



## For the whole system to work, the whole system has to be working

**After a slow start to the winter busyness peak, it certainly made its presence felt last week with extremely high numbers of people needing treatment and care.**

There were 330 people through the emergency department last Saturday [28 July] and the occupancy levels have also been high in our hospital inpatient wards. We usually admit 42 percent of people who are assessed and treated in ED. Last week that shot up to 49 percent – there's nothing in particular causing the increases, simply very unwell people who need hospital-level care.

Thankfully our strong community-based health networks mean care led by general practice teams enable many acutely unwell people to receive care for complex conditions in the comfort of their own home.

Thanks to everyone involved in ensuring Cantabrians have the right care in the right place at the right time provided by the right person. Our health system would grind to a halt if we didn't have the flow in and out of hospital. It takes the expertise of so many teams of people working in the community to support those who have avoided a hospital admission or been discharged and need support to aid their recovery and regain independence.

There are early indications that there is more influenza in our community with a number of people being admitted with complications of influenza-like illnesses last week. This is a timely reminder to everyone that it's not too late to get the best protection available – the influenza vaccination. It takes two weeks to provide protection so don't delay.

Our acute operating theatres have also been kept particularly busy with more than the usual volumes of acute cases, including trauma.

Specialist Mental Health Services are currently experiencing some stabilisation of numbers of people

coming into adult services but at a very high rate, with 3000 more adults presenting to our adult community services this year than during 2008/2009. In child and youth services there has been an increase of 1700 more young people. In total there are 5000 people under the care of our Specialist Mental Health Services. Around 200 are in our inpatient services with the rest supported by a range of community outpatient services.

Thank you to everyone for all that you're doing to ensure people receive treatment and care when they need it. You all play an important role in our health system.

## Better visibility of data helps Eye Team prioritise clinical need and reduce waiting time

I would also like to acknowledge the work of the Eye Service project team in reducing their waiting lists as part of the Ministry of Health Overdue Follow-Up Project. In June 2017, the Ministry of Health raised concerns around its national Ophthalmology overdue follow-up times, and provided funding to all DHBs to reduce their waiting lists by June 2018.

I am pleased to say that Canterbury DHB has reduced an overdue follow-up waitlist list of 3,347 patients to 719 in one year.

The project team achieved this impressive result by holding more than 100 extra outpatient clinics in the evenings and weekends, and by working with Decision

## In this issue

- › Regulars... pg 3-5
- › Practice makes perfect – Simulation training at Manawa... pg 6
- › Let's track the flu so we can help you... pg 7
- › Dr Stephen Williams – 4 March 1973 - 8 July 2018... pg 8
- › Mental health staff invited to have their say in national survey... pg 9
- › Avoid unnecessary pre-operative chest x-rays... pg 9
- › Hugs and cuddles in the Specialist Mental Health Service | Recognising those who
- › help with road trauma... pg 10
- › Staff doing their bit for Dry July... pg 11
- › The Countdown Kids Hospital Appeal has begun... pg12
- › One minute with... pg 14
- › Notices... pg 15-19

Support to develop and improve data to better identify patients waiting for follow-up. Decision Support provided detailed weekly reports that identified the highest priority patients and longest waits in an easy-to-follow way, using colour-coding and percentages.

Before the project started last June, 50 percent of patients were waiting longer than intended. The intended time is the recommendation made by the responsible clinician of the timeframe in which the patient should be reviewed by the Ophthalmology Service. As of June this year, the number is below 9.4 percent. Not only has the team minimised the clinical risk, but they are following up patients in a prioritised and timely manner.

By clearing the backlog, the service is now better prepared to cope with future follow-up volumes. This has also allowed time for the development of a Glaucoma Pathway tool to support patients' ongoing eye care, which is to be implemented from this month.

The project's success would not have been possible without the efforts of so many people and the commitment to support the Eye Service team by investing in equipment and increasing staffing numbers to work through the issues, identify solutions and improve service coordination. Decision Support's role in the reorganising and reporting of data was also key to achieving such great results, as was Canterbury Initiative Project Manager Sharen Paine's expert oversight. Thank you again to everyone involved.



