CEO UPDATE
Monday 2 October 2017

Canterbury District Health Board
Te Poari Hauora ō Waitaha

Collaboration between Canterbury and West Coast DHBs making it better on both sides of the Alps

As part of my role as Chief Executive of Canterbury and West Coast DHBs I spend time on both sides of the alps. I was on the West Coast for a couple of days last week. On Thursday I had a series of meetings in Westport with staff and stakeholders. On Friday I had the pleasure of attending a health-system planning workshop in Greymouth followed by a Board meeting. It was a full, stimulating and rewarding couple of days.

It's been eight years since the West Coast and Canterbury DHBs began sharing a CEO and other senior staff. Last week I was reflecting on just how far we've come on a number of fronts. One of the little-known secrets of the Coast is that when you're under pressure to recruit and retain staff and frequently working as part of a very small team, you learn a diverse range of skills and Kiwi ingenuity and innovation is very much to the fore. Coasters are adept at problem-solving with the limited resources available to them.

The Coast is leading the way with a number of inventive solutions which ensure the 995 DHB staff continue to meet the needs of their community.

The Coast was one of the first DHBs to embrace Telehealth where a specialist in Canterbury can provide real-time advice to staff and patients on the Coast. Telehealth has already saved patients 14,165km [220 hours] in travelling across the Coast. The Telehealth concept is set for expansion, with community-based staff who work in people's homes able to have a video consult with a specialist on their phone while out in the field. A second expert set of eyes on a wound, or injury means faster diagnosis.

Waiting times to see a general practice team have reduced, the Greymouth practice has recently extended its hours and a patient portal has been implemented in Greymouth and Reefton.

A new endoscopy nurse coordination role helps ensure timely care and we've managed to reduce Did Not Attends and cancellations. West Coast is frequently in the top three DHBs when it comes to achieving the endoscopy targets. The Coast does well with Oral Health, with a rate of decayed, missing or filled teeth lower than the national average, and 93 percent of children are enrolled in school dental services.

As the only true rural DHB in New Zealand, the Coast has developed the RUFUS (Rurally Focused Urban Specialist) role. This role spans Paediatrics, Oncology, Older Persons Health, Palliative care and many more and provides vital oversight of/treatment and care to people in a range of settings including primary care, community and hospital.

We also have a number of Rural Health Generalists who work across primary care and in a hospital setting. Our PRIME [Primary Response In a Medical Emergency]-trained nurses provide vital care on the spot to stabilise and in the all-

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important golden hour after an accident. The Coast also has its first Nurse Practitioner that works across both primary care and the emergency department. The first Registered Nurse Prescriber has been endorsed by the Nursing Council with seven more on the pathway.

In allied health, West Coast DHB is the first to have pharmacy interns that support both the hospital and community pharmacists. Our first arrived in 2009 and since then we've had stable staffing with many opting to stay on and enjoy the benefits of living in on the Coast. This joint primary/secondary model has also been extended to dietitians, where secondary and primary dieticians work as a single team, and we are looking at other allied health opportunities.

On the back of a long history of strong clinical partnerships for the delivery of care between Canterbury and the Coast, our focus in recent years has been about broadening and deepening collaboration to include a range of support services. There are real benefits to both health systems from the partnerships that have now been built in Planning and Funding, Finance and Corporate Services, People and Capability, Information Services, and Communications to name just a few. One small example of this benefit was the way in which the external health and safety systems audits on the Coast and in Canterbury identified that there are things done well on the Coast that Canterbury could benefit from implementing and vice-versa.

West Coast has the smallest population of any DHB in New Zealand [0.7 percent of the total New Zealand population] with 32,600 people. What makes it extra special is that those people live in a geographically dispersed area. Driving from the top to bottom of the West Coast DHB catchment area is the same as driving from Palmerston North to Auckland. It stretches from South Westland where we have a population of 8790 people, from Haast to Hokitika, 13,500 in the Grey district and 10,230 in Buller (Reefton, Westport, Ngakawau and Karamea).

A huge thanks to the growing number of Canterbury-based staff who provide care to Coasters, and to those of you who have a role in supporting the people providing care – you are helping make a positive difference for our Transalpine neighbours and in the process picking up some great ideas we can adopt in Canterbury.

Have a great week,

David Meates
CEO Canterbury District Health Board

Facilities Fast Facts

Acute Services Building (ASB)

The remaining red and white tower crane on the Acute Services Building is nearing the end of its work here. Plans are being drawn up for the safe dismantling of the crane towards the end of October. Last week it successfully completed one of the last pieces of heavy lifting, pulling large air conditioning "cooling towers" up to the roof.

Elsewhere on the site, the lift installations are ongoing and the western tower is now fully closed-in, with the last pieces of "curtain wall" glazing now in place.

A large "cooling tower" being lifted up to the roof of the Acute Services building

Christchurch Outpatients

All the large green columns that form the frame of the Outpatients building are now filled with concrete, the roof steel is nearly all complete and the entrance canopy work has begun.

Like the ASB, the Outpatients building also has a glazed 'curtain wall' now being installed. The record number of panels installed in a day stands at 17 (last Tuesday).

Some of the glazing is quite transparent, whereas some is darker and less easy to see through from the street. This is because some areas, for example clinical consulting areas, require more privacy, whereas for areas such as office and administration spaces this requirement is less important. Being able to see inside also gives the building internal 'life' and makes it more reassuring and welcoming for the public.

