



FAST-thinking is saving lives, and our clot retrieval service is making it better for people who have a stroke and get to hospital quickly

Three of Christchurch Hospital's four interventional radiologists can perform the life-saving clot-retrieval procedure. The process involves using suction to remove a blood clot, or a 'stent retriever' – a small mesh pad that absorbs the clot and is used to pull it out of the patient's brain. In the past the usual treatment would have been blood thinners and lots of physiotherapy.

One patient from earlier this year, Rosa, had the first symptoms of a stroke while out walking. Her speech became slurred but she felt fine. When she reached her doorstep, she collapsed.

An ambulance rushed Rosa to Christchurch Hospital and by the time she arrived her face was drooping and she had lost the use of her left arm.

A large blood clot lodged in Rosa's head could have killed around 30 percent of her brain. If that happens, a patient has about an 80 to 90 percent chance of dying or being permanently disabled. Recent studies have proven the effectiveness of clot retrieval and identified which patients will benefit the most from it. It only works on large blood clots, the ones most likely to cause death.

Rosa was able to return home the day after her procedure. A video was filmed in Christchurch Hospital a couple of weeks ago, and tells the story of Hans who also had a stroke and had a clot removed. He too walked home the following day. You can see Hans' story in [the video here](#).

This is remarkable, life-saving work that has been happening in Canterbury since 2014. Last year 32 clot-retrieval procedures were carried out and we expect to do 80 this year.



With the right intervention and support, people can avoid death, disability or the deterioration of their quality of life.

While the clot retrievals are at one end on the scale, every day in Canterbury hundreds of people with complex needs and acute conditions are cared for in the community under the expert care of their general practice teams. Teams of community nurses, allied health professionals and others are keeping people well and independent in their own homes, avoiding lengthy hospital stays and the associated risk of complications.

Those working in the Canterbury Health System seek to reduce hospital medical admissions that are potentially avoidable through prevention, earlier intervention or closer management in primary care.

In this issue

- > Regulars... pg 3-8
- > Improving public health through transport planning... pg 9-10
- > Executive Director of Allied Health, Scientific and Technical appointed... pg 10
- > Healthcare Team Challenge... pg 11
- > Appointment of Clinical Director Obstetrics and Gynaecology | Kate Sheppard Memorial Trust Award presentation... pg 12
- > Restoring sight most rewarding aspect of career... pg 13
- > Health professionals learning about each other in their patients' interests... pg 14
- > Stand up for yourself during Sit Less September... pg 15
- > One minute with... pg 16
- > Notices... pg 17-26



Bouquets

North Inpatient Unit, Hillmorton Hospital

A visitor to a consumer in the North Inpatient Unit has provided some feedback on how impressed she was with nursing staff on the ward. She said that nurses Lisa and Chris who were looking after the person she was visiting were “wonderful”, “understood the consumer well” and were “really professional and caring”.

Cheryl, North Adult Community Support, Hillmorton Hospital

A consumer says she is “incredibly grateful” for the support she received from North Adult Community Support Worker Cheryl Carey. The consumer said she appreciated the rapport Cheryl built with her and that she “understood where I was at and never pushed or judged me”. She stated “I will never forget the support and warmth I got from Cheryl”.

Jill Lamb, Christchurch Women’s Hospital

I had a colposcopy last week and Jill Lamb, the nurse who undertook it, was so friendly and professional that I immediately felt at ease. This was not an easy feat as I was very apprehensive about the procedure before I arrived. She included me in the process, let me know of every action she was taking and was consistently reassuring. Thanks Jill – you’re doing such good work.

Ward 15 and 16, Surgical Assessment Review Area, Recovery Ward, Ward 11, Christchurch Hospital

I am so grateful for the fantastic way I was treated while in Christchurch Hospital. There must have been 30 staff involved in my care during my stay and all, without exception, treated me with courtesy and respect. The level of care was beyond reproach. Everything regarding my treatment was clearly explained to me in a way I (a non-medical person) could understand. We hear some negativity on the news media about our public health system. All I can say I received the very best care possible, an absolute credit to the staff and administration. I thank God I live in a country where such care is available. Many thanks. I wish I could thank everyone individually. Keep up the good work!

Day Surgery Unit, Christchurch Women’s Hospital

I escorted [patient name] to the Day Surgery Unit yesterday, and we received some wonderful care whilst there. The staff from security guards to nurses, through to surgeons were delightful. We received very special care from security guard Karen, Registered Nurse Mary, in both pre-op and stepdown, and from Registered Nurse Kaye and her colleague in the Post Anaesthesia Care Unit, as well as one of the male anaesthetists (or

anaesthetic technicians) whose name I did not catch. It was great to see staff with such a wonderful manner who displayed compassion and empathy. They made [patient name] feel comfortable and at ease throughout the day, especially when she was extremely nervous about her surgery. I would appreciate it if this compliment could be passed on to their team, as recognition should be given where it is due.

Victoria, Surgical Assessment Review Area (SARA), Christchurch Hospital

I wanted to say thank you to Victoria who was my nurse in the SARA ward. She was extremely compassionate and always went the extra mile to ensure I was comfortable. I really appreciate it. Thank you so much Victoria.

