



## An upcoming election, public reporting of Official Information Act compliance and Codes of Conduct

Last week the Prime Minister announced the election date of 23 September. Over the coming months we will continue to have a number of visits from Members of Parliament and I expect we will see a further increase in the number of Official Information Act requests received. Please remember that all visits should be coordinated through my office – you can email [chiefexecutive@cdhb.health.nz](mailto:chiefexecutive@cdhb.health.nz) if you have any requests or enquiries about visits.

There is a three-month 'pre-election period' which starts in June. During this three-month period there are certain limitations on some decision-making and advertising campaigns for all government departments and organisations such as ours, which we need to be mindful of.

Last week the Ombudsman released data on government departments' performance in responding to Official Information Act requests and listed the response times for each organisation. We have seen a significant increase in the number of OIAs over the past few years which has put

pressure on our organisation to meet the legal timeframes. As a DHB we are government-funded and are therefore accountable to both the government and the public, and the Official Information Act is an important avenue for interested members of the public to receive information on our performance and activities.

It's also timely to remind you all that in addition to the Canterbury DHB [code of conduct](#), as public servants we are obliged to adhere to the State Services Commission [Code of Conduct](#). Both of these documents are included with your orientation pack when you first start, but as many of us have been working here for a while, it's a good idea to have a read and discuss what it means in practice with your teams. These common-sense standards of integrity and conduct include being fair, impartial, responsible and trustworthy. Many of your professional bodies and colleges also have their own Code of Conduct which provide guidelines specific to your area of clinical practice.

### Progress towards Paperlite

I was thrilled to read about the initiatives underway to reduce the amount of paper we use and waste in the organisation. Each year our Clinical Records department deals with well over a million patient files, two million if you include pathology samples and X-rays.

It's a huge expense to create, maintain and destroy records. Every day almost 2000 files a day are returned from storage to our hospitals. The cost to securely destroy unnecessary paperwork is also a significant cost which could be better spent.

During an audit to find ways to reduce these huge filing costs, staff at Clinical Records identified that 60 per cent of

an average file is unnecessary. Much of the paperwork is duplicated because there is already an electronic version of the record.

I am pleased to report that progress is being made to reduce paper, and costs.

A pilot project with the Department of Anaesthesia will potentially make weekly savings of more than \$12,000 through a simple setting change in Homer for recalling patient files ahead of surgery.

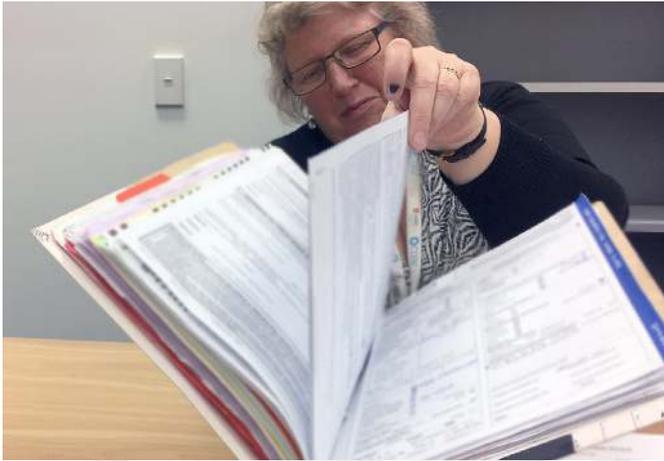
General Surgery is trialling an improvement to their electronic referral system that will include an electronic triage function

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instead of a paper-based one, and in Outpatients there has been a change of practice so that clinicians keep only the most up to date information about the most recent events.

The Clinical Records team recognise that reducing costs comes down to each of us being more thoughtful before

printing a piece of paper or ordering a file. So think twice before hitting the print button and we'll free more resources for patients.

You can read more about the work of Clinical Records and other departments on [page 7](#)

## Sir Mark Solomon appointed Temporary Chair of Canterbury DHB while investigation underway

Last week the Minister of Health, Dr Jonathon Coleman, announced that Canterbury DHB's recently-appointed Deputy Chair would take up the position of Temporary Chair while an investigation takes place. You can read Minister Coleman's announcement [here](#).

