To know that she was being looked after by such caring and compassionate people was a great source of comfort to us, her family.

Ward 23, Christchurch Hospital

Great service, caring staff, everything okay.

Gordon Beadel and team, Matt D'Arcy, and Bone Shop, Christchurch Hospital

I would like to say a huge thank you to Mr Beadel for his incredible surgery on my shoulder, which is 99.9 percent back to normal. I have no pain at all and consider myself very, very lucky to have had Mr Beadel and his team do my surgery. I cannot thank them enough for their exceptional caring and kind manner throughout my whole time in Christchurch Hospital and the many visits to the Bone Shop afterwards. I would appreciate if this could be passed on to Mr Beadel and to Registrar Matt D'Arcy.

Plastic Surgery, Christchurch Hospital

To the Plastic Surgery team, you are very gifted. I came in with my ear just hanging on and you made me feel so relaxed and were so reassuring to my wife about the situation. My treatment was great. It was a great experience, I was treated like a king. Thank you to all the staff, doctors, and nurses, you were brilliant.

Resus, Christchurch Hospital

All the staff in Resus, including Dr Luca, were amazing. The volunteer ambos as well were very friendly, made everything run smoothly and eased the stress and worries my mum had.

Intensive Care Unit (ICU), Ward 10, and clinical nurse specialists, Christchurch Hospital

I would like to thank everyone for providing such beautiful care for my son, over the last six and a half years, and most of all for the care he has received with having open heart surgery. My son had excellent care from Clinical Nurse Specialist Anne Caldwell and most of all, Dr Graham McCrystal. The surgery was perfect. He spent 24 hours in ICU and those nurses were truly amazing, then he went to Ward 10. I have been blown away by how hard the nurses work, they were always more than happy to support us however they could. They encouraged my son to push and keep progressing forward. He celebrated his 16th birthday the day after surgery, both ICU and Ward 10 nurses made a fuss and helped make his day special. Our clinical nurse specialist was, and remains, a really important part of his health journey. The guidance provided pre-op helped us fully understand what was going to happen every step of the way and post-op will ensure we don't end up back in hospital. Thank you to the amazing and wonderful doctors and nurses of Christchurch Hospital. You all rock.

Ward 28 and Neurology, Christchurch Hospital

Thanks to Ward 28, all the nurses and doctors. Thanks also to the Neurology team and all the people in Recovery, you are all awesome, great job.

Ward 20, Surgical Assessment & Review Area, Christchurch Hospital

Thank you all very much for looking after me.

Bone Marrow Transplant Unit, Christchurch Hospital

Thank you for taking great care of [patient's name]. We really appreciate everything the staff in the unit have done. Warm regards.

Ward 15, Christchurch Hospital

Thanks to all the lovely staff for looking after me so well. Special thanks to Dr Matthew Leeman and his team. Also, the wonderful nurses, Sarah and Bailey. Thanks once again.

Registered Nurse Robyn, Ward 20, Christchurch Hospital

We would just like to say Robyn on Ward 20 was an amazing nurse. She was so kind, polite and helpful. Thank you for everything.

Bone Marrow Transplant Unit, Christchurch Hospital

A massive thank you to the team. I cannot thank you enough for being so lovely to me and my family. Thank you to Jen Roberts, Emma-Jane, Lizzie and everyone else involved. But a massive shout out to Jen. Thank you for guiding me through self-injections and organising flights and appointments that suited me and being extremely proactive, attentive and on-to-it. I don't know the word but thank you for making everything extremely straightforward at my end, also being so lovely to me and my family.

Oncology Outpatients, Christchurch Hospital

Lovely Ella Fitzgerald music in treatment room 4, plus fine treatment of course.

Oncology Outpatients, Christchurch Hospital

Thank you for all the expertise, treatment and care of [patient's name] in diagnosing and treating oesophageal cancer. Also, thanks to Burwood Hospital for his two knee replacements. Carry on the great work.

Ophthalmology, Level 4 Outpatients, Christchurch Hospital

Leanne O'Sullivan and her team, Nicky, June, and Caroline, saw us immediately and gave rapid and efficient service.