Progress on the Outpatients glazing

Bouquets

Bone Shop, Radiology, and Ward 20, Christchurch Hospital
I was admitted with what turned out to be calaneul fracture (heel bone), which was incredibly painful. I had some trepidation about being admitted to Christchurch Hospital as the image that I get via media of the hospital is of a place in crisis with poor service to patients from dispirited staff. What I received from the hospital system was outstanding treatment from a wide range of people who are specialists in, and proud of, their work. People like the orthopaedic registrar on admittance; the staff of the Bone Shop; the nursing staff in Ward 20, who were outstanding; the doctors; right through to food service staff. The guy who served on the breakfast shift has the manners and grace to work in a top end restaurant. Thanks for a job well done and much appreciated

Stroke Ward, Christchurch Hospital
To the wonderful team. You saved my life. Mary, Andrea, Roshna, to you all, you are my angels. I'll never forget.

Ward B1, Burwood Hospital
A big thanks to you and all the wonderful staff in Ward B1 for taking such wonderful care of my father. He has enjoyed his time there. All the staff there are so wonderful, caring and kind and we appreciate all you have done for him whilst he's been in your care. We could not have asked for anything better.

Ward 11, Christchurch Hospital
Thank you Christchurch Hospital for your care and attention in my time of need. Absolute best service, it helped me to be able to concentrate on getting better. Thank you.

Burwood Hospital
Wonderful treatment, thanks.

Emergency Department and Child Acute Assessment Unit (CAAU), Christchurch Hospital
We had to bring our two-year-old daughter into the Emergency Department twice with the second time ending in the CAAU. The staff were amazing in both areas – taking care to listen to us and trying to help us to care for and rehydrate our daughter. Everyone was so empathic and kind – particularly RN Sally on triage, Dr Frances and RN Kate and student nurse Brooke in CAAU. We felt reassured and in good hands. Excellent work by Canterbury DHB!

Level 1 admission, Christchurch Women's Hospital, Ward 11, and cleaners, Christchurch Hospital
My daughter had eye surgery on Friday… Her admission by the attending nurse was excellent, very caring and she explained things in detail. The nurse in recovery was also very pleasant when ringing to let me know my daughter was awake and well. Nurses/reception, and I think it was the nurse ward manager, were great. In Ward 11... caring and pleasant nurses, the cleaners were lovely too, very polite and diligent. Thank you.

Ward 16 and Surgical and Assessment and Review Area, Christchurch Hospital
We wish to commend the entire team at Christchurch Hospital for the incredible care and compassion we have witnessed, and continue to witness, of our dear mum, sister, and mum-in-law. Thank you for all you do to make lives of patients so much better as they recover from surgery and illness.

Radiology, Burwood Hospital
Marvellous service.

Radiology, Burwood Hospital
Wonderful reception and staff. Great communication.

Radiology, Burwood Hospital
Very, very good and friendly. Thanks so much.

Ward 19, Christchurch Hospital
Just the most amazing, friendly bunch of ladies. Couldn't ask for a better bunch of better people.

Christchurch Hospital
Pre-admission staff and doctors excellent and so very polite and courteous. Thank you.

Radiology, Burwood Hospital
Excellent service. Thank you.

Grace, Radiology, Burwood Hospital
Student radiographer, Grace, was lovely. Very helpful and professional.

Maxillofacial Clinic, Christchurch Hospital
I couldn't be happier with the care and attention shown by Jamie and team. I am very happy with the care shown to me and the work done. Very efficient and thorough. I will be more than happy to recommend this department and Christchurch Hospital to others. Excellent. Thank you so much for helping me and putting me on the right track.

Richard Morton, Mobility Services
Richard from Mobility Services has managed to locate one of our patient transport wheelchairs in the community and returned it to us. It had been missing for at least a month. Thanks. (From Acting Charge Nurse Manager, Orthopaedic Outpatients Department, Liz Wyllie.)

Ward 17, Christchurch Hospital
I would like to acknowledge the wonderful care my husband has had. Over the last three weeks he has been here twice. The staff are lovely and nothing was a problem. Thanking you.

Day of Surgery Admission (DOSA) and DOSA aftercare, Christchurch Women's Hospital
We wish to thank the staff for their excellent care before and after surgery. In particular nurses Vicki (before surgery), and Claire and Jess after surgery. They are model nurses and convinced me that there are still lovely and decent people out there. Keep up the good work. You have no idea what it means to patients to have such wonderful people available at such a time.

The Parking Spot

Christchurch Hospital staff shuttle - timetable change and update

The 12-week trial of the staff shuttle between the Deans Avenue car park and Christchurch Hospital came to an end last Friday.

We have been reviewing the data and timetable to determine if it is feasible to continue to run this free staff service.

Over time the number of staff using the service has gradually increased from around 200 per week to 538 passenger trips, equivalent to 50 staff per day using the service.

On this basis we have determined that we should continue to offer the service, but that we should reduce the number of buses and provide a more condensed timetable that enables staff to be in the hospital for the start of shifts, be they on the hour or half hour.

Therefore from Monday 2 October a new timetable will be trialled for a few more weeks:

Deans Avenue to Christchurch Hospital	Christchurch Hospital to Deans Avenue
0615	1515
0645	1545
0715	1615
0730	1645
0745	1715
0815	
0845	