Sir Mark is of Ngāi Tahu and Ngāti Kuri descent and was the former Kaiwhakahaere (Chair) of Te Rūnanga o Ngāi Tahu. Sir Mark sits on numerous commercial boards, and has played leadership roles in community, rūnanga, iwi and pan-Māori settings. Sir Mark was appointed Knight Companion of the New Zealand Order of Merit in 2013, for services to Māori and business, and received an honorary Doctorate of Natural Resources from Lincoln University in 2015.

Have a great week.

A handwritten signature in black ink, which appears to be 'D Meates'.

**David Meates**  
CEO Canterbury District Health Board



Waitangi Day celebrations, Okains Bay

# Facilities Fast Facts

## Fast Facts – Christchurch

Painters are busy on all levels of the West Tower. By the end of February all the West Tower concrete pours will be complete. Insulation is going in on Level 2.

Window glazing continues with all the corner pieces up the west tower and the ground floor level in place

On the East Tower, framing is at Level 3 and 4.

All the steel is in place on the West Podium with just the roof structure to put in place.

Although it has been quite windy recently, high winds are not a problem for the tower cranes on site. The cranes are rated to withstand winds of 140 km/hour, but for safety reasons loads are not lifted once wind speeds reach 60 km/hour.

## Fast Facts – Outpatients

Last week a new tower crane was assembled on the Outpatients site. As with the cranes on the Acute Services site, this tower crane will “weathervane” – align with the wind direction – when not in use. The first steel framing for the project is due on site in March. Each of the steel columns will be nearly 20 m in length.





## Bouquets

### **Volunteers, Christchurch Hospital**

How wonderful, friendly and helpful the volunteers at Christchurch Hospital's main entrance are. I came to the hospital in a taxi and the volunteers welcomed me with a friendly smile and offers of help. I walk with a stick and was impressed that they seemed to be able to spot the patients that need a little extra help. When I was leaving they actively tracked down my taxi so I didn't have to walk up and down looking for it. I would like to pass on my sincere thanks and appreciation for all that they do, the people they help, all with friendly smiles. Well done to you all!

### **Ward 23, Christchurch Hospital**

My husband had five nights in Ward 23 over Christmas. We were so impressed by the quality of the care he received. The nurses were skilful, caring and respectful and 'went the extra mile' in their nursing practice. All the staff we encountered were excellent, the consultant, registrars, and other medical staff, nurses, catering staff – everyone. Thank you so much.

### **Park and ride shuttle, Christchurch Hospital**

What a fantastic service you have going with the shuttles backwards and forwards from Deans Avenue. It makes it a lot less stressful, particularly when you are out all day. Well done!

### **Ward 28, Christchurch Hospital**

They are all angels!

### **Angela, Audiology Department, Christchurch Hospital**

Audiology test with Angela on 9th January was amazing. She was awesome with my three year old!

### **Ward 28, Christchurch Hospital**

All doctors, especially Mr Azeer and nurses Tess and Louise, were very, very professional. An honour to be in their care.

### **Richard, Emergency Department, Christchurch Hospital**

Nurse Richard at reception today was wonderful, welcoming, friendly, professional, polite and respectful.

### **Ward 17, Christchurch Hospital**

Many thanks to Ward 17, fantastic nursing staff, hospital aides, cleaners and tea ladies. I recently left Ward 17 and the warmth of support and friendship shown towards me has been amazing. Many thanks to all staff.

### **Day Clinic, Colonoscopy**

Great team. Professional. Great service. Happy with my visit.

### **Wards 15 and 16, Christchurch Hospital**

Thank you for everything. The staff are amazing. You do such great work. Happy New Year and God bless you.

### **Hilary Cleland, Oncology Day Ward, Christchurch Hospital**

Hilary Cleland was wonderful, professional, compassionate, kind, respectful and polite. Thank you.

### **Intensive Care Unit (ICU), Christchurch Hospital**

The care my husband got in ICU from December 15-28 was superb. The staff were also kind and considerate of me. Please thank them.

### **Park and ride shuttle, Christchurch Hospital**

I think the shuttle service is very effective and I would hate to see it stop. The service is great and very convenient.

### **Kathleen Bargent, Radiology**

Kathleen Bargent was wonderful. She was professional, friendly, respectful, kind and polite. Thank you.