Diabetic Clinic, Christchurch Hospital

Dr Soule and Liz Love were both exceptional in their service and explanation of my condition.

Ward 24, Christchurch Hospital

To the wonderful doctors and nurses who cared for my husband while he was in Ward 24. Our heartfelt thanks goes to each of you, from all his family including grandchildren and great grandchildren. You are all very special people.

Hīkina to Hagley

MIGRATING TO CHRISTCHURCH HOSPITAL HAGLEY

Booking orientation sessions

Bookings for Hagley on site orientation sessions from 5 October to 12 November 2020 are now live. You must complete the [Hagley HealthLearn Orientation package](#) before you book a session.

Area/department specific sessions (session times vary for each area/dept) including common patient flow routes (e.g. to perioperative to pick up patients): Staff are to be booked into these sessions via healthLearn by their line manager/designated trainer/Hagley Operational Team representative.

Specific doctor sessions (session times vary for each area/dept): Doctors can book themselves into the appropriate session or the designated trainer for your area

can book you into a session via healthLearn. As some sessions are specific to certain areas, please ensure you book into the appropriate session.

Wayfinding sessions (2–12 November 2020): These sessions are for staff who are not part of a ward or department moving to Hagley but will have to visit Hagley. Staff can book themselves into a two-hour session via healthLearn, but please only book in to **one session**. If you cannot get into the session of your choice, please put your name down as sessions will be wait-listed and another session put on at that time if there is enough interest and available trainers.

Helipad activity

Last week saw a lot of activity on the top of Christchurch Hospital Hagley, with the first night flight and the arrival of some very special guests.

On Wednesday night pilots went through the first night flight test to ensure the helipad will be operational all hours. This was an opportunity for the pilots to check the lights on the pad activate when they need to, and test visibility during darkness. It was also an opportunity to get some stunning photos.



The first night landing on the Christchurch Hospital Hagley helipad was a success



A crew member from the Canterbury Air Retrieval Service on the new helipad

On Thursday, pilots returned to the pad with some very special guests. The Māia Health Foundation carried out an auction during a fundraiser last year for a family to be the first to land on the pad. Willie Murney from mid Canterbury won the auction and was able to bring his family for the flight last week.

It was a bittersweet moment for Willie's mum, Kate Murney, who needed the service in 2013 when she was critically ill with septicaemia. Upon her arrival to the new helipad last week – which the family have been very active in raising funds for – an old friend greeted her. Retired Clinical Leader of the Canterbury Air Retrieval Service David Bowie treated Kate in the Intensive Care Unit where she was in a coma for two weeks. He had played a key role in Kate's treatment and recovery.

Check out the coverage on [Stuff](#) and [TVNZ](#) for the full story.



Retired Clinical Leader of the Canterbury Air Retrieval Service David Bowie and Kate Murney



The Murney family and Māia Health Foundation Chief Executive Officer Michael Flatman



The Murney family speak to the media following their historic first landing

Looking after yourself

Self-care September

Changes in our work environment can increase stress and anxiety both at work and at home. It's important during stressful times to focus on practising some self-care, as you can't pour from an empty cup.

So, when you are able to find little moments of space for self-care, what can you do? You could try mindfulness, taking a quick walk, going to get a drink of water, do some deep breathing, or spend some time journaling.

Practising mindfulness can be as simple as trying these four steps:

- › Stopping – Stop moving, stand or sit somewhere you can close your eyes if you want to.
- › Calming – Take at least three deep breaths (you should feel your belly expand as you inhale, and your exhale should be longer than your inhale) breathing deeper and slower calms your body and your mind.
- › Resting – Rest in this moment, feel your body relax, and open your eyes to take notice of the things around you.
- › Noticing – It's great to try and incorporate nature into the mix, like looking out the window at a tree or the river. Notice the colours, the wind moving the branches, the animals, and the people.

[Action for Happiness](#) has a themed calendar for every month and are focusing on self-care in September. Each day they have a task that you can do throughout the day, in order to look after yourself, they're generalised, and they're not hard!