Please continue to direct any feedback to Rachel.Cadle@cdhb.health.nz

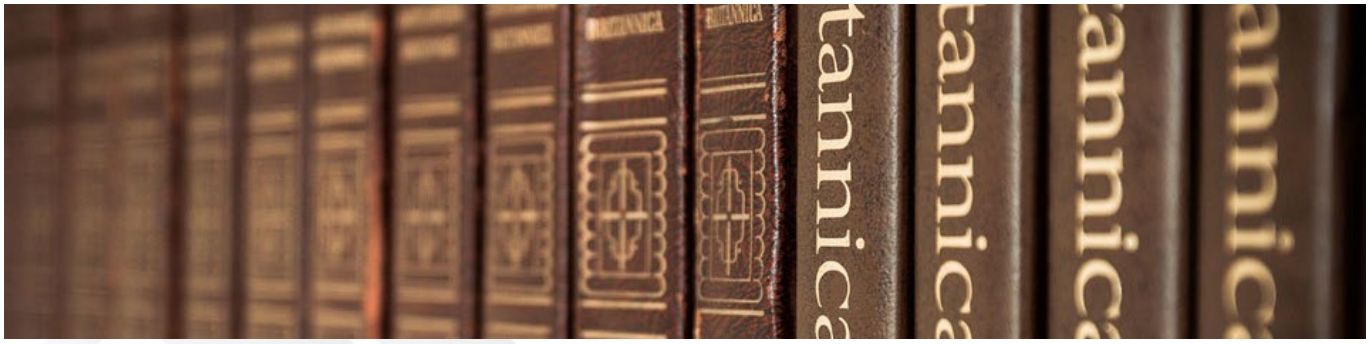
Cycling – the miracle cure

A recent article from the UK's Guardian newspaper has caught our eye: "Imagine if a team of scientists devised a drug which massively reduced people's chances of developing cancer or heart disease, cutting their overall likelihood of dying early by 40%. This would be front page news worldwide, a Nobel prize as good as in the post.

"That drug is already here, albeit administered in a slightly different way: it's called cycling to work."

To read the rest of the article, click here: www.theguardian.com/environment/bike-blog/2017/sep/17/the-miracle-pill-how-cycling-could-save-the-nhs

With Biketober underway across Christchurch (see page 16) and new data just in from the city council that shows a significant uptick in the numbers of people giving cycling a go (www.ccc.govt.nz/news-and-events/newsline/show/2068) perhaps it's time to give your (t)rusty bike a spring clean.



The Library

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

» "One Last Visit to See My Patient" – a doctor reflects on saying goodbye to their patient of 20 years and the difference early palliative care made to their final 18 months. From *The New York Times*, published online: 21 September 2017.

» "Hidden Steroids" – a University of Otago study found one in 20 sports supplements examined contained anabolic steroids, which many did not disclose on their labels. The sample of 116 randomly selected supplements covered protein powders, fat metabolisers and creatine formulations. From *Radio New Zealand*, published online: 27 September 2017.

» "The Pathway to Patient Data Ownership and Better Health" – enabling access to personal health data, clinical or patient-generated, may benefit patients and health care professionals. Research is beginning to show that providing patients with their complete health data may help improve their health. From *JAMA*, published online: 25 September 2017.

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

Change of Clinical Director Gastroenterology Service

James Falvey is the new clinical director (CD) for the Gastroenterology service at Christchurch Hospital and starts the role today.

James began working at Christchurch Hospital in July 2010. He received his medical degree from the University of Edinburgh. His training in gastroenterology was undertaken in Tauranga, Bristol, Cheltenham, and Bath. He also has a PhD from the University of Otago.

James says he sees the role as an opportunity to advocate for, and build, sustainable gastroenterology services for Canterbury.

There are a number of challenges ahead including facilities redevelopment and the introduction of bowel cancer screening.

"We have an extremely capable group of gastroenterologists, clinical nurse specialists and nursing staff in the department, as well as a strong relationship with our colleagues in the department of surgery.

"I'm looking forward to harnessing the knowledge and skills of all of these people in order to improve the service we provide."

General Manager, Christchurch Hospital, Pauline Clark, says she would like to congratulate James and also thank the outgoing CD, Michael Burt, for his leadership and commitment to the role over the last eight years.

Winning ways in working together

There might have been a lot of laughs and quirky speech bubble props at this year's Healthcare Team Challenge (HCTC), but the message was serious - how does an interprofessional team work together to provide the best care for a patient with complex needs.

This year the teams were presented with a seven-year-old patient transitioning from paediatrics at Christchurch Hospital back home and into school. But as always there was a twist... her sister had an outbreak of chickenpox!

The HCTC is a fun and authentic learning experience for students and newly graduated practitioners to develop their knowledge of the roles of other disciplines, increase understanding of how interprofessional practice contributes to patient care and enhance attitudes and skills in effective team work. Teams have a month to work together to provide a health and management plan for the patient that shows insight of Canterbury's integrated health system.

The adjudicators, Chief of Service Medical, Burwood, Helen Skinner, Nursing Director, Nicky Topp, and Director of Allied Health, Garth Munro, had a tough job judging between this year's two teams: the Holistic Health Heroes and the Collaborative Crusaders.

Declaring the Holistic Health Heroes the winning team, the judges said the team had made real effort to include the patient and family as part of the care team, and ensured that educating all parties was important.

"There was a nice synergy of both the inpatient perspective and the community integration that would be needed post-discharge," says Garth.

Chair of the HCTC Committee, Julie Grenfell, said both teams should be highly commended for the huge commitment of their personal time to present the event.

Haven Gardiner-Gray (student social worker) and Rachel Allan (social worker, Ward 20) used speech bubbles as visual aids for their challenge

"Both were very credible presentations and would have been hard to judge."

The winning team members are: Mentor, Xanthe O'Carrol, Nurse, Vicki McIver, and her daughter playing the role of Jessica, Dietitian, Nicola Hacon, House Officer, Kennedy Sarich, Social Worker, Beth Munro, Physiotherapist, Sara Horner, and Intern Pharmacist, Holly Boyle.

They were awarded the inaugural Canterbury DHB shield. The team has the opportunity to attend the national team challenge in September 2018 in Auckland to defend the National Interprofessional HCTC title, which was won by Canterbury last year.