### **Ward 14, Christchurch Hospital**

You are very kind and this was the best hospital I ever went to. Thank you.

### **Sarah, Christchurch Hospital**

Sarah W is a wonderful nurse. She is professional, friendly, polite, respectful and kind.

### **Larissa, Ward 15, Christchurch Hospital**

Larissa is very caring and she cares for her patients. I very much appreciate her service.

### **Ward 15 and 16, Christchurch Hospital**

The staff have been absolutely wonderful, especially Danielle, whom I cannot thank enough. All the other staff who nursed me could not do enough and I am very grateful.



**Surgical Assessment and Review Area (SARA) and Ward 16, Christchurch Hospital**

I would like to say a big thanks to all the staff in SARA and Ward 16 for the care I was given. A big thanks needs to go to the lovely Hospital Aide who wears the pink shoes.

**Christchurch Hospital**

Great volunteers. Wonderful nursing staff, Ward 20 and breast care nurses.

**Matthew Strother, Tracey King, Oncology, Christchurch Hospital**

Full marks to Matthew Strother and Tracey King for such caring, excellent professional service. Made a scary situation so much easier.

**Kenneth, Ward 28, Christchurch Hospital**

Kenneth has the most wonderful humble manners.

**Christchurch Hospital**

Fab care, fab treatment. Merry Christmas and thanks.

## Release of Decision Document for Kaikoura Health Te Hā O Te Ora

We are pleased to announce that a new, integrated model of care has been approved for the key Kaikoura Health service providers (Canterbury DHB and Kaikoura Healthcare Ltd) in the new facility. This follows extensive work by the Kaikoura Health Establishment Team (KHET) with the Kaikoura community to define a model of care that will meet the community's needs, and the resulting consultation with parties involved in providing health services.

The Canterbury DHB and Kaikoura Healthcare Ltd have decided to integrate the services within the facility; meaning that staff will be able to work across the facility and provide health services to the community as an integrated team.

We believe this is the first truly integrated service model that combines primary, secondary and tertiary level care along with aged residential care in one facility.

The Consultation Document of August 2016 was the first step in determining the practicalities for the two organisations, Canterbury DHB and Kaikoura Healthcare Ltd, to be able to work in an alliance to deliver an integrated service. The KHET would like to thank all of those who contributed feedback and comments in response to the consultation.

The decision document was due to be released in mid-November 2016, but was delayed owing to the November 2016 earthquakes in North Canterbury, during which Kaikoura Health was integral in providing emergency response to the Kaikoura district. KHET would like to mention that the response of the staff within Canterbury DHB and Kaikoura Healthcare Ltd was incredible and that they were able to provide a unified front, pitching in where needed and ensuring that the right services were delivered to those in the Kaikoura district.

After the declared state of emergency was lifted, the KHET met to ensure that the decision document would still meet the needs of the health services and the community. During this process, KHET agreed that there was a clear benefit of integrated and coordinated clinical resources. This was evident in the joined-up response to the earthquake by all staff within Canterbury DHB and Kaikoura Healthcare Ltd. Their response demonstrated the value of the health providers working as one team to serve the community. Although the quakes delayed the decision document, they provided some valuable lessons that support the intent of the decisions in the released document.

The key decisions made about the Clinical Leadership and Management Structure for Kaikoura Health Te Hā O Te Ora are:

- » The disestablishment of the Practice Manager and Nurse Manager positions
- » The establishment of a Clinical Director, Clinical Governance Group, Kaikoura Health Services Manager, Charge Nurse Manager and Clinical Nurse Specialist
- » The adoption of an integrated logo to represent the Kaikoura Health Te Hā O Te Ora Facility.

The positions of Kaikoura Health Services Manager, Charge Nurse Manager and Clinical Nurse Specialist are being advertised soon.

For more information about the decisions made, a copy of the decision document is available [here](#)

# Disability action plan committee

Our health system just achieved a very significant milestone with the inaugural meeting late last month of the steering group for the Transalpine (Canterbury and West Coast) Health Disability Action Plan, launched in July last year.

The formation of the group is one of the Plan's promised actions.

The committee is primed to provide leadership and expertise for the implementation of the Action Plan. The Action Plan aims to ensure people with disabilities in the Canterbury and West Coast District Health Board areas have the health services they need, when they need them, and feel included in decisions about their health care.