Emergency Department (ED), Acute Medical Assessment Unit (AMAU), Christchurch Hospital

I would like to compliment a couple of nurses who have cared for me throughout the last couple of admissions I have had. Firstly, the ED nurses. They are always so understanding and friendly. I would specifically like to thank Nurses Kate and Jill. They were very caring and very interested in my welfare and comfort. Secondly, I would like to thank the nurses of AMAU, in particular, ‘British Yvonne’ for her

sense of humour and care. She made my admission a few months ago much more tolerable. She came and checked on me often and gave me numerous updates about what the plan was. I would also like to thank nurses Annie, Carmen and Tammy. They were fantastic at providing care to me. I cannot thank Yvonne, Annie and Carmen enough for their support. These nurses in particular went above and beyond for me and advocated for me when needed. Your nurses are fantastic, a true asset to Canterbury DHB.

Ward 11, Christchurch Hospital

I have just returned home after surgery and a couple of days on Ward 11. I would like to thank all the staff on Ward 11 for the care I received there, it made a stressful time pass very smoothly and enjoyably. Please pass my thanks on to them for being there for me when I needed them, simply awesome. Keep up the great work you're doing.

Emergency Department, Christchurch Hospital

Thank you so very much for the gold care of [patient name]. She had six teeth removed and an abscess drained. I have also passed on our very grateful thanks to the Healthline registered nurse who advised us to come in. We are very grateful thanks.

Radiation Treatment Oncology, Christchurch Hospital

The service is amazing. The "Radiation Girls" are amazing.

Ward 27 and Acute Medical Assessment Unit, Christchurch Hospital

Thank you all, lovely staff. Now I feel so much better I appreciate how unwell I was. Between you all you fixed up a very old nurse and got her back on the road again! Thank you so much.

Ward 24, Christchurch Hospital

Thank you so much for all the amazing care and kindness you have given

[patient name] whilst he has been in hospital. We appreciate everyone so much. The doctor and her amazing team, nurses, carers, meal and tea assistants, thank you all.

Medical Day Unit, Christchurch Hospital

First class service from everyone. Thanks.

Eduardo da Silva, Oral and Maxillofacial Surgery, Christchurch Hospital

The service Dr Eduardo Da Silva provides is so caring. He is very personable and explains everything along the way. I very much appreciate the treatment I have received from him. Thank you so much for your skill and expertise.

Ward 25, Christchurch Hospital

Thank you all for your hard work, you all make a huge difference to the lives of those in your care and this city. God bless you all.



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 a non-staff member and you want to subscribe to receive this newsletter every week please [subscribe here](#).

Big Shout Out

Burwood Hospital

A huge thank you from the New Zealand Blood Service to all the Burwood Hospital staff for taking the time to give blood at our mobile blood drive last week.

A special mention goes out to the staff in the Burwood Spinal Unit, Ward FG. They had a great turn-out. About a quarter of the people who gave blood were from the Spinal Unit team. Well done, Ward FG! You guys are awesome!

Also, thank you to the orderlies for helping us with the furniture and parking. And thank you to Personal Assistant Sue Gillan for organising everything again.

We really appreciate your ongoing support of our vital service.

#carestartshere



Maria van den Heuvel and Deb Woodfield from the Burwood Spinal Unit at the mobile blood drive

Thank you from the NZ Blood Service



The Burwood Hospital mobile blood drive was a great success



39 people came along to the mobile during the week

35 units were collected (1 donation = 1 unit)
Only five below the target for Burwood Hospital

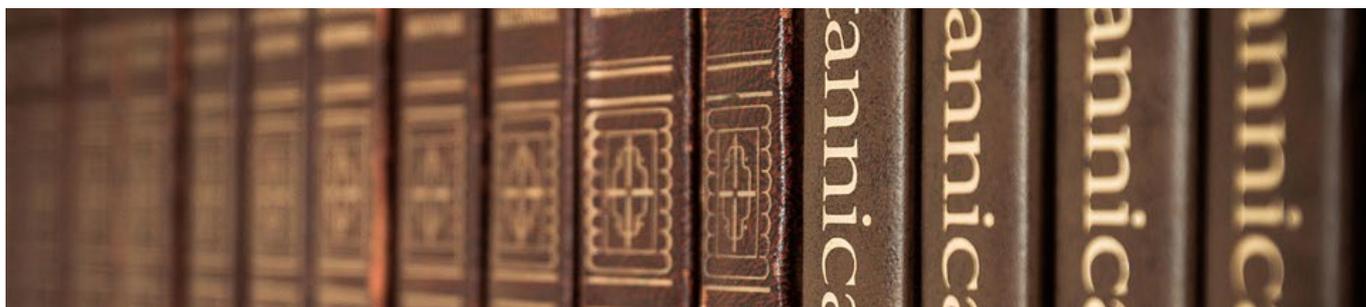
7 people were brand new donors



Several lost donors* returned

**people who haven't given blood in over four years*

The donor flow was excellent. 100% of donors had a needle in their arm in **less than 40 mins** from the time when they arrived
Donor flow refers to how fast the donors move through the blood donation process at the mobile blood drive



The Library

Browse some of the interesting health-related articles doing the rounds.

[“Otago scientist urges NZ to lead the way in eliminating top infectious disease killer”](#) – the United Nations has a goal to eliminate tuberculosis by 2035 which New Zealand has endorsed. However, Ayesha Verrall from the University of Otago says it’s time New Zealand developed a clear strategy as to how it will achieve this goal. From *NZ Doctor*, published online: 29 August 2018.

[“The challenge of ageing populations and patient frailty: can primary care adapt?”](#) – as the numbers of frail older people climb and present increasing pressure on health services worldwide, this article explores the benefits and challenges from a UK perspective of making frailty an integral part of primary care. From *British Medical Journal*, published online: 28 August 2018.