The Holistic Health Heroes with the first ever Healthcare Team Challenge Trophy. From left, Mentor, Xanthe O'Carrol, Nurse, Vicki McIver, and her daughter who was playing the role of Jessica, Dietitian, Nicola Hacon, House Officer, Kennedy Sarich (holding the inaugural Canterbury DHB shield), Social Worker, Beth Munro, Physiotherapist, Sara Horner, and Intern Pharmacist, Holly Boyle

Shared workspaces in the new Outpatients building

What will the new Outpatients building be like to work in?

Over the coming months ahead of our move into the building, the DHB will share information and answer any questions you might have about the facilities that you will be working in.

The new Outpatients building will definitely be well planned and designed, efficient and welcoming for staff and for patients. It will be a huge improvement on our current facilities. Some of our services have been operating out of undesirable accommodation for many years – the Eye Department's portacoms, for example.

Will we all fit in?

A process of "building sizing" has been done by the Christchurch Outpatients and Ambulatory Services Team (COAST). The team knows that all the different services will fit in to the new Outpatients based on the information received at the time the planning started. Some services have grown and changed their models of care over the past 18 months, so the COAST team is now working through a process with those services to make the space and the demand work. Some areas may be asked to look at "smoothing out" of clinics across the week – ie, clinics may need to run on more weekdays than at present.

Will I have my own workspace?

In most cases, services will have their workspace areas allocated, although many clinic, administration and meeting room spaces will also be shared. A shared workspace model may be different to what you are used to. Shared workspaces are already well established at Burwood Hospital and at the corporate office.

The Outpatients floorplans are on the intranet.

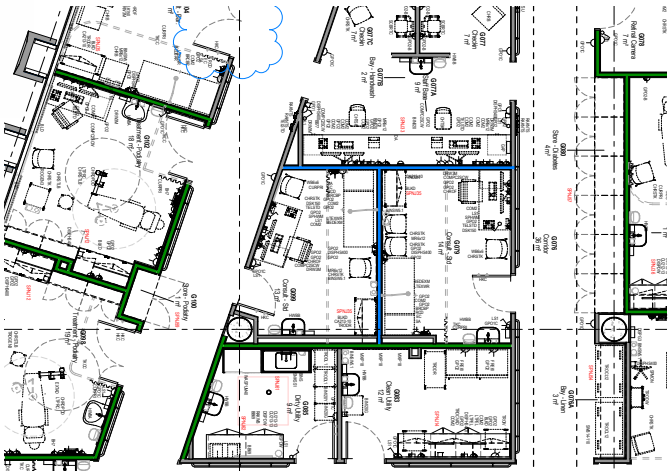
If we don't like it, can we change it?

The time for changes to our room designs and layouts is now past. The physical internal fabric of the building – the walls, doors and corridors – are now, literally, set in concrete. The same is true of the building's support systems – the air conditioning, lighting, electrical sockets and data ports. Furniture layouts shown on the floorplans are not 100 percent set but largely depend on the above. Furniture types on the floorplans are indicative as we await the outcome of the procurement process.

Will we be taking our current furniture with us?

The DHB has a policy of reusing and repurposing old furniture wherever possible. It is likely that most services moving into the new building will take at least some, if not most of their current equipment and furniture with them. This is what happened at the corporate office.

Over the coming month on this page we will share further thoughts on working in an open plan environment – which already occurs at Burwood Hospital and in the corporate office.



Outpatients floorplans are available on the intranet

Destination Outpatients Workshop 3 – Patient Status at a Glance

12 October 2017; 8:30am – 1:00pm; Design Lab, Print Place

The objective of this workshop is to define tools for workflow in the Outpatient setting. This will include Patient Information Care Systems (PICS) readiness assessment, kiosks and scheduling tools. The group will be split into two work streams: Admin (business rules, expectations) and Clinical (communication tools to support workflow with presentations of FloView, dashboards, Vocera and Health Connect South initiatives and then discussion on defining tools required to support outpatient workflow).

If you are interested in attending this workshop and haven't yet sent an RSVP, please email Yvonne.williams@cdhb.health.nz

If you have any questions about shared workspaces in the Outpatients building, please drop us a line at destination.outpatients@cdhb.health.nz and one of the team will respond.

Fashion crimes abound at Burwood for a good cause

Loud and proud in their best, bright, beach attire, staff at Burwood unleashed the guilty pleasures from their wardrobes to promote Loud Shirt Day last week.

The annual fundraising day is dedicated to raising money for deaf children with cochlear implant or hearing aids. Donation boxes were dotted around Burwood Hospital and a photo booth was set up in the atrium from Thursday 28 September to Sunday 1 October.

Staff competed for the loudest shirt with the winner to be announced this week.

A collection of Burwood staff at the photo booth and around the hospital in their loudest attire

Clinical Board September update

The Health of Older Persons and Falls Prevention were the key presentations to the last Clinical Board meeting.

Ginny Brailsford, Chair of Older Persons Workstream, and Ken Stewart, Clinical Lead, Falls Prevention, presented to August's meeting of the Canterbury DHB Clinical Board.

Ken recently returned from Norway where he was invited to speak on "Developing a Nationwide Falls and Fragility Fracture Prevention Outcomes Framework – a New Zealand Experience".

Community falls prevention in Canterbury has reduced the number of fall injuries, the number of presentations to Emergency Department, the number of occupied bed days, and an increased 180 day post-fall rate has been reported.

Director of Nursing, Older Persons Health and Rehabilitation, Diana Gunn, says one of many interesting facts to emerge from Ginny Brailsford's presentation was Ara research that shows 81 percent of people over 65 have access to the internet, and that their preferred first access for health information is the general practitioner, followed by online, and then the pharmacist.