The Eye Service's Ministry of Health Overdue Follow-Up Project team (L-R): Service Manager Ali Watkins; Consultant Zainah Alsagoff; Consultant Antony Bedggood; Decision Support Information Analyst Boyd Cornere; Clinical Director Rebecca Stack; Project Administrator Helen Solomons; Registered Nurse Luke Wigram; Project Administrator Andrea Moody; and Charge Nurse Manager Jody Allen.

Absent: Canterbury Initiative Project Manager Sharen Paine

Haere ora, haere pai  
Go with wellness, go with care

David Meates  
CEO Canterbury District Health Board

If you have a story idea or want to provide feedback on *CEO Update* we would love to hear from you! Please email us at [communications@cdhb.health.nz](mailto: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](#).



## Bouquets

### **Danielle, Emergency Department, Christchurch Hospital**

Although all staff at Christchurch Hospital are competent and professional, I would like to say a special 'thank you' to one nurse in particular, who provided outstanding care – Nurse Danielle, who was working in the early morning of Monday 9 July. Thank you for taking the time to talk to me, and figure out what was required to treat my unbearable abdominal pain, which was not responding to multiple doses of the 'standard' treatment. Please say thank you to your colleague who assisted you to administer the treatment and monitor me to ensure my safety in case of any complications. Shortly afterwards, I was taken away to surgical assessment before I got a chance to say thank you for listening to me, taking me seriously, and treating me as an individual. You must see hundreds of patients per week, and you won't remember many of us. When we come to the ED in the middle of the night, in extreme pain, we see a lot of medical staff, but we remember those who made an extra effort and provided outstanding professional care. Thank you.

### **Karen Thomson, Hillmorton Hospital**

I would like to place on record how impressed I have been with the professional, kind and considerate way Nurse Karen Thomson treats her patients. I have visited my friend over the past week and I could not

help but admire the overall caring environment your staff provide the patients in this ward. As an employer myself, it's important that good work performance be commented on. Please pass on my best wishes to the staff undertaking a difficult job.

### **Burwood Hospital**

I would like to say a big thank you to all after being admitted to Burwood Hospital. Could you please pass on my thanks to the operating staff, nurses, and nurse aides, plus the community nurses, for all the care and attention that they gave me. We cannot agree with any of the negative reports about the hospitals and staff in the newspapers. They are so wrong.

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

An outstanding hospital aide called Katrina is absolutely wonderful to my mother. We so appreciate her wonderful care. Also Nurse Colin, amazing, professional and kind. Dr Jenny Cheing, wow, so lovely, kind, caring and professional.

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

Team was fantastic, nurses, doctors, staff and ambulance. Thank you so much for taking excellent care of my daughter.

### **Ward 10, Christchurch Hospital**

Wonderful care and attention, as usual, thank you.

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

I have recently spent two weeks in

hospital. From the food to the cleaning staff, nurses, senior staff and doctors, I can only praise everyone, I was treated like a queen. Not forgetting all the volunteers too.

### **Orderlies, Christchurch Hospital**

Lovely young man Aaron, very respectful towards my elderly father and very tolerant of my young child. Made my experience in hospital very pleasant and bearable. Much appreciated.

### **Ward 10 and Intensive Care Unit, Christchurch Hospital**

My grandfather has been in here for a few weeks now. Today he is heading to Burwood Hospital. The staff have been so supportive towards him and our family, especially the young nurse Grace from Intensive Care who made us feel so welcome and in the loop.

### **Christchurch Hospital**

Reversing roles from nurse to patient is not easy. But the amazing nursing care I received during the last year in Pre-Admission, Intensive Care Unit, Special Care Unit, Wards 16 and 24 certainly cemented what I already know – that I haven't wasted the last 30 years. Nursing is the best career in the world and the nurses I encountered in Wards 16 and 24 were so incredibly caring and professional that I wanted to publicly thank them. I was also very grateful for the Multidisciplinary Team input – it takes a team. I would also like to thank Radiation Oncology for their wonderful care. Thank you Canterbury DHB.