[“Sibling and family caregivers”](#) – as part of the series on “what your patient is thinking”, this article covers the perspective of a sibling caregiver who wishes his brother’s health care team would recognise and consider the wellbeing of family caregivers when assessing the needs of their patients. From *British Medical Journal*, published online: 1 August 2018.

If you want to submit content to **The Library** email communications@cdhb.health.nz.

To learn more about the real-life library for Canterbury DHB:

- › **Visit:** www.otago.ac.nz/christchurch/library
- › **Phone:** +64 3 364 0500
- › **Email:** librarycml.uoc@otago.ac.nz



Facilities Fast Facts

Acute Services building

The installation of the glass to the entry canopy is progressing and should all be in place by the end of September.

With the fit-outs almost complete across both towers on levels three and four, the power switch has been flicked on and the two levels have lights. Fit-out continues through the rest of the building, including installing the ceiling panel, vinyl to floors and walls, and the joinery for the staff stations.

There are 377 bed-head panels to be installed in the ward rooms and the Acute Medical Unit. The panels provide outlets for medical gasses and other services, connections for the nurse call, space for digital signs, and lighting, and were designed with input from users who spent time in the Design Lab as part of the design programme.



Installation of glass to the entry canopy



Bed-head panels being installed in a ward

Link

This view from the top of Christchurch Women's Hospital (CWH) shows the area outside Oncology where the link between CWH and the new Acute Services building is going. Work this week is to finish installing the 15 piles that are needed for the building. Each of the piles, which can be seen lying on the ground in the foreground of the photo, are made up of two 13-metre lengths welded together.

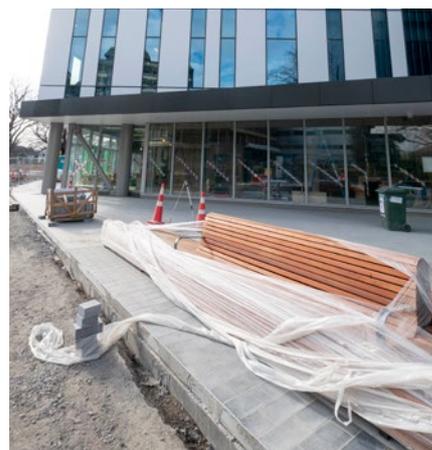


Christchurch Outpatients

We're at Week 7 on the countdown to the big move into the new building. There is more information on this in the Destination Outpatients: Better Together update over the page.

A reminder of key dates: There is a blessing on Friday 5 October and two staff open days on Tuesday 9 October in the morning and Thursday 11 October (times to be confirmed).

The builders' clean, the first in a series of cleans of the building, continues this week. A series of clinical cleans will be done before the final dust and polish before the first move starts on Friday 26 October. Contractors are working around the exterior of the building installing all outdoor furniture, such as bench seating and bicycle racks.



BETTER TOGETHER

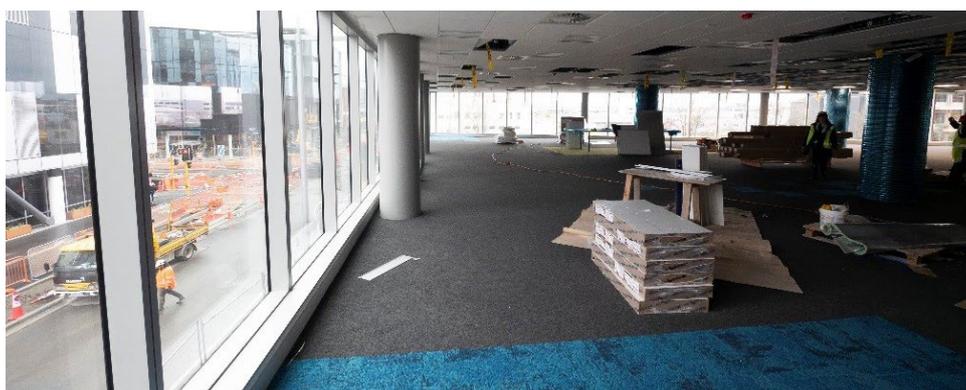
Destination Outpatients



It is WEEK 7 in our countdown to the move into the new Christchurch Outpatients. With more than 200 staff from over 27 different services working in the building, we'll need to share many of our spaces thoughtfully and efficiently, especially in our shared administrative areas.

There's more about shared spaces and office etiquette in this [week's video](#). Christchurch campus General Manager Pauline Clark also has information on the building's blessing service and staff open day sessions.

The photo below shows the Level 1 administration area, circled in red on the floor-plan.



Seismic performance

The Outpatients building is built to Importance Level 3 standards, which is the equivalent of 130 percent of the Building Code and means that the building is designed for safe evacuation in the event of an earthquake. The frame of the building is steel, and many of the X-shaped braces of the building are fitted with viscous dampers – fluid-filled pistons that help to dampen any movement, a bit like the shock absorbers on a car.

More information about the building will be released to staff as an online handbook via HealthLearn. The handbook and associated HealthLearn training will be available online soon.

Get all the migration news hot off the press. www.facebook.com/groups/destination.outpatients/

Meet the team

Pauline Michel (Allied Health – Administration Coordinator)



I joined COAST to support the transition from Patient Management System, Homer, to the South Island Patient Information Care System (SI PICS) from an administration perspective, with a keen eye on data integrity and improving our data prior to go-live.

Throughout our journey we have had opportunities to question, change and improve processes while also improving the way we work towards a patient-focused outcome.

This team has been instrumental in filtering these changes to our organisation in a way that has allowed us to collectively embrace the changes across the campus.