Need some additional support?

The following wellbeing and support services are available:

- › Your GP team – your GP team is a great place to start for non-urgent mental health needs to assess the problem and consider the full range of treatment and referral options. They know you and what help you may have had in the past, and what may be helpful now.
- › Employee Assistance Programme – call 0800 327 669 to book confidential counselling, free for Canterbury DHB employees and their immediate family.
- › Workplace Support – call 0800 443 445 for 24/7 confidential and fully-funded counselling by accredited psychologists and counsellors.
- › 1737 – Call or text this free and confidential helpline which connects you to a trained counsellor for a text or voice chat.



For example:

- › Recognise that self-care isn't selfish, it's essential.
- › Get active outside and give your mind and body a natural boost.
- › Remember it's ok not to be ok.
- › Accept your mistakes as a way of helping you make progress.

You can download the [Self-care September calendar here](#). Print it and give it to your colleagues, set it as your desktop or keep it somewhere you'll see it regularly. It's so important that we look after our own wellbeing in order to continue looking after others.

Simple idea helps patients and saves money

A simple device to help patients get themselves on and off their hospital bed after orthopaedic surgery is getting them mobile safely and more quickly, and could save Canterbury DHB close to half a million dollars a year.

Burwood Hospital Physiotherapist Lesley Williams, who works on the Orthopaedic wards, created the Leg Lifter, made from a \$1.60 per unit fabric collar and cuff, usually used as an arm sling.

By making a simple loop, patients can hook it over their foot to safely and comfortably lift their own leg when getting on and off the bed. The fabric and knot can be easily loosened by those patients with arthritis.

Initially dubbed 'Lesley's Leg Lifter' the device has become hugely popular with patients and staff and Lesley recently completed a Collabor8 project on it.

Collabor8 is a two-day 'Lean Thinking' programme that has been running since 2009 and is open to any discipline in the Canterbury Health System.

A 31-year-old male patient said: "The Leg Lifter gave me back my dignity, not having to get a nurse just to go to the toilet. It was a big boost to my morale."

Another said it was "so simple but such a huge help".

Feedback from staff is that the Leg Lifter increases patients' confidence about managing at home and has enabled earlier discharge and rehabilitation.

If patients can't get their legs on and off their hospital bed independently they can't go home, Lesley says.

"Under the Enhanced Recovery After Surgery (ERAS) pathway, patients having joint replacement surgery must be able to reach a certain level of mobility to ensure safe and confident discharge from hospital. The criteria includes independent transfers on and off the bed."

When patients can comfortably get themselves on and off the bed it leads to more walking, even if that is just going to the bathroom, she says.

"This early mobilisation has a positive impact on pain relief and decreases post-operative risks such as chest infections and deep vein thrombosis. Confident mobility also eliminates much of the anxiety around managing at home."



Physiotherapist Lesley Williams shows Registered Medical Officer Sarah Kelman how the Leg Lifter works

Joint replacement surgeries were performed for 1100 patients last year. Conservatively, if half reached their mobility goals and were therefore discharged one day earlier because of the Leg Lifter, the savings to Canterbury DHB would be \$440,000 per annum (based on patient bed stay costs of \$800/day).

Creating the Leg Lifter reinforced the importance of listening to patient needs and concerns, analysing why patients may put up barriers to discharge and finding simple, effective ways to address these concerns, Lesley says.

"Its use has become more widespread and nursing staff are now making them as a matter of course."

Day one of the next Collabor8 course will be on 4 November 2020 and you can register on [healthLearn](https://healthLearn.org.nz/) or email Collabor8@cdhb.health.nz or Director of Service Improvement Brian Dolan on brian.dolan@cdhb.health.nz for more details.

100,000 COVID-19 tests... no, it's not a typo

Thinking back to the first weeks of the COVID-19 testing set-up, a communication from 23 March went like this:

"Canterbury Health Laboratories (CHL) has been processing 200 plus COVID-19 samples per day. This remains a fluid situation, as more laboratories bring testing online and we collaborate nationally to support those with capacity challenges."