## The Library

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

[“Stem cell research for cystic fibrosis leaps forward”](#) – Cystic fibrosis affects more than 70,000 people worldwide. Pioneering research by the University of Adelaide has successfully used cell transplantation therapy in mice to correct faulty genes in the cells and replace them with healthy ones, paving the way for the technique to be applied to humans. From *Medical Xpress*, published online: 2 August 2018.

[“How to add 10 healthy years to your life”](#) – Researchers from the Westmead Institute for Medical Research followed 1,550 Australian adults over 50 for a decade. Results showed that those who did more than 10 hours of moderately intense exercise each week were more likely to survive an extra 10 years free from chronic diseases, mental impairment and disability. From *HealthCentral.nz*, published online: 1 August 2018.

[“Ground-breaking Kiwi research paves way for long-term flu vaccine”](#) – A study by the Southern Hemisphere Influenza and Vaccine Effectiveness Research and Surveillance (SHIVERS) is the first to look at the antibody responses to the two main proteins found in flu viruses, rather than just the main protein alone. This provides a better understanding of the immune response and could be key for the development of a universal flu vaccine. From *HealthCentral.nz*, published online: 19 July 2018.

If you want to submit content to **The Library** email [communications@cdhb.health.nz](mailto:communications@cdhb.health.nz).

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

- › **Visit:** [www.otago.ac.nz/christchurch/library](http://www.otago.ac.nz/christchurch/library)
- › **Phone:** +64 3 364 0500
- › **Email:** [librarycml.uoc@otago.ac.nz](mailto:librarycml.uoc@otago.ac.nz)

**CARE AROUND THE CLOCK**

**Call your GP team 24/7 for health advice**

If it's after-hours a nurse is available to give free health advice

Canterbury District Health Board  
Te Pōwhiri Hauora o Wairarapa

#carearoundtheclock

# Facilities Fast Facts

## Acute Services building

What a difference four years makes. The photo (left) shows the Christchurch Hospital campus in December 2013, before building started for the new Acute Services building, while the photo on the right shows the same view from earlier this year.



Preparations are underway to dismantle and move part of the existing Hagley Outpatients building off the site and over to the Rangiora Health Hub. This will be a complex piece of work that will happen after the new Christchurch Outpatients building opens at the end of October.

Preparations for this, and for a retaining wall that needs to be built in front of the podium, means the parking along the side of Hagley Outpatients will be closed from Monday 13 August. The five disabled parking spaces in the front of the building will remain. Staff members affected by this change will be contacted directly about alternative parking.

Currently, around 550 people are working on the Acute Services building site.

## Christchurch Outpatients

These two photographs show the progress of the Christchurch Outpatients since the first sod turning in July 2016 and then two years later with the building just months away from completion – looking just like the artist's impression – in July 2018.



A few of the hospital dental staff visited Level 1 to get a feel for their new space last week. Comments ranged from "amazing" to "It's a nine out of ten, and it's not finished yet." The photo on the right shows one of the large dental surgeries looking out to the staff station and recovery area (curtains still to be installed).





# Practice makes perfect – Simulation training at Manawa

Canterbury DHB staff have breathed life into the Simulation (SIMS) training rooms at the new Manawa building by holding the first resuscitation training session in the new facility.

Nurse Educator Jo Saunders put the staff through their paces during a CPR refresher course. Feedback from students about the new Simulation Centre on Level 2 of Manawa was that they like the space because it was bigger and brighter.

Manawa, a health research and education facility, is a collaboration between Christchurch's health and tertiary education sectors, bringing together the Canterbury DHB, Ara and the University of Canterbury.

The Simulation Centre covers one floor of the building and includes:

- › an operating theatre
- › hospital ward
- › emergency room
- › a home environment with bedroom, kitchen, and living area
- › high technology such as virtual reality and video facilities for recording and reviewing training sessions.

There is also capability for large-scale simulations in real-world healthcare environments and access to advanced clinical equipment that students would normally only see during placements.