Stella Ward, Executive Sponsor for the Action Plan, says our health systems have been fortunate to have attracted some exceptional members with the right mix of skills, knowledge and connections.

"Our new steering group members have also been chosen for their strong personal networks in the disability sector, to ensure we can develop and maintain an effective dialogue with our disabled communities."

The Chair of the new steering group, Gordon Boxall, thanked Eru Waiti, Māori Health Kaiarahi (team leader) for the mihi that blessed the journey the steering group was about to embark upon, and added mana to the group and its coming task. The final membership of the steering group will include at least one Māori and one Pasifika person.

The process for appointing them is underway but until it has been completed, a temporary Māori member, Ngaire Button, has been appointed.

Gordon Boxall set the scene for this and future meetings as he spoke of the need for frank views to be respectfully expressed and the paramount need for mutual trust.

"I anticipate some robust discussions as we make our way forward, turning the commitment and passion of our members into tangible actions that will benefit people with disabilities and their families/whanau."

The need for excellent communications was reiterated throughout the meeting, and in recognition of that the group will be exploring the best ways of keeping people who work in our Transalpine health system informed of progress, and consulted as needed. A toolbox for engaging with the community will also be developed.

The steering group comprises: Gordon Boxall (Chair), Stella Ward (DHB's executive sponsor), Prudence Walker, Paul Barclay, Kathryn Jones, Haley Nielsen, Ruth Robson, Simon Templeton.

DHB staff members: Allison Nichols-Dunsmuir, George Schwass, Dave Nicholl, Catherine Swan, Kay Boone, Jane Hughes, Susan Wood, Mark Lewis and Mick O'Donnell.

A brief biography that gives some context for each of the members will be uploaded to the staff intranet when it's available.



# Innovative ideas bring huge cost savings

Canterbury District Health Board's Clinical Records department deals with well over a million patient files – two million if you include pathology samples and X-rays.

It costs the organisation a staggering \$750,000 every year to create, maintain and destroy records. Just retrieving and returning nearly 2000 files a day from storage costs \$30,000 a month alone.

During an audit to find ways to reduce these huge filing costs, staff at Clinical Records identified that 60 percent of an average file is unnecessary.

"Much of the paperwork is duplicated because there is already an electronic version of the record," says Health Information Manager Sandra Pugh.

The cost to destroy this unnecessary paperwork comes in at around \$165,000 every year.

"It all adds up quickly and takes money away from direct patient care," she says.

To reduce various labour-intensive and expensive jobs of sorting through files, the department is working with different clinical areas to raise awareness about not automatically printing out forms if the information is stored electronically.

"Creating a paper record creates the potential for someone to write something on it, and then you have to keep it," says Sandra.

"We would encourage people to use electronic records for their notes."

Canterbury DHB has multiple electronic information systems including ERMS (Electronic Request Management System), Patienttrack, eMeds, Scope, Cortex, PACS and Comrad, Titanium and Éclair. ISG staff are available for anyone wanting to set up their computer to ensure the programmes are easy to access and run smoothly.

Line managers are available to mentor staff if they feel they need more training on any programme.

Ideas initiated by Clinical Records are already starting to pay off. A pilot project with the Department of Anaesthesia will potentially make weekly savings of over \$12,000 through a simple setting change in Homer for recalling patient files ahead of surgery.

General Surgery is trialling an improvement to their electronic referral system that will include an electronic triage function instead of a paper-based one, and in Outpatients there has been a change of practice so that clinicians keep only the most up-to-date information about the most recent events.

"Reducing the financial costs of clinical records comes down to each of us being more thoughtful before printing a piece of paper or ordering a file," says Sandra.

"We have the capacity to direct more resources towards patient care if we think twice before pressing the print button, and we'll be doing what's right for our patients."



Just some of the boxes of duplicated paperwork removed from patient files and on the way to being destroyed.

# Surgery closer to home

A bus may not be the usual setting for a hernia repair or colonoscopy but soon the Rangiora Health Hub will become a host site for the mobile surgical bus.