Her presentation also noted the areas identified by the Ministry of Health Older Persons Health Strategy:

- Ageing well – in your own home
- Reducing social isolation
- Access to health information
- Acute and restorative care
- Living well with long term conditions
- Support for people with high and complex needs
- Respectful end of life – advanced care planning and end of life care.

In addition, the Clinical Board heard from GP Tearlach MacLean on the matter of clinical governance, as the board takes stock of its processes and its role going forward.

Bic Runga fundraising for Māia Health Foundation

Bic Runga is marking the 20th anniversary of her debut album *Drive* with a New Zealand tour, hitting Christchurch on Friday 20 October.

Generous as always, Bic will be donating $5 from every ticket sold for her Christchurch concert to the Māia Health Foundation, for which she is an Ambassador.

Bic will perform *Drive* in its entirety, as well as other favourites from across her recording career.

With Bic recently presented the Legacy Award at the 51st New Zealand Music Awards and having won 'Best Female Vocalist four times, this concert is not to be missed.

"It is such a privilege and pleasure for Māia Health Foundation to be able to work with Bic and to celebrate this concert with her," says Māia Chief Executive Michael Flatman.

Māia Health Foundation, Bic Runga. Photo credit: Tali Rose

Every donation big and small helps Māia Health Foundation in its bid to raise $5.2m for enhancements to the helipad and the children's facilities at the Christchurch Hospital.

The concert will be held Friday October 20 at Isaac Theatre Royal. Tickets are on sale now from bicrunga.com

Success at annual Hospital Pharmacy Conference

Three Christchurch Hospital Pharmacy staff received awards at the recent New Zealand Hospital Pharmacists Association Conference.

The conference was held at Waitemata DHB in Auckland from 22-24 September.

“We were pleased that three of our pharmacy staff presenting at the conference received awards, out of the total of 11 available nationally,” says Pharmacy Manager, Paul Barrett.

They were:

» **Ev Tolerton** (Pharmacist) for the best overall poster, describing a novel unfractionated heparin (blood thinning) infusion dose calculator.

Unfractionated heparin infusions at Canterbury DHB are based on a paper chart which provides guidance for loading and maintenance doses. They aren’t prescribed often, so there is a lack of familiarity among hospital staff. This increases both the potential for errors, and the likelihood of these errors not being recognised. The cardiology/respiratory pharmacy team created an Excel-based calculator to determine future dosing. The calculator is designed to be used by all hospital staff involved in the prescribing, administration or monitoring of unfractionated heparin infusions, and aims to decrease the risk of dose miscalculations. The calculator is available via Hospital HealthPathways as well as the pharmacy intranet page.

» **Esther Kostan** (Pharmacist) for the best poster presentation in her category of medication safety/innovation, describing pharmacy involvement in the development of a ketogenic dietary therapy service. (Acknowledgement to Louise McDermott and Charlene Tan-Smith.)

The Ketogenic Dietary Therapy Service was put in place at Christchurch Hospital just over a year ago for the treatment of seizures not controlled by medication. The service is led by dietitian Charlene Tan-Smith and paediatric neurologists, and involves a ketogenic/epilepsy nurse and pharmacists. The pharmacists work within the team to contribute in various ways, including advising on the carbohydrate content of medicines, suggesting suitable alternative forms of medicines and clarifying medicines enquiries. This multi-disciplinary and collaborative approach to deliver patient centred-care increases the success of this service.

» **Holly Boyle** (Pharmacy Intern) for the best paper presentation by an Intern, based on an audit of Canterbury DHB’s use of the antibiotic Piperacillin/Tazobactam. (Acknowledgement to Jane Vella- Brincat, Paul Chin, Sarah Metcalf, Sharon Gardiner and the Infectious Diseases Team.)

Holly found that, despite a three-fold increase in the volume of use of this antibiotic over the past five years, 89 percent of prescribing in the last year was within national formulary restrictions.

From left, Pharmacy Intern, Holly Boyle, and Pharmacists, Ev Tolerton and Esther Kostan

Occupational Health Review – Interim Findings

A huge thanks to the more than 1,400 staff who completed the Occupational Health Survey in August.

The results are helping Canterbury DHB gain a better understanding of how staff feel about their health, the impact of work on their health, how they currently get support to stay well, and how any long-term health or disability needs are supported at work.

While the survey is still being analysed, a number of clear themes have emerged:

Most staff believe they have good health

» Most staff rate their own health as excellent (28 percent) or good (51 percent), while approximately 20 percent of staff describe their own health as average or poor.

» Over 95 percent of respondents are enrolled with a General Practice team, indicating the vast majority of staff are able to access primary care to support their health close to home.

More could be done to support staff with long-term conditions, impairments and disabilities

» 36 percent of respondents indicated they have one or more long term condition (LTC). Of these, most respondents (74 percent) agreed it is well managed and they do not have any needs arising from their condition at work.

» 7 percent of respondents indicated they have a long-standing impairment or disability.

» Staff with long-term conditions or disabilities or impairments are experiencing some challenges having their needs for adjustments at work identified, acknowledged, and adequately responded to.

There is an opportunity to support staff to better understand what the Occupational Health Service could provide and how it can be accessed

» The majority (61 percent of respondents) were not confident they understood what the Occupational Health Service provides and how it could be accessed.

» There were high levels of awareness of support services available, with 87 percent of staff were aware of Employee Assistance Programme and 78 percent aware of the Staff Wellbeing Programme.

Next steps

In-depth interviews with individuals that volunteered as part of the survey process are currently being organised to better understand what has been discovered through the survey, and gain further feedback, which will guide the Steering Group in determining next steps for the Review.

It is expected that the findings from the Review process will be released in early 2018.