Internationally, simulation is becoming an essential part of health care training and ongoing professional development. It allows health professionals to practice medical scenarios, and the necessary teamwork and communication involved, before encountering them in real life. There is strong evidence that simulation training, in addition to lecture-based training, is one of the most effective tools in upskilling health care staff.

Simulations range from simple scenarios involving one type of health professional to very complex cases involving multiple health professionals.

Manawa means heart, patience or breath in Te Reo Māori and was gifted to the partnership as a reflection of the proverb "Manawa whenua, manawa tangata", which describes the intimate connection between human health and the health of our environment.



Nurse Educator Jo Saunders shows Canterbury DHB staff how to resuscitate a baby during a CPR refresher in the new Simulation Centre in Manawa



Detail of the designs used on glass panels throughout the Manawa building

# Let's track the flu so we can help you

FluTracking is a new online health monitoring system designed to track flu-like symptoms across the country.

Every week during the influenza season, participants will be sent a link to answer a couple of simple flu-related questions, says Director of Public Health Caroline McElnay.

"The survey takes less than 10 seconds to complete and will help researchers to determine the onset of flu by region, the effectiveness of the vaccine in New Zealand and the severity of the influenza season."

The information will be used to inform planning ahead of future influenza seasons. Caroline encourages as many people as possible sign up to FluTracking as it will provide invaluable insights for those monitoring the flu.

New Zealand already has a comprehensive surveillance system in place when it comes to monitoring influenza, Caroline says.

FluTracking is just one of those programmes, but it is the only one that lets people participate directly.

"Individuals and families can make a real contribution through FluTracking. And as with any new online tool, the more people who participate, the more accurate the data across New Zealand will be."

What are you waiting for – [sign up](#) and track the flu, so we can help you.

This year's vaccine protects against four strains of influenza. The flu vaccine is free to people aged 65 and older, pregnant women (any trimester) and people with chronic or serious health conditions, such as heart disease, cancer or severe asthma.

## About FluTracking

FluTracking was developed in Australia in 2006 and has since gained thousands of voluntary participants there.

The online survey takes less than 10 seconds to complete every week, and asks participants whether or not they've had a cough or a fever in the past week and whether they've had the annual influenza vaccine.

Each week, after participant surveys are completed, the data is collated into a report.

The reports show survey statistics, including respondent numbers for the week, and indicates rates of influenza-like illness (ILI) symptoms in New Zealand and also in individual regions where there is a sufficient sample size of respondents.

This report is sent weekly to the Ministry of Health to contribute to the overall data picture of ILI in New Zealand, identifying influenza trends and hotspots around the country.

It's important to note that all information provided is kept confidential and only aggregated data (by regions) will be published in the weekly reports. At no time will your information be shared with any other agencies.

You can find more information about FluTracking and becoming a participant on the [FluTracking website](#). There are about 4000 registered participants now.



# Dr Stephen Williams

## 4 March 1973 – 8 July 2018

It is with great sadness that we announce the passing of Dr Stephen (Steve) Williams on Sunday 8 July at the age of 45 years.

Steve was diagnosed with metastatic oesophageal cancer in July 2016 and fought the disease bravely right to the end. He died peacefully at the Nurse Maude Hospice in the presence of his wife Anthea and close family members. The funeral service was held in a beautiful ceremony on 14 July in Christchurch.

Steve was brought up in Coventry, UK, and completed his clinical oncology training in Cardiff, Wales, before moving to New Zealand in September 2008. He initially worked as a Fellow in the department of Radiation Oncology at Christchurch Hospital and was subsequently appointed as a Consultant Radiation Oncologist in 2010.

It was during this time that 'cupid struck' and he met his future wife, Anthea Craig, a Senior Radiation Therapist, whom he married in 2010.

Steve was a wonderful doctor, a great friend and colleague and overall an amazing human being. He was so enthusiastic, hardworking and above all a very caring and compassionate doctor, who always treated his patients with dignity, honesty and respect.