Now, here we are, five months later and we've just hit 100,000 tests – and if that isn't worth a cake, we don't know what is!

This is what we can accomplish when we work together.

A big thankyou to everyone that has contributed to this effort.

What an achievement!



The icing on the cake – complete with hundreds and thousands (one for each test)

Get involved! People policy consultation

As part of our ongoing commitment to our people, we're consulting on three proposed people policies to set the foundation and the principles for how we make work, work better. We've identified three policy gaps that are required to further our implementation of the People Strategy.

- › Leave Policy
- › Recruitment and Selection Policy
- › Drug and Alcohol Policy

We've also provided supporting documents for the Alcohol and Drug Policy for feedback as well. These include:

- › Drug and Alcohol Testing Procedure
- › Drug and Alcohol Testing Procedure Flowchart
- › Rehabilitative Approach to Drug and Alcohol Related Issues Guideline

If you'd like to provide feedback on these policies, we'd love to hear from you! Check out [this article on max](#), to read the policies and find out how to provide feedback by Friday 18 September.

Two decades of service celebrated

Personal Assistant Cheree Castle celebrates 20 years working at Canterbury DHB this month.

Cheree was initially employed as Jim Magee's Personal Assistant in his role as General Manager of Christchurch Women's Hospital in September 2000, and has been based in Women's Health ever since.

Cheree has worked alongside General Manager Christchurch Campus Pauline Clark and Programme Lead Treatments and Technologies Natalie King and is currently working with Service Manager Michele Pringle and Senior Operations Manager George Schwass.

Her colleagues want to offer a huge thank you to Cheree for being a wonderful person to work with, super-efficient, with a can-do approach to challenges and an enormous amount of organisational knowledge.

They say her patience is enviable with her ever-present sense of humour (often needed) and she is always up for a laugh and glass of wine at the end of a busy week.

A small group of personal assistants and others from Christchurch Women's Hospital and Christchurch Campus celebrated Cheree's two-decade milestone last Friday with cake, coffee and gifts.

Cheree says over the years the teams she has worked with have come to feel like family.

"I have loved the camaraderie and close relationships."

Thank you Cheree for your years of dedicated service.



Rear, from left, Personal Assistant (PA) to Chief Medical Officer Rochelle Audeau, PA to Intensive Care Nurse Manager Michele Reiher and Programme Lead, Treatments and Technologies Natalie King
Front, from left, PA to Clinical Director and Nursing Director Paediatrics Julia Reeves, Maternity Administrator Sarah Stevens and PA to Finance Manager Gill Rooney,
Front, from left, PA to Service Manager Women's Health and Senior Operations Manager Cheree Castle, PA to Director of Midwifery Charlotte Evers, Clinical Director Obstetrics and Gynaecology Emma Jackson, PA to Clinical Director Obstetrics and Gynaecology Sharon Miller and PA to Director of Nursing Ali Taylor

TE WĀ
TUKU REO
MĀORI
Monday
14 September
12pm

**MĀORI
LANGUAGE
MOMENT**

Rethinking Rehab at Burwood Hospital

Written by Charge Nurse Manager B1, Burwood Hospital
Andrew Henderson

The Older Persons Health Inpatient Service at Burwood Hospital began a project in 2018 called Rethinking Rehab.

Part of this included having patients come out of their rooms to use the purpose-designed social spaces. This supports an important part of the rehabilitation process, focusing on getting patients back to doing 'normal' activities as quickly as possible.

It improves mobility and balance, increasing confidence, and enables independence in a supportive and safe environment.

Ward B1 has incorporated Rethinking Rehab into its ethos through a variety of activities for our patients. These include a combined music group every Friday with the help of the Burwood Hospital Volunteers, regular quizzes and games such as indoor bowls, quoits and catching games using a variety balls/balloons and so on.

This is just the right kind of stimulation and activity to increase patients' confidence, strength and balance, and to reduce their risk of falls.

Staying active decreases length of stay, shortens the duration of delirium, decreases the risk of depression, and increases the rate of discharge back home. During *Stand Up September* celebrate enabling patients to stand up and move safely.