The surgical bus is a purpose-built 20-metre 42-tonne truck that contains a fully equipped operating theatre, and provides low-risk elective day surgery to 23 rural towns throughout New Zealand. It has been on the road since 2002 and has successfully completed over 21,000 operations. A wide range of surgeries have been performed including general surgery, gynaecology, orthopaedics, dental, plastics and endoscopy. The bus helps eliminate unnecessary travel for patients and allows them to be treated in their local community.

The bus started visiting Ashburton in 2012, after the earthquakes closed the operating theatres there, and over the

past four years 330 patients have had their surgery completed in Ashburton. With the opening of new theatre facilities at Ashburton Hospital, Rangiora will instead now host the surgical bus.

The bus has also been operating regularly in Waikari in North Canterbury since 2008, where 350 patients have been treated. Waikari will remain on the regular schedule; the rural nurses from North Canterbury who have been specially trained to work in the theatre will be helping to staff the bus when it visits Rangiora.

**Open Day** – The surgical bus will be open to the public at the Rangiora Health Hub on Tuesday 14th March from 8am to 3pm. Take advantage of this unique opportunity to see inside a one of a kind, fully equipped mobile operating theatre.



# Innovative spinal medicine specialist retires



Angelo Anthony, Senior Medical Specialist at the Burwood Spinal Unit, retired in December last year after over 40 years working in the treatment and rehabilitation of people with spinal cord injuries.

Angelo modified the practices of a specialist urology team at the Burwood Spinal Unit. He improved many of the processes used to treat urinary problems in his patients and pioneered effective home treatment of spinal patients with pressure sores, reducing the number of hospital admissions.

Together with Shirley Smith, a district nurse in Wellington, he established outreach clinics as a pilot scheme in Wellington. Outreach clinics are now a routine part of the spinal service.

Angelo's work in fertility helped to make it possible for patients with spinal cord injuries to become parents.

In 2008 he was made an Officer of the New Zealand Order of Merit for services to medicine, particularly spinal cord injuries.

Angelo was born and trained in Sri Lanka, but moved to New Zealand in early 1971 and worked for the then Taranaki Health Board. He settled in Christchurch in 1974.

Originally a surgical registrar at Christchurch Hospital, he went on to specialise in spinal injuries after meeting Bill Utley, then director of the spinal injuries unit, who persuaded him to take up the speciality.

Dan Coward, General Manager Older Persons Health, Orthopaedics & Rehabilitation Services, says Angelo is highly regarded among patients and staff.

"Considered one of our pioneers in treating patients with a spinal cord impairment, he will be missed by the Burwood Spinal Team.

"At Angelo's recent farewell the stories told all reflected his commitment to his patients and the service. His children spoke of how he would often make a special trip to the Burwood Spinal Unit just to check in on a patient.

"Angelo took the approach that if he didn't know the answer, he would find one. This determined and inquisitive approach helped grow the knowledge base of the service and has improved the care we have been able to provide to patients who come through the spinal service at Burwood Hospital," Dan says.

## Staff Wellbeing Programme: YOGA / ZUMBA / PILATES / HOT HULA / BROGA

### Burwood:

- » Thursday 4.45pm YOGA with Kate, Utley Gym
- » Coming to Burwood: Zumba Gold, YOGA, Hot Hula, BROGA

### ChCh Campus: All in the Great Escape Lounge except Mindfulness, which is held in the Chapel

- » Monday 12.30pm YOGA with Nicole  
4.45pm YOGA with Lisa W (both starting 13th February)
- » Tuesday 5.30pm Zumba with Sarah
- » Wednesday 12pm Mindfulness with John  
12.30pm YOGA (starting 13th February) with Nicole  
1.30pm PILATES with Lisa H

### Community and Public Health:

- » Tuesday and Thursday 7.30am YOGA with Kirstyn

### Diabetes Centre:

- » Coming Wednesday 15th February, 7am YOGA with Kirstyn

### Hillmorton, Oxford Terrace and TPMH: some classes have continued with new classes being confirmed.

For more information please contact Lee Tuki by email [lee.tuki@cdhb.health.nz](mailto:lee.tuki@cdhb.health.nz)

# What we did in the holidays...

Here's proof that we have had some good summer days during December and January.



Thanks for sharing your holiday wellbeing experiences in these photos showing you getting active, giving and connecting.

It's good to see staff making the most of their time off to connect, give, take notice, keep learning or be active with friends and family.