Showcasing our energy achievements

In 2016 our energy team at Canterbury DHB earned a Bronze Enviro-Mark Award for leading the DHB's commitment to efficient energy management. The award is administered by New Zealand's leading environmental certification authority, Enviro-Mark Solutions, a subsidiary of Landcare Research.

To achieve Energy-Mark Bronze certification, an organisation has to demonstrate significant commitment to achieving performance improvements, including the implementation of an energy management system, objectives and targets, and the consideration of energy performance in long-term planning.

Tim Emson, our Energy Manager, is now aiming for a Silver Enviro-Mark Award. Part of this involves more regular communication with staff and the public about our energy use.

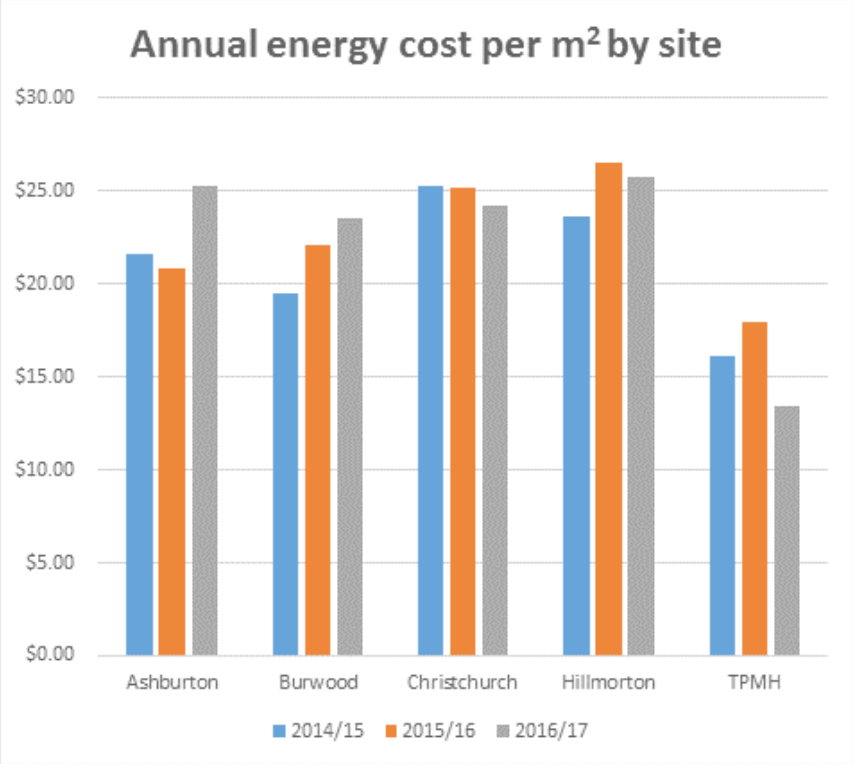
To begin this process, the graph below shows how our energy costs are currently tracking per square metre of floor space. At Ashburton and Burwood, energy costs have increased because new buildings there have increased the number of services that operate around the clock, such as air conditioning.

In Burwood's case, the extra 32,000 square metres of hospital would have created a huge increase in our carbon footprint on the old coal boilers but the new energy-efficient boiler house runs on carbon-neutral wood waste.

Energy costs at Christchurch Hospital have stayed relatively steady, and those at The Princess Margaret Hospital have decreased since the relocation of many of its services in 2016.

Hillmorton had a slight decrease in floor area as some low energy use buildings were demolished, causing an apparent increase in energy use per square metre from 2014/15. Improvements in the woodchip boiler last year reduced costs slightly, and less LPG was used despite more cooler days being recorded.

More information about our energy use will appear on the intranet and our website in the coming months.



Nurses' Memorial Chapel news

Christchurch City Council work restoring the historic Nurses' Memorial Chapel is underway.

The chapel, located at the front of Christchurch Hospital, has been closed since it was damaged in the Canterbury earthquakes. Required planning and work, including earthquake strengthening, is now happening.

This beautiful chapel, of great architectural and historic significance, has an extensively timbered interior with carvings by Frederick Gurnsey and Jake Vivian together with important stained glass windows by English artist Veronica Whall (1887-1967) and other works.

It was built in 1927 originally to honour three Christchurch Hospital nurses who died when the troopship *Marquette* was torpedoed by a German U-boat in the Aegean Sea during WWI.

Ten New Zealand nurses died when the *Marquette* was struck. It was the biggest loss of nurses lives in one day in New Zealand military history and caused much shock and resentment because nurses should not have been on board the troop ship.

The chapel is New Zealand's only memorial chapel to women who died in any war or the 1918 influenza epidemic.

"It will be wonderful to watch progress on this significant historical building, which holds such significance for nursing in Christchurch and beyond, and to finally see it open and restored to its former glory, hopefully by October 2018," says Friends of Chapel Committee member and Charge Nurse Manager, Ward 20, Christchurch Hospital, Sharon Minchington.

Christchurch Mayor, Lianne Dalziel, announced last year that the chapel would be restored and strengthened in time for its reopening as part of New Zealalnd's WWI centenary commemorations.

Heritage Week is in October this year, and there will be a display at the Returned Services Association (RSA), with items relating to the sinking of the *Marquette*, and the consequent building of the chapel.

Since the 2015 centenary of the *Marquette* sinking a lot of new information and family histories have been uncovered so please come along and view the displays, Sharon says.

The display is on 14 October, 1pm to 3pm at the Christchurch RSA Poppy Room, 74 Armagh Street, Christchurch. Admission is free.

For more information on the chapel www.cnmc.org.nz

National Social Work Day celebrated

National Social Work Day was celebrated at Canterbury DHB on Wednesday 27 September.