Occupational Therapy Assistant Sue Johnson conducting the Ward B1 choir during music group

Heading to Christchurch Hospital? The Hospital Shuttle has moved

Park at the new Deans Ave Car Park

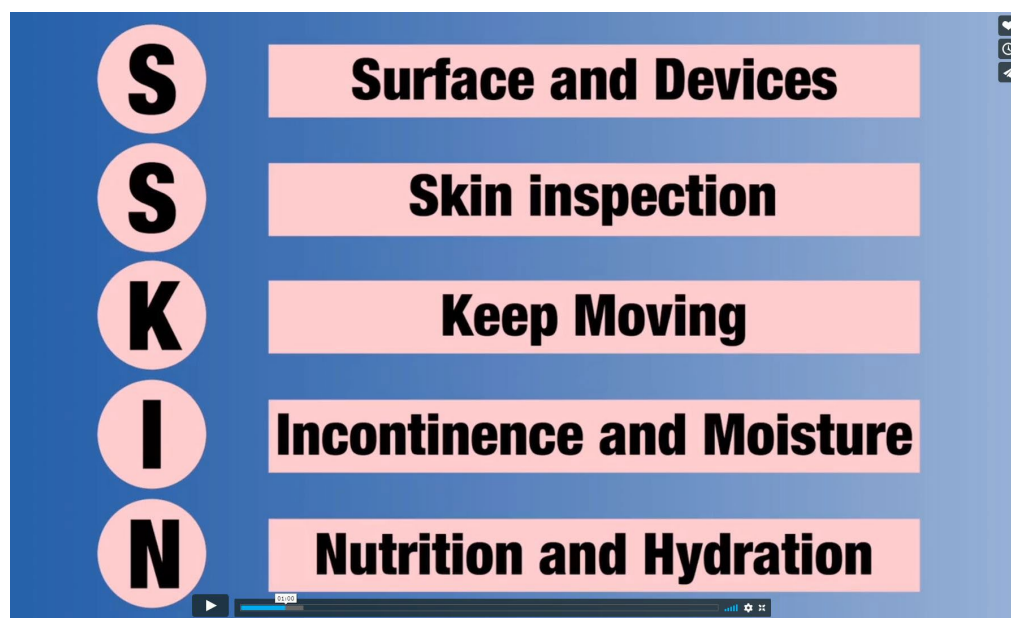
The free Hospital Shuttle runs seven days a week to Christchurch Hospital and Outpatients

cdhb.health.nz/parking



New video shows how to prevent pressure injuries

Pressure injuries are considered to be largely preventable and are identified as an adverse event in health care delivery. As part of ongoing work to significantly reduce pressure injuries within healthcare settings across Canterbury and the West Coast, Canterbury DHB and Accident Compensation Corporation (ACC) worked together to produce a video featuring practical advice on how to prevent pressure injuries.



A new video features practical advice on how to prevent pressure injuries

The video explains how to reduce friction and shear, which can cause pressure injuries, and how to use the SSKIN bundle to ensure that no prevention element is missed.

The Quality and Patient Safety team encourages those caring for patients or residents to consider or undertake the following SSKIN assessments regularly:

- › Surface – provide supportive pressure-relieving surfaces
- › Skin Inspection – undertake regular skin checks to detect early signs of skin damage
- › Keep moving – change position often

- › Incontinence– keep skin dry and clean
- › Nutrition – eat healthy food and drink plenty of fluids.

Watch the [Preventing Pressure Injuries positioning video](#) (10 minutes) and share with your colleagues and patients or residents.

If you have any questions, or would like more information, please contact Chair of the Pressure Injury Prevention Advisory Group Robyn Cumings on robyn.cumings@cdhb.health.nz.

Talk to a
counsellor,
any time.

NEED TO TALK?

1737

free call or text
any time

Training to help recognise and respond to elder abuse

An elder abuse and neglect learning package for staff has been created to help staff recognise and respond to abuse of older people.