Peter Chapman (Rheumatologist – Clinical Director)



I am one of the senior medical officers on the COAST team providing clinical advice around the transition, establishment and running of our new Christchurch Outpatients facility. It has been a challenging and exciting process, bringing together many diverse services into one building and coordinating the major transition into SI PICS. COAST is committed to providing optimal, patient-focused and timely outpatient care to the Canterbury population and at the same time supporting our valuable workforce.

Peter is currently on sabbatical but will be back in time for the opening of the new Outpatients.

Improving public health through transport planning

Making streets more inviting and public transport more accessible is part of an approach that could be adopted across the South Island to improve public health and social connection, says UK Public Health Specialist Lucy Saunders.

Lucy is the driving force behind the 'Healthy Streets' initiative. She visited Christchurch recently to engage with planners, local government, social services and others from across the region.

Supported by the South Island Alliance, Environment Canterbury, and the Canterbury/West Coast branch of the Transportation Group, Lucy spoke about Healthy Streets at a workshop, governance breakfast, and a public hui. She was also the keynote speaker at this year's 'Walking and Cycling' conference in Palmerston North.

Rather than the traditional approach of tackling physical inactivity by putting the responsibility on the individual and encouraging them to be more active, Healthy Streets focuses on incidental exercise, where people are supported by their environment, Lucy says.

"It's about little and often exercise throughout the day that you don't have to pay for or even think about."

Some of the healthiest communities in the world where people are the most active are not that way because they are highly motivated to exercise or "really sporty".

"It's because it's a necessity of their daily life that they do a little bit of exercise throughout the day."

Lucy currently leads the integration of transport and public health in London. Her approach has revolutionised street planning in the UK. Roading that promotes safe walking or cycling over short car journeys will get people thinking, and changing their routines, she says.

"We need to make our streets inclusive to everyone. It's about looking at the spaces between buildings and asking – is this meeting our basic, fundamental needs? Do I feel safe? Is the air clean? If I need to stop, is there shelter and somewhere to rest?"



UK Public Health Specialist Lucy Saunders speaking at a Healthy Streets workshop in Christchurch



From left, Len Fleet from Environment Canterbury, UK Public Health Specialist Lucy Saunders, Health in All Policies Advisor for Nelson Marlborough DHB Jane Murray and Team Leader of Healthy Environments for Public Health South at Southern DHB, Tom Scott

Many streets don't meet these criteria, Lucy says.

Health in All Policies Advisor for Nelson Marlborough DHB Jane Murray says it was inspiring to hear an expert in the field.

"I can see Lucy's concepts being brought into submission work and collaborative project work locally."

Team Leader of Healthy Environments for Public Health South at Southern DHB Tom Scott says Lucy's work was "very insightful". Moving the conversation away from promoting active transport to strategies for disincentivising motorised transport was a key learning for him, he says.

Find out more at www.healthystreets.com/lucysaunders.

Read more in the latest South Island Alliance newsletter [here](#).



Healthy Streets indicators

Executive Director of Allied Health, Scientific and Technical appointed

Jacqui Lunday Johnstone has been appointed to the role of Executive Director of Allied Health, Scientific and Technical for Canterbury DHB and West Coast DHB.

This role provides strategic leadership for Allied Health, Scientific and Technical professionals and is a member of the Executive Management Teams for both the Canterbury and West Coast DHBs.

Jacqui was born and raised in Scotland. She is currently Chief Health Professions Officer for the Scottish government. Her experience spans the public and private healthcare systems in the UK, and includes clinical leadership positions and the founding and running of her own business.

She has many published works covering the Allied Health profession, healthcare systems, occupational therapy, patient care, change initiatives and reviews.

Jacqui gained her Occupational Therapist qualification from Queen Margaret University in the UK. She was awarded an Honorary Fellowship from the Chartered Society of Physiotherapy and an Honorary Doctorate from the Queen Margaret University.

Currently, Jacqui is completing a Masters in the Humanities at the Open University. She has a range of other professional memberships, affiliations, awards and positions, including:

- › Honorary lecturer at Glasgow Caledonian and Queen Margaret universities
- › Trustee of the International Council of Allied Health Leaders
- › Order of the British Empire (OBE), Queens New Year Honours 2015, for Services to Healthcare and the Health Care Professions.

Jacqui starts in the role on Monday 5 November and we look forward to welcoming her to the Canterbury and West Coast health systems.



Executive Director of Allied Health, Scientific and Technical for Canterbury and West Coast DHBs Jacqui Lunday Johnstone

Healthcare Team Challenge

Those who took part in the recent Healthcare Team Challenge (HCTC) got to know more about the roles of people in other professions and experienced working together as a team.

The HCTC is an internationally recognised learning activity that promotes teamwork and collaboration among current and future healthcare professionals. Interprofessional teams compete at a live public event to present their care plan for a client with complex needs.

The aim is to provide an authentic interprofessional experience which complements current learning experiences and expands worldviews.

The HCTC was held recently at the Christchurch Campus where interdisciplinary teams made up of undergraduates and new graduates competed to present a treatment and discharge plan.

They had four weeks to prepare a five-minute presentation and evidence of team work was a key criteria for the judging panel.

Teams were given a comprehensive biography that included the following information:

"Mrs Pomare presented to her GP after one to two days of increasing shortness of breath and a productive cough. She feels like she can't catch her breath and is feeling unwell but is keen to get home to her grandchildren.

Her GP has referred her directly into the Acute Medical Assessment Unit under the physicians, because he found her to have a temperature of 38.2, heart rate of 115, respiratory rate of 30 and peripheral oxygen saturation of 88 per cent. She has been started on oral antibiotics for a presumed exacerbation of bronchiectasis."