Steve was an active member of the department, involved in standardisation of the practice within the service and also development of clinical guidelines for various cancer sites. Steve was a gastrointestinal and genitourinary cancers sub-site specialist and was actively involved in local and international clinical trials, more closely with the Trans-Tasman Radiation Oncology Group (TROG).

He was passionate about his work, as was evidenced by the fact that as soon as he was able after his initial diagnosis he returned to the hospital. He continued working through several lines of chemotherapy until in early May 2018 he felt that his symptoms were getting worse and decided to call it a day.

His judgment and decision-making was so spot on. Following his diagnosis, Steve experienced from the "other side of the fence" the functioning of various services within and outside this hospital, and was always appreciative of the care and respect he got all around.

He openly fed back what made a difference and suggested improvements that would enhance patient experience during their treatment journey.

Outside of his work, Steve was a talented musician and singer and regularly participated in the annual doctors' concerts. He loved the outdoors, did mountain biking or running most weekends and generally loved being in the midst of nature.

Steve was a very dear and respected colleague of the Oncology Service and will be immensely missed. At this moment of sorrow, all our thoughts and prayers are with Steve's wife Anthea and the wider Williams family.

Steve will be remembered forever by his family, friends and colleagues.





# Mental health staff invited to have their say in new national survey

Staff working in mental health and addiction (MHA) services in Canterbury are being encouraged to take a few minutes this month to complete an important new national survey.



HEALTH QUALITY & SAFETY  
COMMISSION NEW ZEALAND

Kupu Taurangi Hauora o Aotearoa

The *Ngā Poutama Oranga Hinengaro: Quality in context survey* (Ngā Poutama) is being coordinated by the Health Quality & Safety Commission's mental health and addiction programme, and will run during August.

The brief online survey seeks to capture the views and experiences of MHA staff across New Zealand. It will help establish a baseline of information about current beliefs, attitudes and behaviours about quality and safety in MHA services. The findings will also help shape the design of future quality improvement initiatives for this sector.

The programme's Clinical Lead Clive Bensemman urges those working in MHA services to take a few minutes to complete the Ngā Poutama survey.

"We are interested in things like the care and support you provide to consumers, how your workplace responds to and learns from incidents and adverse events, and how supported by managers and colleagues you feel. Your views and experiences on these topics will be essential in helping us design future quality improvement initiatives that will really make a difference for consumers and staff."

You can fill in the survey here: [www.qualityincontext.nz](http://www.qualityincontext.nz)

Results are expected to be confirmed by late 2018, and findings will be made available on the Commission's website, as well as provided to key stakeholders and survey participants.

Staff can complete the survey online, in writing or over the phone. Results are anonymous. Those completing the survey will also be invited to enter a draw to win one of three team morning teas.

For more information about the survey, email [michelle@mobiusrsearch.co.nz](mailto:michelle@mobiusrsearch.co.nz).

## Avoid unnecessary pre-operative chest x-rays

The Choose Wisely campaign is targeting the use of routine pre-operative chest x-rays in August.

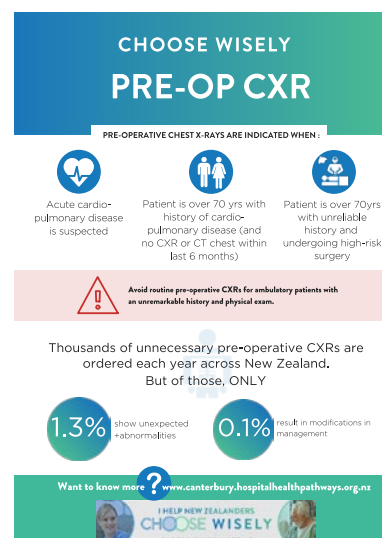
Across New Zealand, thousands of pre-operative chest x-rays are ordered every year. However, of those only 1.3 per cent show abnormalities and only 0.1 per cent result in modified treatment management.

Pre-operative chest x-rays should be ordered if:

- › acute cardio-pulmonary disease is suspected
- › the patient is over 70 years old, has a history of cardio-pulmonary disease and hasn't had a CXR or chest CT within the last six months, and
- › if the patient is over 70, has an unreliable history and is undergoing high-risk surgery.