"The first training was delivered in July and we aim to target the training roll out further for next year and will aim to have booking available via [healthLearn](#)", says Older Persons Health Service (OPHS) Clinical Manager Social Work Tylee Beaumont, who created it.

Tylee consulted a number of people and organisations to create the package, including Child and Family Safety Service, Age Concern, Māori Health, West Coast DHB and a number of OPHS colleagues.

"It is helping staff become more confident in recognising the signs of elder abuse and neglect and respond appropriately," she says.

Tylee and OPHS Social Worker Denise Dwyer have highlighted the issue of elder abuse in the following article (abridged) they have written in the latest edition of *Generations* newsletter:

"The best thing we can do as health workers is to learn to recognise the signs and symptoms of elder abuse and to tell someone who can assist with assessing the situation further, such as a Canterbury DHB or Age Concern social worker. Early identification of elder abuse and a health response improves overall outcomes for our clients.

It's no secret that New Zealand has high rates of family violence, but what might surprise you is that our elderly population are also experiencing abuse at an alarming rate.

Age Concern figures from 2017 indicate that one in 10 older people in New Zealand experience some kind of elder abuse, including financial, sexual, verbal and neglect to physical or institutional abuse. The majority goes unreported.

Often the perpetrator is a family member. We have also had cases whereby neglect and/or manipulation is not understood to be a type of abuse.

An instance of this may be threatening to keep precious grandchildren away if the elder person does not comply with demands or expectations. Another example may be withholding medication or treatment. We also see added risk factors with groups of older people who have additional vulnerabilities such as, those living alone, those experiencing a cognitive decline or mental health issue and/or those that have adult children with mental health or addiction issues.

Why do we need to talk about elder abuse and neglect?

Age Concern estimate that only 16 per cent of elder abuse cases are reported and the damage is often hidden. Ageist attitudes within society, a fear of consequences, dependence on an abuser, shame and increased frailty and illness are often contributing factors as to why the abuse may remain hidden.

And remember, support is likely the most powerful intervention we can offer, but sometimes we have to ask the difficult questions."



**GETTING
THROUGH
TOGETHER**
WHĀIA E TĀTOU TE PAE TAWHITI



It's Migraine Awareness Week: Are you one of the 'one in 10'?

Migraines are a complex neurological condition that cause recurrent, debilitating headaches.

They are the seventh leading cause of disability worldwide.

Migraines occur in four phases, affect women more than men, are often hereditary, and are accompanied by other bodily or sensory symptoms, such as nausea or vomiting, pain in the neck and shoulders, and sensitivity to movement, light and sound.

One in 10 Kiwis experience migraines. Some get the visual disturbances commonly associated with migraines known as the 'aura', whereas two-thirds don't. Some people have definite triggers, such as certain foods or excessive stress, whereas many can't pinpoint anything specific.

Christchurch Hospital Consultant Neurologist Debbie Mason who also holds the role of Clinical Senior Lecturer Department of Medicine at the University of Otago, Christchurch, says a significant component of the Neurology Department's work is centred on diagnosing migraines and ruling out other conditions.

There are around 180 presentations to the Emergency Department (ED) a month where the patient is recorded as having a headache. Some of these are migraines.

"Often it is people who have never experienced a migraine before who turn up at ED. They're worried they may have a brain tumour or be experiencing a stroke or transient ischaemic attack (known as warning strokes or mini-strokes).

"Not infrequently patients will be referred to Neurology by ED, essentially to rule out these other causes, which is done by clinical assessment and sometimes a brain scan," she says.



If over-the-counter painkillers aren't enough to stop attacks or reduce the intensity, patients may benefit from medications such as one of the triptans (a group of drugs used to treat migraines and cluster headaches), in association with an anti-inflammatory, and an anti-nausea drug.

"These are most effective when patients take them as soon as they notice early warning signs. They are often able to stop an attack from happening at all, as well as stop an acute attack from progressing."

Encouraging mindfulness and regular exercise can also help reduce the frequency and severity of migraine.

"There are a number of ways of managing migraines and there are treatments – talk to your general practice team. You don't have to just put up with them," Debbie says.