On the day of the competition the teams were given an additional piece of information (a twist in the tale) that meant a change to the treatment and discharge plan. The teams had two minutes to discuss the new information and three minutes to present an updated plan.

After a closely contested match, the winning team was the Ropu Hauora Team consisting of House Officer Emma Kersey, Physiotherapist Erin Hughes and Speech Language Therapist Annaliese Brown. Team mentors were Social Workers Kate Tahauaroa-Watson and Silas Thielmann.



Winners of the Healthcare Team Challenge, the Ropu Hauora team. From left, Student Nurse Michelle Harvey, mentor Kate Tahauaroa-Watson, Physiotherapist Erin Hughes, Speech Language Therapist Annaliese Brown, Pharmacist Brittany Young, House Officer Emma Kersey, mentor Silas Thielmann

Silas says all team members agreed competing was a positive experience and the key advantages were getting to know the roles of the other professions and learning how to work together.

Director of Allied Health Garth Munro says he is keen to explore ways to expand the competition and involve teams from across the South island.

Every year the HCTC relies on the support of a wide range of health professionals who are keen to support teaching and learning in all its forms.

This year acknowledgements and thanks go to:

Facilitation Group – Social Work Team Leaders, Christchurch Campus, Keryn Burroughs, Martin Stuart, Pene Kingsford and Rosemarie Eyres.

Scenario – Physiotherapist Laura McIntosh and Director, Medical Education Unit, University Otago, John Thwaites.

Twist in tale – Pharmacist Barbara Robertshawe.

Consults – Medical; Consultant Anthony Spencer, Cultural; Nga Ratonga Hauora Maori Health, Iranui Stirling, Patient; Social Worker Beth Munro.

Judges panel – Director Allied Health Garth Munro, Clinical Director Dave Jardine, and Transfer of Care Nurse Jane Evans.

More information on the HCTC can be found [here](#).

Appointment of Clinical Director Obstetrics and Gynaecology

Emma Jackson has been appointed to the position of Clinical Director, Obstetrics and Gynaecology.

Emma first started working at Christchurch Women's Hospital in 1997 as a paediatric registrar. She did her Obstetrics and Gynaecology training in centres in New Zealand and the UK and started working permanently as a consultant in 2011.

Her interests are in advanced laparoscopic surgery, obstetric education and registrar training. She is a current committee member of the New Zealand College of Obstetrics and Gynaecology.

Emma is passionate about women's health and says she looks forward to steering the department in a time of exciting changes such as the development of the refreshed Canterbury Maternity Strategy.



Clinical Director, Obstetrics and Gynaecology Emma Jackson

Christchurch Hospital General Manager Pauline Clark says Emma brings enormous wealth of experience to the role.

"I am sure you will join me in wishing her every success in this position."

Kate Sheppard Memorial Trust Award presentation

Canterbury DHB staff are invited to join the Kate Sheppard Memorial Trust (KSMT) Suffrage 125th celebration and charity event on 19 September, Suffrage Day, at Knox Centre Bealey Avenue/Victoria Street.

The evening will start with Ngai Tahu Wahine Toa – Māori Women and Suffrage. Award winning film-maker, producer and director Gaylene Preston will present 'HERSTORY – (Ms)adventures in Filmland'. The event will conclude with refreshments and nibbles.

The charitable evening will augment funds for the annual Kate Sheppard Memorial Trust Award scholarship which is presented to a woman engaged in education, research or a special project that benefits Aotearoa/New Zealand.

The award will be presented by Christchurch Mayor Lianne Dalziel and there is a whisper that the KSMT Award is coming close to home! Let's celebrate!

See notice on page 19 for full details.

Restoring sight most rewarding aspect of career

When Allan Simpson began work as an Ophthalmology registrar at Christchurch Hospital in 1984, the Ophthalmology Ward and Outpatients Department were next to each other on the top floor of the Riverside Block.

"We had the best views in the hospital, out over the Botanic Gardens. However there were blackout curtains across the windows of our two clinics to enhance an even better view – inside the eyes we were looking at through our slit lamps," he says.

A slit lamp is a microscope with a bright light used during an eye exam. It gives an ophthalmologist a closer look at the different structures at the front of the eye and inside the eye.

People who had had cataract extractions were protected from glare by the blackout curtains "but if they chose to peek around them they would have got their first good sight again of the distant Kaikouras," Allan says.

Allan, who was Clinical Director of the Canterbury Eye Service for six years, until July 2016, retires from his role as Consultant Ophthalmologist on Friday. He will continue to work in private practice.

Restoring sight for potentially blind people has been the most rewarding aspect of his career in ophthalmology, he says.

"And in the case of cataracts it wasn't a halfway step back to 'better-than-nothing' sight as used to be the case when I started learning my first few cataract extractions."

These left eyes aphakic (without a lens) and needing very thick 'bottle-top' spectacles to make up the refraction, Allan says.

"It was sight as good as or better than it was before!"

That's because in his first year of training in Christchurch ophthalmologists started to insert intraocular lenses into eyes after they had removed the cataractous ones.



Consultant Ophthalmologist Allan Simpson

Whereas cataract surgery is a curative one-off treatment, with no need to see people more than a couple of times after surgery, chronic glaucoma management goes on for a lifetime, he says.

This meant he got to know people over many visits and many years, "as together we struggled with this enigmatic disease."

He has enjoyed the opportunity to work with colleagues, teach registrars and contribute to providing a comprehensive acute and elective ophthalmic service.