It's so important to recharge your 'wellbeing batteries' over the holidays.



The view from the top makes the walk up Mount Maunganui all worth it for these three



Beautiful day for a walk up Mount Alford, near Methven



Enjoying the Otago Rail Trail



Happy to see the sun in Invercargill



Fun on the swing

# Beware of scammers claiming to work for Spark, asking for personal or account details

This isn't so much a work issue, as a homemade 'public service announcement' to prevent our people getting caught out at home. It does however fit with the Think, Don't Click message which is also about taking care online and with your information.



Please read on for details of the Spark scam:

In recent weeks Police have received a number of reports from people who have been scammed out of significant amounts of money, having been contacted by someone claiming to work for Spark. The scammers say they need to speak to them regarding issues with their Spark account or computer, and that they need account or personal information to resolve the issue – they may for example say your phone will be cut off if you don't make an urgent payment.

Spark say they will never call customers out of the blue to ask for personal details like bank account or credit card information, passwords or internet banking details.

Banks, Immigration New Zealand or Inland Revenue also never email, call or text customers to ask for money to be sent using money transfer services.

If you receive a call from someone asking for your personal information:

- » Hang up
- » If you think you have been targeted by a scam, report it immediately through Consumer Protection's Scamwatch

website at [www.consumerprotection.govt.nz/get-guidance/scams-and-online-safety/scams](http://www.consumerprotection.govt.nz/get-guidance/scams-and-online-safety/scams)

- » Check the Scamwatch website from time to time to find out which scams are currently doing the rounds.

Similar rules apply to requests you might receive by email. Often they will threaten your access to something, such as your internet connection, to try to get a fear inspired knee-jerk reaction from you:

- » Don't reply (you'll just confirm yourself as a potential victim)
- » Don't click on any links they provide
- » Report it to Scamwatch.

Here's an example of something that recently made its way through our security systems – our name makes it look legit, but look at the actual email address it came from and the address for a link that gives no clue as to where you might end up, or why you should go there.



Note, the above is an image capture not a live link, just in case there are curious cats out there who can't keep their paws off the mouse!

## Dementia – The Basics course

For health and other professionals working with people with dementia, here is our [registration form](#) for our next Dementia the Basics course, to be held on Wednesday 12th April 8.30am – 4.00pm.



## Dementia Canterbury - 2017 Community Education Seminars

2017 Community Education Seminars (morning and evening sessions) starting 21st February to be held at 314 Worcester Street, Linwood.

These are free education sessions for families and whanau supporting a person with dementia in the community.

Please read the [pamphlet](#) for further information and contact us to register!

# One minute with... **Jenny Barrett,** **Clinical Records Co-ordinator**

## What does your job involve?

Within Clinical Records I am responsible for overseeing staff on a daily basis, making sure all the desks in the department are covered and covering a desk myself if we are short-staffed. I help staff with problem solving, manage the daily roster and microster, support upper management in any tasks that are required, and train staff when required.

## Why did you choose this field?

I wanted to get back into the workforce after having my last child and a family member advised they were needing casual staff so I applied and went on from there. I started in the Department in 1993 as a clerk and in 2005 took over the position of the Clinical Records Co-ordinator. My experience in the department gave me the opportunity to take over this role with the support of the staff.

## What do you like about your job?

The staff and helping them with their problem-solving. With my experience I can impart my knowledge.

## Any challenging bits?

Making sure that the department is running smoothly and that all desks are covered can be a bit of a challenge. Getting my work done when staff are away and there is no other person to cover the desk.

## 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?

In my role I have some responsibility in the training of new staff and I make sure I impart those values to them.

## Who inspires you?

My husband at the moment who is dealing with terminal cancer. I admire his resilience and stamina in dealing with this.

## The last book I enjoyed was...

Speaking in Bones, by Kathy Reichs. I find her stories very entertaining.

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

London, England. I very much enjoyed my time working in London in the late 70s and early 80s and would love to go back again.

## My ultimate Sunday would involve...

Relaxing at home watching programmes I have recorded or going out with family and friends.

## One food I really like is...

Any Chinese meal.

## My favourite music is...

Varied from rock music to classical.



Above: Jenny Barrett

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)



Our Burwood Hospital family includes this adorable nest of baby swallows photographed by Ina Hillstead outside Ward GG. Patients have enjoyed watching them grow and start flying around.