For more information about migraines and how to manage them, visit [healthinfo.org.nz](https://www.healthinfo.org.nz).

Speech-language Therapy Awareness Week

This year's New Zealand Speech-language Therapy Awareness Week of Connection runs from 7 to 13 September 2020.

President of New Zealand Speech-language Therapists' Association Annette Rotherham says, "Being able to communicate is essential for all relationships. The risk of social isolation is increased for all those with a communication disability and we have been very conscious of this during the lockdown period."

Speech-language therapists help people with communication disorders meet their potential and get connected and stay connected with their friends and whānau.

"Having successful communication experiences allows people to take part, be confident and live a more fulfilled life. Being able to communicate, and being heard, supports

self-esteem – without it, people can withdraw, and this sometimes results in social, psychological, health, mental health, and economic issues," Annette says.

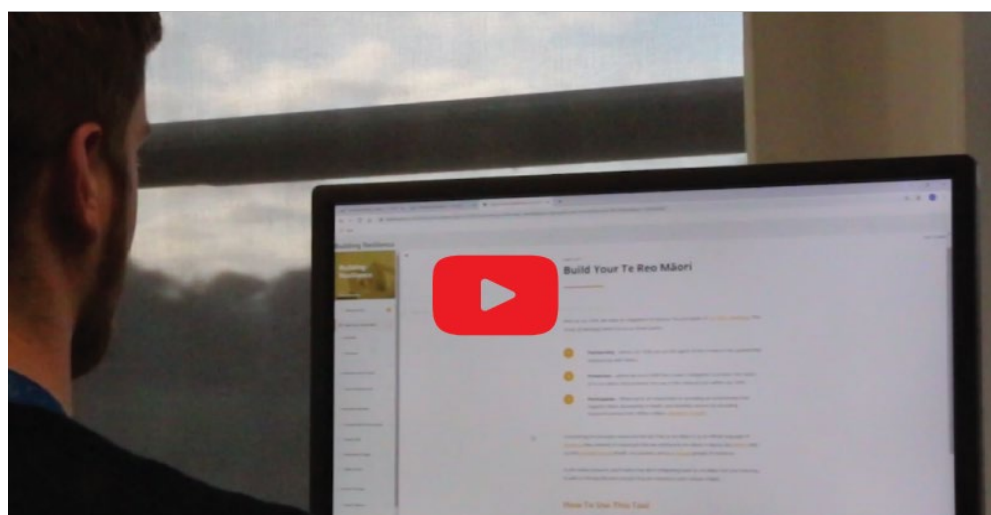
When we all connect, we thrive.

For more information about Speech-language Therapy Awareness Week:

- > [Visit the New Zealand Speech-language Therapists' Association website](#)
- > [Follow the New Zealand Speech-language Therapists' Association on Facebook](#)
- > [Watch the YouTube video: What does a Speech-language Therapist do?](#)



Your Hub for the Essentials of Leadership and Management



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Relevant & Timeley Learning



Leadership Content



Simple Navigation

One minute with... Willem Vink, Nurse Practitioner, Palliative Care Service Canterbury and West Coast DHBs

What does your job involve?

When patients come to Christchurch or Burwood hospitals with complex issues relating to pain or other symptoms, or are dying, they are often referred to our team. As a nurse practitioner I approach meeting each new referral as an opportunity to meet a person and to understand their unique situation. Often there are complex physical symptoms to help manage but also psycho-spiritual challenges that require attention, and whānau who also require listening to and reassurance. Although I can prescribe medicines, that is only a very small part of what I do. Helping provide education to staff, students, whānau and members of the public on normal dying and palliative care is also an important part of my role.

Why did you choose to work in this field?

As a young nurse I had the privilege of journeying with a young woman who eventually died of her leukaemia. She was the first person that I was able to talk with openly about dying. It made it less frightening for both of us and I have never forgotten her and what I learned from her. She helped me realise what nursing could add to this rich and precious time of life.

What do you like about it?