Canterbury DHB support a bi-annual event across divisions to acknowledge the significant contribution that social workers play in our health system. It also provides an opportunity for networking between specialty services and targets professional development.

This year it was a pleasure to have Margaret Pack facilitate a workshop on maintaining self-care and professional effectiveness when working with trauma, says Clinical Manager, Social Work, Older Persons Health and Rehabilitation, Raegan Kitto.

“Staff Wellbeing Coordinator, Lee Tuki, also joined us with a delightful and uplifting reminder of practical tools to look after ourselves and the supports available through Canterbury DHB. We thank them both”, Reagan says.

From left, Mental Health social workers, Erin Grierson, Suzi Lammers, and Carla Paton-Jones

Community Older Persons’ Health and Rehabilitation, Community Team social workers, from left, Jacinta Bowler, Carol Woolf, and Ann Reeve

Christchurch Hospital social workers/students

It was a timely reminder that social workers support the most vulnerable in society, promoting and empowering change.

“And that we undertake this work whilst navigating complex systems in a challenging and pressurised environment.”

The passion, drive and commitment to support others should also be extended to ourselves to ensure our ongoing resilience and effectiveness, says Raegan.

“To all the social workers within Canterbury DHB thank you for all the amazing work that you do. Happy Social Work Day!”

From left, Mental Health social workers, Sarah Garrett, Natasha Liong, and Fiona Doyle

From left, Older Persons Mental Health Social Worker, Wilma Koman, Christchurch Hospital social workers, Ali O’Connell and Marilyn Gibb, and Community Older Persons Health and Rehabilitation Social Worker, Chris Hunter

Older Persons’ Health and Rehabilitation social workers, from left, Bronwyn Gregory, Rachel Prasad, and Joan Halliwell

Biketober – promoting cycling in October

Introducing Biketober: throughout October there will be free fun on two wheels for the whole whānau.

Biketober has every imaginable ride on offer, including rides to check out the new major cycle routes; heritage rides and art rides; road and mountain bike rides for all ages and stages; cargo bike rides; and 'Frocks on Bikes' events.

There are plenty of opportunities for an unconfident cyclist to give cycling a go in small groups on quiet streets, as well as free bike fix ups and tutorials about how to mend punctures.

There are also bike-related competitions and spot prizes.

Biketober finishes with a Bike Expo, a weekend full with everything you could possibly want to know or do by bike!

This month of cycling activity was brought to Christchurch by a volunteer group of local enthusiasts, including Canterbury DHB staff members Medical Physicist, Medical Physics and Bioengineering, Steven Muir, and Health Promoter, Community and Public Health, Meg Christie.

For more information visit www.biketober.nz/christchurch or, on Facebook, @biketoberchch.

Canterbury Grand Round

When: Friday, 6 October 2017 – 12.15pm to 1.15pm with lunch from 11.45am
Venue: Rolleston Lecture Theatre

Speaker 1: Dr Juliet Rumball-Smith, Director of Health Intelligence and Transitional Medicine, Northland DHB
"2016-17 Harkness Fellow in Healthcare Policy and Practice"
The capacity of the Electronic Health Record and health IT to improve the care we give to patients – learnings from a Harkness Fellowship to the United States.
Medicine is getting exciting. Come and hear about what the Electronic Health Record and health IT means for you and how we plan for and deliver care. Also – what does my daughter's skateboarding have to do with health IT?

Chair: Sue Nightingale

It is requested out of politeness to the speaker(s), that people do not leave half way through the Grand Rounds

This talk will be uploaded to the staff intranet within approximately two weeks

Video Conference set up in:
- Burwood Meeting Rooms 2.3b
- Wakanui Room, Ashburton
- Administration Building, Hillmorton
- The Princess Margaret Hospital, Riley Lounge

All staff and students welcome

Next is – Friday, 13 Oct 2017
Rolleston Lecture Theatre

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

One minute with... Rebecca Phibbs, Reference Liaison Librarian, Canterbury Medical Library, University of Otago, Christchurch

What does your job involve?
My job mainly involves showing our customers how to use Canterbury Medical Library's many, many resources. So as part of the Reference Liaison team within the library, I take group and one-on-one sessions so people can learn how to search say MEDLINE or CINAHL more efficiently and effectively. (MEDLINE is one of the key clinical biomedical databases, used by health professionals all around the world, CINAHL is a widely-used database focusing on nursing and allied health literature). Or I might help someone with a search for information on an aspect of patient care, or for a project staff are doing on their ward. I'm also involved with developing our collection, and occasionally with recruiting.

Why did you choose to work in this field?
When I was at university, I needed help in the library for an assignment, and the staff member who assisted me was amazing; so helpful and enthusiastic. She made a real difference not only to how I felt about libraries, but how I went about my study. If I could be half as inspiring as she was, I'd be happy.

What do you like about it?
I get to meet lots of really interesting staff and students, who are working in many areas, so I enjoy finding out about what they are doing, and helping them with what they need. I also get a real kick out of seeing our customers transition from not-so-confident with library resources, to expert users. Our great library team is a definite positive too!

What are the challenging bits?
Keeping up with the constant changes in technology (hardware and software) is challenging, and in a good way. Learning new skills and ways of doing things is key to being good at our job and enjoying it, which I feel positively influences our interactions with our customers.

Who inspires you?
Definitely my library colleagues, and also the many clever and hard-working customers we deal with on a daily basis.

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 core to what we do in the library. Everyone comes to us with their own experiences, skills and expertise, even though they may feel very doubtful about their library knowledge. By dealing with them in a friendly and professional manner, we can make a huge difference to their day and what they are trying to achieve.

Rebecca Phibbs

One of the best books I have read was…
'Denis Glover: His Life' by Gordon Ogilvie. It was years ago (shock horror I'm not much of a reader), and it really made an impression on me, particularly Glover's harrowing experiences of being in the Royal Navy during World War II.