# Vaccine in pregnancy study

The University of Otago, in collaboration with Christchurch Women's Hospital, is currently recruiting pregnant women for a clinical trial of a new RSV (respiratory syncytial virus) immunisation.

RSV is the virus that causes bronchiolitis in babies and infants, often leading to hospital admission. The vaccine is given to pregnant women during the third trimester to protect their babies from severe RSV infection.

This trial is a multinational study that will determine the efficacy of the vaccine for protecting babies against RSV. We in Christchurch are one of six New Zealand sites taking part in this global trial, now coming into its second year of recruitment.

We are looking to recruit interested, eligible pregnant women, from now until the middle of June. Potential participants will need to be:

- » Due to give birth between 20 March and 11 July 2017
- » Between 18 and 40 years old
- » In good general physical health
- » Singleton pregnancies.

If you are interested in participating, or know someone who is, we are keen to discuss the trial in more detail and answer all your questions.

Please contact Di Leishman, Research Midwife, to arrange a meeting:

Email: [di.leishman@otago.ac.nz](mailto:di.leishman@otago.ac.nz)

Phone: 3644 631

We look forward to meeting you.



## RSV Vaccine in Pregnancy Study

### Does Respiratory Syncytial Virus (RSV) vaccine in pregnancy protect babies against lung disease?

**RSV is the leading cause of lung disease in infants and young children and can be serious.**

**By the age of two, almost all children have been exposed to RSV.**

**RSV illness early in life may also increase the chances of a child developing wheezing and asthma when they are older.**

**This study is to find out whether giving an RSV vaccine during the last trimester of pregnancy will provide protection in new-born babies against RSV disease.**

**Who may be eligible to participate in this RSV Study?**

**Healthy 18-40 year old pregnant women.**

**Interested?**

Contact: Di Leishman Research Midwife  
Ph: 3644 631 Email: [di.leishman@otago.ac.nz](mailto:di.leishman@otago.ac.nz)



Approved by the Central Health and Disability Ethics Committee

Version 2.0, 28 Jan 2016

# Great learning opportunities coming up

## Stepping Up to Leadership – 14th February & 14th March

Leadership is not limited to those with the job title – we can all choose to demonstrate leadership every day. This practical workshop is an opportunity to identify your strengths as a leader, work out how your values determine your behaviour, consider different leadership styles and learn more about best practice for effective leadership.

Enrol here: [Stepping Up to Leadership](#)

## Tikanga Māori – 15th February

For a better understanding of Māori cultural beliefs and practices and why they are important in the health sector enrol in our Tikanga Māori course. Held on the Rehua Marae, it will improve your ability to engage with Māori patients and whanau.

Enrol here: [Tikanga Maori](#)

## Presentation Skills – 1st March

Most of us get nervous when having to speak in front of others, but we can make things easier for ourselves. Presentation Skills focuses on how to make any presentation more effective; how to keep your audience engaged; how to structure and deliver a presentation, and importantly, how to increase your confidence as a presenter.

Enrol here: [Presentation Skills](#)

## Collabor8 – 7th March & 24th May

An introduction to the principles of Lean Thinking, influencing change culture, leadership, patient safety, personality styles & effective communication.

Enrol here: [Collabor8](#)

## Understanding the Treaty of Waitangi in Health – 15th March

Essential learning for all NZ health professionals is our Understanding the Treaty of Waitangi in Health course. It explores the role of this foundation document in our modern Canterbury Health System.

Enrol here: [Understanding the Treaty of Waitangi in Health](#)

## Elev8 – 24th March

This one day programme introduces you to principles of the CDHB Process for Improvement. This is an applied science that emphasises how to make tangible improvements in the things that you do, starting small and then scaling-up. The day covers a combination of expert subject knowledge with improvement methods, the Model for Improvement, drawing on clinical science, systems theory, the human side of change, and measurement.

Enrol here: [Elev8](#)

## Courses already full for this and the following month:

[Interpersonal Dynamics for Leaders](#)

**Enrol now** so you don't miss out on courses coming up in the future.

You will need a healthLearn account to view and enrol on these courses.

Visit [www.healthlearn.ac.nz](http://www.healthlearn.ac.nz) to create an account.