"I have been privileged to gain experience in all sorts of ophthalmic disease and its ramifications for my patients, even if in latter years I have focused on fewer clinical fields as I have deepened grooves of habit and oft-practiced skills."

Canterbury DHB has been very supportive, Allan says.

"I say goodbye to our prefab department and wish our staff and patients good vision as they move into a new outpatient facility soon after I finish."

Health professionals learning about each other in their patients' interests

Canterbury DHB staff recently had in-depth sessions on an innovative approach to improve staff wellbeing, create learning opportunities to ensure a more cohesive experience for the patient, and improve the patient journey through our health systems.

Interprofessional Education (IPE) and Practice involves bringing different health professionals together so they can learn about each other and how to work and communicate more effectively in their patients' interests. The approach is being adopted internationally, particularly in training the next generation of health professionals.

International research on the benefits of IPE being put into practice have found it can reduce errors and improve patient satisfaction; improve patient outcomes, safety and satisfaction; and improve staff wellbeing.

There is a healthy level of collaboration between health and education organisations in Canterbury, and some IPE initiatives happening. The opening of the Manawa building which houses staff and students from Ara, the University of Canterbury and the Canterbury DHB, along with a state-of-the-art simulation centre is further stimulating collaboration between professionals.

To support and grow IPE activities, Te Papa Hauora/ Christchurch Health Precinct last week hosted a series of workshops by international expert Dr Margo Brewer. A number of Canterbury DHB staff attended workshops along with other health professionals, managers, educators and students from across New Zealand. A key part of workshops was getting participants to make plans for implementing IPE in their workplaces.

Canterbury DHB Nurse Manager, Workforce Development Becky Hickmott says she found the workshops excellent and, along with other participants, was inspired and tutored on how to grow and improve IPE initiatives. She encourages anyone who wants to know about how the Canterbury DHB is implementing IPE to email her on rebecca.hickmott@cdhb.health.nz or Neonatologist Maggie Meeks on maggie.meeks@cdhb.health.nz.

Interprofessional events like this are a good example of Valuing

Everyone (mana tangata) at the Canterbury and West Coast DHB. This is a key part of the Care Starts Here programme and encompasses appreciating the different specialities and perspectives of our people. You can find out what else is happening with Care Starts Here on the [intranet](#).



Canterbury DHB staff learn about Interprofessional Education with other health professionals and educators at a Health Precinct workshop



Canterbury health professionals involved in the Health Precinct's Interprofessional Education workshops

Stand up for yourself during Sit Less September

Sit Less September...

stand up, sit less, move more

Tell us what you have done to encourage your colleague/s to sit less this September and be in to win!



E Tu Tatau! Sit less, move more, feel great!

Tama tu, tama ora, tama moe, tame mate | He who stands, lives, he who sleeps, dies

This Māori proverb means activity brings wellbeing and inactivity brings sickness.

Week 1: Just taking every opportunity to stand up more throughout the day can improve your health. Better still, try to do at least 30 minutes a day of moderate to vigorous physical activity a day. He pai ake te iti i te kore (a little is better than nothing).

Standing more throughout the day lowers your blood pressure and reduces your chance of getting Type 2 diabetes, some types of cancer, and heart disease. Standing improves posture and muscle tone, increases blood flow and ramps up metabolism. In other words, sitting less and standing and moving more is great for hauora (health and wellbeing) and will prevent many lifestyle diseases and premature death.

Sit Less September competition

What have you done to encourage your work colleague(s) to STAND UP, SIT LESS AND MOVE MORE this September?

[Be in for the draw to win a spot prize for your workplace!](#)

Get some ideas [here!](#)

Moving a little helps a lot: top tips to reduce sitting time at work

Me whakauru te kori tinana ki roto i ō mahi ia rā (Integrate activity into your everyday work).

- › Take comfortable walking shoes to work.
- › Have standing or walking meetings.
- › Eat your lunch away from your desk and go for walks during your breaks.
- › Try some [computer and desk exercises](#).
- › Walk the long way around to the tea room, to the toilet, to meetings, to the photocopier.
- › Stand up while on the land line and walk around when on your cell phone.
- › Walk to a co-worker's desk instead of emailing or phoning.
- › Stand at the side/back of the room during presentations.
- › Get rid of your personal rubbish and recycle bins. This makes you get up and walk to one!
- › Park the car a little further away from your work so that you get more opportunity to walk.
- › If you are mobility impaired or a wheelchair user consult your health and physical advisor for what would best suit you to increase your physical activity. Join in 'walking' meetings whenever possible.

It's important to find ways to get people who spend many hours a day sitting to add physical activity to their daily routine. Go [here](#) and [here](#) for more information on just how bad sitting is for us. Watch [The Home Office Breakup](#) to help you start breaking up with your chair today!

[Find out more about recommended levels and types of physical activity](#) and [how you can add more activity into your day](#).

One minute with... Michael Wheeler, Project Manager, Site Redevelopment Unit (SRU)

What does your job involve?

I am responsible for seeing construction projects through from feasibility/concept stage to completion as the Canterbury DHB representative on the job. This includes liaison with users, designers, consultants, contractors and so on.

Why did you choose to work in this field?

I spent a lot of time around the central campus with Fletchers as part of the earthquake repairs and other projects and when an opportunity came up with the SRU it was a chance to work somewhere familiar on the client side of the industry as opposed to the main contractor side.

What do you like about it?

I enjoy dealing with people, and in construction there's such a variety in who you meet and this increases when you are in a live environment such as a hospital with so many additional stakeholders to consider. There is also a real sense of achievement in being responsible for seeing a project completed and when it's for the betterment for staff and patients it makes it that much more fulfilling.