If I could be anywhere in the world right now it would be…
Fishing at Okiwi Bay, in the Marlborough Sounds.

What do you do on a typical Sunday?
Sadly, I do chores. My partner and I try and fit in a nice walk or some gardening too, weather permitting. We may also watch the V8 Supercars on television if there's an event on.

One food I really like is…
Crayfish.

My favourite music is…
Lots, including rock, classical, brass band, bluegrass, Americana.

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

Canterbury Clinical Network Alliance Leadership Team Key Messages – September 2017

Latest key messages from Canterbury Clinical Network (CCN).

Read this month's key messages from the CCN Alliance Leadership Team (ALT), including:

» Membership changes were approved for the Rural Health Workstream, Urgent Care Service Level Agreement (SLA) and the Laboratory SLA.

» Presentations were received regarding Māori Health, Collaborative Care and the Hurunui Health Services Model of Care development.

» Other discussions were around rural subsidies, Waimakariri after hours and the community-hospital community scoping project.

HEALTH QUALITY & SAFETY COMMISSION NEW ZEALAND
Kupu Taurangi Hauora o Aotearoa

open FOR BETTER CARE
Hāpai ake te taiora

Health Quality & Safety Commission E-digest available

In the latest issue of the Health Quality & Safety Commission New Zealand's E-digest you can read about:

» Talking together to improve processes for patient deterioration escalation of care.

» Applications are open for Medicines New Zealand's Value of Medicines Award 2017. The award recognises innovative research that improves the understanding, effectiveness or safety of the use of medicines or vaccines in New Zealand.

» The Commission has been working over the past year to review literature, propose potential bundle options and gather feedback from the health care sector regarding a pre-operative anti-staphylococcal bundle as part of its Surgical Site Infection Improvement (SSII) programme. The aim is to develop a standardised national set of pre-operative interventions for orthopaedic and cardiac surgery to reduce Staphylococcus aureus-related SSI rates.

» Patient Safety Week 2017, 5–11 November, will have a focus on medication safety, in line with the World Health Organization's five-year medication safety challenge. Harm occurs because people are taking the wrong medicines, so the commission has produced resources to encourage conversations between consumers and health professionals.

Dementia Canterbury™

Dementia: The Basics

A comprehensive course for professionals new to dementia care or those who wish to refresh their knowledge and skills

Next Course:

Tuesday 7 November 2017

8.30am—4.00pm

Course details

This course is for health and other professionals working with people with dementia - resthome/hospital staff, community workers, social workers, counsellors, occupational therapists, physiotherapists, district nurses, tutors, volunteers, pharmacists, GP practice nurses, diversional therapists, needs assessors, service coordinators etc.

Topics include

- Introduction to dementia
- Psychiatric and medical complications
- Communication
- Behaviours
- Building Bridges to Wellbeing

When

Tuesday 7 November 2017
8:30am—4:00pm
(Morning tea, lunch and afternoon tea included)
Registrations with payment close Monday 30 October 2017
Unless maximum number is reached before this date

Where

The Quaker Centre
217 Ferry Road (Corner of Nursery/Ferry Roads)
Christchurch (Parking on site is limited. More free parking available on Nursery Road)

Cost

Members	$110 (including GST)
Non-members	$125 (including GST)

There is a minimum of 12 and a maximum of 30 participants

If you would like to find out more about further education opportunities, other services we offer, or membership contact

Dementia Canterbury

T 03 379 2590

0800 444 776

E admin@dementiacanterbury.org.nz

www.dementiacanterbury.org.nz

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Telephone: 64 3 364 3602
Email: publichealth.uoc@otago.ac.nz

Nurses undertaking a HWNZ funded Postgraduate Diploma in Nursing may be eligible to take some Public Health papers as part of that qualification, consult your programme advisor.

otago.ac.nz/publichealth

Occupational Therapy is 100!

October 23-27th is Occupational Therapy Week. This year marks 100 years of the profession being officially recognised.

Burwood Hospital Occupational therapists 1980's

As part of the rehabilitation team, occupational therapists:

- Increase independence
- Adapt or modify the environment
- Find creative solutions (including assistive aids or equipment)
- Enable participation in activities of daily life
- Help a person re-engage in valued activities (e.g. gardening, shopping, golf)
- Assist with return to work or life roles (e.g. parenting)
- Empower self-management of wellbeing

In the late 18th-century Europe, revolutionaries Philippe Pinel and Johann Christian Reil reformed the hospital system. Instead of the use of restraints, their institutions used rigorous work and leisure activities. This was the Moral Treatment era, where the roots of occupational therapy lie.

The Arts and Crafts movement that took place between 1860 and 1910 also impacted occupational therapy. Arts and crafts were used as a way of promoting learning through doing, provided a creative outlet, and served as a way to avoid boredom during long hospital stays.

The National Society for the Promotion of Occupational Therapy, now called the American Occupational Therapy Association (AOTA), was founded in 1917 and the profession of Occupational Therapy was officially named in 1920.

With the thousands of injured soldiers (physically and mentally) returning home from World War One, there was a surge in the demand for occupational therapists. *(See pic above left)* Occupational therapists also began treating physical disabilities, plus survivors of spinal cord injuries, amputations, traumatic brain injuries, and cerebral palsy. (source: Wikipedia)

Occupation is *all* the things you do: Self-care, looking after others, leisure and work.

Occupation and health are linked.

An occupational therapist is a registered health provider who uses the theory of occupation to improve well-being and quality of life.

Help Occupational Therapy celebrate 100 years - look out for the information and activities around Burwood from 24th-27th October!