For enquires please contact the Learning and Development team,

Phone: 03 337 7807 or Email: [learninganddevelopment@cdhb.health.nz](mailto:learninganddevelopment@cdhb.health.nz)



# Recruitment

## Pharmacist (Rotational)

Permanent/Full Time position

Join the most progressive and innovative pharmacy team in the country.

Canterbury District Health Board has an excellent reputation for supporting and developing clinical pharmacists. This position has plenty of challenging opportunities and innovation is encouraged by peers, senior staff and management. The department provides regular continuing education and numerous other training opportunities.

The clinical pharmacist role is highly varied and encompasses rotations through various clinical areas across the Canterbury DHB hospital sites in Christchurch. Responsibilities include clinical interventions, medicines reconciliation, patient counselling, dispensing and aseptic production.

You must be a qualified and New Zealand registered pharmacist, with some hospital experience. Well-developed communication, time-management and computer skills are essential.

We are looking for someone who works well in a multi-disciplinary team and is flexible and motivated.

For further information, look at the position description on [www.cdhb.careercentre.net.nz](http://www.cdhb.careercentre.net.nz) or contact Paul Barrett, the pharmacy manager on 03 064 0840 or at [paul.barrett@cdhb.health.nz](mailto:paul.barrett@cdhb.health.nz).

Applications are only accepted online so please click the "Apply Now" button below to send us your CV and covering letter today.

**Location:** Christchurch

**Closing Date:** Tuesday, 7 February 2017

## Pharmacy Technician (Rotational)

Permanent/Full Time position

We are looking out for a Pharmacy Technician who can share our *script 4 change* vision to incorporate technicians into the provision of ward based services at our main public hospital and with potential rotation across all the Christchurch metropolitan hospital sites.

You'll preferably have a background in hospital pharmacy. Prior work in aseptics and/or clinical trial work would be an advantage.

You'll participate in medicines supply activities, such as dispensing and aseptic production and support the clinical pharmacy teams by assisting in the medicines reconciliation process, medication card preparation and patient medication counselling in our further development of the rotational technician role.

Although the position will mainly require you to work normal pharmacy hours (Mon-Fri 0800-1630), there will be a need to be available for rostered duties at weekends and on statutory holidays.

You'll need to be a flexible, enthusiastic person, able to work well in a multi-disciplinary team environment, and able to relate well to patients, carers and colleagues. Well-developed time management and computer literacy skills will be essential.

You must already hold the New Zealand Certificate in Pharmacy (Technician).



**CARE AROUND THE CLOCK**  
Make your GP team your first call 24/7.

Canterbury District Health Board  
Te Pori Hauora o Waitaha

The advertisement features a woman sitting in a pink armchair, holding a baby and talking on a mobile phone. A clock on the wall shows the time as approximately 10:10. The background is dark blue with a crescent moon and stars.



Christchurch Campus Quality & Patient Safety Team

## Invitation to all staff

# QUALITY & PATIENT SAFETY PRESENTATION

**TOPIC:** Working Together to End Preventable Harm -  
The John Hopkins Journey

**Dr Peter Pronovost**

*(Video Presentation Repeat of the October 2016 Rolleston Lecture  
Theatre session)*

[Peter Pronovost, M.D., Ph.D., FCCM](#), is the director of the Armstrong Institute for Patient Safety and Quality at Johns Hopkins, as well as Johns Hopkins Medicine's senior vice president for patient safety and quality.

One of the world's leading authorities on patient safety, Dr Pronovost developed a scientifically proven method for reducing the deadly infections associated with central line catheters. His simple but effective checklist protocol virtually eliminated such infections in ICUs across the state of Michigan, saving 1,500 lives and \$100 million annually. The checklist protocol has since been implemented across the United States, state by state, and in several other countries. The New Yorker magazine says that Pronovost's "work has already saved more lives than that of any laboratory scientist in the past decade."

Venue: **Parent Education Room (CWH)**

Date: **Thursday 9<sup>th</sup> Feb 2017**

Time: **1pm to approx. 2pm**

*An attendance record sheet will be provided.  
A link to the presentation can also be provided  
Please contact [Shona.MacMillan@cdhb.health.nz](mailto:Shona.MacMillan@cdhb.health.nz), Quality Manager*