The people who I meet through this role, patients, whānau and other staff. The stories that people share with me, their bravery and courage. I get drawn in. I get to see the human spirit, real, raw, vulnerable and suffering, but also warm, tender and so grateful.

I also like my bi-monthly trips to the West Coast and being a bridge between the Coast and Christchurch for patients. I like the fact that I can see people both in hospital and, when on the West Coast, in their own homes.

What are the challenging bits?

Young families where a parent is dying is always challenging. No one expects to die in their 20s or 30s especially when they have children, yet unfortunately it does happen.

Who inspires you?

My colleagues who daily step into people's lives, sincerely attentive to finding solutions to some of the complex issues that are present, and always open to what each patient teaches us.

Every day seeing brave and courageous people struggle with issues of life and death.

Managers of our health services who make it possible for those of us on the front line to do the work.

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?

These values are foundational especially reverence (respect), allowing for the sacredness around each person living or dying.

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

My first job after leaving school was on a dairy farm!



Palliative Care Nurse Practitioner Willem Vink with his granddaughter Imogen and dog Ruby

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

Mangawhai Heads – swimming in the surf.

What do you do on a typical Sunday?

My partner Trish and I attend the local church in Sumner early then I head out to Kaiapoi to see my 95-year-old father and have morning tea with him and some of my seven siblings. Later, I often go for a walk on the hills back home in Redcliffs or have some fun time with my two-year-old granddaughter.

What's your favourite food?

Kiwifruit.

And your favourite music?

Crowded House and music from the 70s and 80s.


Something For You

Something For You is the Canterbury DHB employee benefits programme. The deals offered are from the Canterbury business community to say thank you for all that you do.

This week we have a special 'limited time only' offer from the Shoe Clinic – it ends Sunday 13 September! Make sure you take your Canterbury DHB ID instore with you.

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



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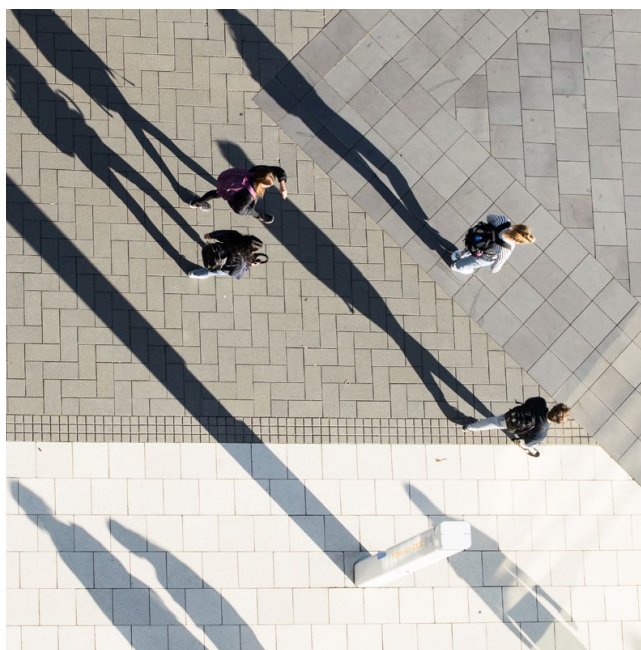

The key messages from the most recent Canterbury Clinical Network (CCN) Alliance Leadership Team meeting are out now. The network farewelled Canterbury DHB's Executive Director Planning and Funding Carolyn Gullery and recognised the contribution she had made to the Canterbury Health System.

Also discussed at the meeting:

- › update from the Immunisation Service Level Alliance on influenza and MMR
- › improving technology-enhanced education opportunities for the rural primary health workforce
- › CCN work programme 2020–22
- › changes to alliance group memberships.

Read more [here](#).

To view previous key messages, check out the [resources page](#) of the CCN website.



Postgraduate Virtual Information Evening

POSTGRADUATE



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Thursday 10 September | 5–9pm
Join us online.

Hear about study options at our Dunedin, Christchurch and Wellington campuses or via distance. Elevate your career with our range of postgraduate programmes in Business, Sciences, Humanities and Health Sciences.

Register now otago.ac.nz/opendays