What are the challenging bits?

Construction work and hospitals generally are at polar opposites in terms of compatibility, so making sure that the work can proceed with minimal disruption to the functioning of the hospital is a priority.

Who inspires you?

Grant Elliott – 2015 Cricket World Cup semi-final.

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?

Being a project manager, the onus is on me to ensure that the desired outcome is achieved and the hospitals' best interests are met. So taking responsibility for the outcome is a big part of what we do.

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

I was once pick-pocketed by an old lady on the subway in Rome. I chased her down and harangued her until I got my money and wallet back. In hindsight it was a real hoot!

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

This time of year Fiji's a good option – hot, pool, pool bar, no real need to do much but relax.

What do you do on a typical Sunday?

I've got a couple of young boys so the morning is swimming lessons currently. The afternoon will be going somewhere to give them a run – the local domain or the Halswell Quarry are good options. Some backyard sports or sandpit time or a movie (weather dependent) later on. We like to have a nice sit down dinner in the evening before the start of the new week. It works in theory but then often comes unstuck at bedtime for the boys when the wheels come off. Often a Sunday for some reason.

One food I really like is...

Rotisserie. I'll give most things a go cooking them on the BBQ while they're spinning around. My attempts to cook chicken have been hit and miss so have benched that as an option for the time being.

My favourite music is...

Springsteen. How cool is The Boss?

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



Canterbury Grand Round

Friday 7 September 2018 – 12.15pm to 1.15pm with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker 1: Michael Frampton, Chief People Officer
"Reinventing HR: How we're working hard to make it easier to work here"

In our most recent Wellbeing Survey, thousands of people were really clear about what we could do to take away bureaucracy, grow capability and continue to make it easier to work here. This session is an update on where we've got to and what's coming next.

Speaker 2: David Meates, CEO
"The Year Ahead"

Overview of challenges we will collectively be facing as the Canterbury Health System

Chair: Melissa Kerdemelidis

It is requested out of politeness to the speaker(s) that people do not leave halfway through the Grand Rounds. This talk will be uploaded to the staff [intranet](#) within approximately two weeks.

Video Conference set up in:

- > Burwood Meeting Room 2.3b
- > Wakanui Room, Ashburton
- > Administration Building, Hillmorton
- > The Princess Margaret Hospital, Riley Lounge
- > Pegasus Room – **unavailable this week**

All staff and students welcome

Next is – Friday 14 September 2018, Rolleston Lecture Theatre

Convener: Dr R L Spearing – ruth.spearing@cdhb.health.nz

Save the date for the Māia Garden Party – Saturday 17 November 2018

Māia Health Foundation is having a Garden Party in the historic Tea House at Riccarton Park on New Zealand Cup Day. So gather your tribe for a fun day out at the races and help Māia to land the helipad. Why not make it your department's Christmas 'do' or to toast 2018!

Enjoy a leisurely afternoon of on-field entertainment including the 'style stakes' and other *fundraising* activities, or simply kick back on the sweeping Tea House lawn and watch the racing (or people) on the big screen. We have a few surprises up our sleeve too...

Entry includes a complimentary drink on arrival, gourmet lunch and snacks throughout the day, VIP parking at the Tea House venue, on site tote and big screen, and free rein of the Members' areas.

All funds raised will go to one of our key projects – the enhanced, future-proof rooftop helipad at Christchurch Hospital. We're oh-so-close to our \$2M target, with just over \$400,000 still to be raised.

Don't horse around – be in quick! Limited tickets and more information is available [here](#).



Staff Wellbeing Programme: Westpac financial sessions

Westpac will be bringing a series of workshops to our Christchurch sites over the coming weeks as part of Canterbury DHB's Staff Wellbeing Programme. The Christchurch sessions will be run by a number of experienced Westpac staff, including Mobile Mortgage Manager Greg Mander and Financial Advisors Sarah Priddle, Conrad Dry and Robyn Rose.

In September, discussion will be around ways to manage your money.

Topic	Canterbury DHB Site	Date	Day	Time
SEPTEMBER Manage your money	Hillmorton Hospital	20th Sep	Thurs	4-5pm
	Burwood Hospital	21st Sep	Fri	12-1pm
	Oxford Terrace	24th Sep	Mon	5-6pm
	Christchurch campus	25th Sep	Tues	4.30-5.30pm
	Community & Public Health	26th Sep	Wed	12-1pm

How to register:

Please register via the Google forms link [here](#).

For more information on Staff Wellbeing please contact Staff Wellbeing Advisor Lee Tuki, lee.tuki@cdhb.health.nz.

Ara Nursing applications are open

Nursing Postgraduate Study 2019 - HWNZ Funding Applications OPEN

Applications for 2019 Nursing Postgraduate HWNZ Funding opened on 3 September and will close on 19 October at 1500hrs. The link to the application form and further information can be located on the Postgraduate Nursing Website: www.cdhb.health.nz/pgned

Nursing Ara Graduate Course Credit Application Process 2019 OPEN

Applications for 2019 Ara graduate course credits open on 3 September and close 19 October at 1500hrs. The application form and flow diagram outlining the application process can be located on the intranet: <http://cdhb.intranet/corporate/NursingInformation/SitePages/ARA.aspx>

For any queries, please contact Jacinda King Postgraduate Coordinator on Jacinda.King@cdhb.health.nz.

The latest edition of eCALD news is out now

CALD refers to culturally and linguistically diverse groups who are migrants and refugees from Middle Eastern, Latin American, Asian and African (MELAA) backgrounds.

This news edition includes:

- › The Waitemata DHB's eCALD® Education Programme celebrates 2018 Diversity Awards NZ win!
- › eCALD® Research Commentary 22nd Edition focuses on 'Yoga' the third of a four-part series about complementary and alternative healthcare in New Zealand.

Limited spaces! Cross-Cultural Interest Group Session: Suicide Postvention: A Pacific Perspective [25 September 2018]

[Find out more here.](#)





Ngāi Tahu Wahine Toa – Māori Women and Suffrage

Kate Sheppard Memorial Trust Award
Presented by Mayor Lianne Dalziel

Esteemed Film-maker Producer Director
Gaylene Preston presents:
HERSTORY – (Ms)adventures in Filmland

An evening of entertainment, mixing and mingling with refreshments

Wednesday 19 September 2018 – Suffrage 125TH Anniversary

Knox Church, cnr. Bealey Avenue and Victoria Street

6.30pm (seated by 6.15pm please)

Tickets:

KSMT Friends / Unwaged – \$25.00 | Waged – \$45.00
(The full ticket price or donation would be appreciated if you are able,
proceeds go to the Kate Sheppard Memorial Trust Award)

Tickets available through Eventbrite (visit goo.gl/ykQ9vC)
or via bank transfer to J A Sutherland 38-9015-0403380-03

Contact Judith Sutherland 021 031 3705

MAKE A DIFFERENCE



Imagine being able to use your knowledge and skills to improve the health and wellbeing of individuals and make a meaningful contribution in your community. With a Bachelor of Nursing from Ara, this can be your future. And we'll help make it happen - with expert lecturers, extensive clinical placement opportunities and one of the highest employment rates for graduate nurses in New Zealand.

Applications close 3 October -
apply now, start February.

ara.ac.nz/nursing



Community Education Seminar

September 2018

Advance Care Planning

Jane Goodwin, Advance Care Planning Facilitator

Advance Care Planning (ACP) is a way to help you think about, talk about and share your thoughts and wishes for future health care and your last days of life.

Find out more about what ACP is, how it works and why it's a good idea to consider before you become seriously ill or are unable to make decisions for yourself. There will be time for questions.

Everyone welcome, but please ensure you register.

Date: Tuesday 18th September 2018

Time: 10.30am – 12 noon

Venue: Dementia Canterbury
Seminar Room
Unit 3, 49 Sir William Pickering Drive, Burnside

Address: 3/49 Sir William Pickering Drive, Christchurch **Postal Address:** PO Box 20567 Christchurch 8543
Ph: 0800 444 776 **Email:** admin@dementiacanterbury.org.nz **Website:** www.dementiacanterbury.org.nz

WALK FOR THE ONES YOU LOVE

Pink Star Walk

Breast Cancer Foundation NZ

Major Sponsor

ESTÉE LAUDER COMPANIES

Radio Sponsor

THE HITS

10 November 2018
North Hagley Park,
Christchurch

5km, 10km

Sign up at
pinkstarwalk.co.nz

Early bird tickets from

\$35

offer ends 07 Sep.

Be SunSmart

Being SunSmart is about protecting skin and eyes from damaging UV radiation – especially when outdoors from September to April.



Slip on a shirt

Slip on a shirt with long sleeves. Fabrics with a tighter weave and darker colours will give you better protection from the sun.



Slip into the shade

Slip into the shade of an umbrella or a leafy tree. Plan your outdoor activities for early or later in the day when the sun's UV levels are lower.



Slop on sunscreen

Slop on plenty of broad spectrum sunscreen of at least SPF 30. Apply 20 minutes before going outside and reapply every two hours and especially after being in water or sweating.



Slap on a hat

With a wide brim or a cap with flaps. More people are sunburnt on the face and neck than any other part of the body.



Wrap on sunglasses

Choose close fitting, wrap around style sunglasses. Not all sunglasses protect against UV radiation, so always check the label for sun protection rating.



HOW DO YOU RELIEVE THE PRESSURE?

#relievethepressure



**New Zealand
Spinal Trust**

Te Taratihu Manaaki Tuanui

National Appeal
5-12 September 2018

For more details or to make a donation visit

www.relievethepressure.org.nz

World Physiotherapy Day 2018 - September 8:**Theme:** Physical therapy and mental health

Movement is integral to life, health and wellbeing.

Research in the last year continues to confirm that being sedentary is associated with lower mood, that exercise protects against the emergence of depression, and is an effective therapy for a variety of mental health conditions.

Compromised physical capacity and pain can contribute to feelings of not being safe/secure and of not having adequate capacity for the challenges of life, which we may experience as 'anxiety'.

Physiotherapists are movement specialists.

Our therapy strengthens *Taha Tinana* (body) and contributes to the other pillars of wellbeing - *Taha Whanau* (family/social), *Taha Hinengaro* (mental/emotional), and *Taha Wairua* (spiritual) - as in Te Whare Tapa Wha framework (Mason Durie, 1994).

Physiotherapy fundamentally integrates the whole person to optimize wellbeing, and to empower the individual by promoting functional movement, movement awareness, physical activity and exercises.

Physiotherapists listen to and work with you to ensure targets are realistic and achievable, tailor programmes to your needs, adapt the programme as you progress, and support you to achieve your goals.

Find an activity or exercise you enjoy and get moving!

Celebrate Physiotherapy. Celebrate movement. Celebrate life.

For more information see:

<https://www.wcpt.org/wptday-resources> - articles on exercise and mental/physical health

physiotherapy.org.nz – find a Physio and learn more