The basic premise should be: avoid routine pre-operative chest x-rays for ambulatory patients with an unremarkable history and physical exam.

There is more information on the Choose Wisely campaign at [choosingwisely.org.nz](http://choosingwisely.org.nz) and for more details on the pre-operative chest x-ray, pre-operative blood tests and electrocardiogram look for 'pre-operative management' in [canterbury.hospitalhealthpathways.org.nz](http://canterbury.hospitalhealthpathways.org.nz).



## Hugs and cuddles in the Specialist Mental Health Service

For a number of years, quilts and baby blankets have been sourced and distributed within the Specialist Mental Health Service (SMHS).

Special mention must be made of Pat Town who lives in Timaru. She is the mother of Business Systems Analyst Barbara Bee from the Quality and Patient Safety team, and crochets beautiful woollen blankets for the SMHS's Mothers and Babies Unit based at The Princess Margaret Hospital.

Staff give the blankets to mothers for their babies to use in hospital and to take home.

They also place quilts in de-escalation rooms and they're also much appreciated by people who are in recovery following Electro-Convulsive Therapy.

The 'Hugs All Round' community group of quilters make quilts for children who need an extra hug. They have created quilts for babies who are in the Mothers and Babies Unit and presented quilts at places such as Stand Children's

Services and Cholmondeley Children's Centre.

Any donations of four-ply or double-knit wool, and pieces of age-appropriate cotton fabric, would be most welcome and highly appreciated. Donations can be sent to Infection Prevention and Control Nurse Andrea Grieve, Administration Building, Hillmorton Hospital. (Please do not use internal mail for this.) Andrea will ensure the wool and fabric get to the right people.



Pat Town crocheting a baby blanket for the Mothers and Babies Unit. Pat's daughter is Business Systems Analyst, Quality and Patient Safety team, Barbara Bee

## Recognising those who help with road trauma

Nominations are open to acknowledge the people from all walks of life who have made an influential difference to those affected by road trauma.

This is the second year for the annual Canterbury Road Trauma Awards, organised by the Road Traffic Accident Trauma Charitable Trust (RTATCT).

Dealing with road trauma is never easy – regardless of whether you come across it through work, volunteering, or just being a bystander to a crash – but your time and effort can make a world of difference to people who are injured or otherwise affected.

Here in Christchurch we have the biggest trauma centre in the country. As well as taking major trauma patients from all over the South Island, we take patients with severe spinal injuries from everywhere south of Taupo in the North Island.

Major trauma patients are those with a 10 percent chance of dying in hospital, and usually have multiple injuries.

Between 1 May 2017 and 30 June 2018, Christchurch Hospital admitted 137 major trauma patients from vehicle crashes.

More than 2000 trauma patients who are not classified as "major" are also admitted to the hospital every year.

This number also does not include Emergency Department patients who are not admitted to hospital.

We have a small team of people who work to coordinate multiple services around road trauma patients, and a huge number of staff who treat these patients every day. We are also very thankful for the work by emergency services, allied health, and members of the public who save lives on the road.

Nominations for the 2018 Canterbury Road Trauma Awards close on 14 September. The winners will receive their awards at the RTATCT's Road Accident Remembrance Day on Saturday 3 November 2018 at 10.30am in North Hagley Park, Christchurch.

Anyone can make a nomination using the form on the [RTATCT website](#).

# Staff doing their bit for Dry July

Dry July is an annual fundraiser that challenges people to give up alcohol for a month and raise money for those affected by cancer.

Staff at the Canterbury Regional Cancer and Haematology Centre participated in this year's Dry July by abstaining from alcohol and asking friends and family to sponsor them.

Clinical Manager Philippa Daly says both local and regional patients have benefited from the money raised over the past three years with more than \$350,000 allocated to various projects.

The latest project involves offering every patient who enters the Oncology Service at Christchurch Hospital a water bottle, supported by Pure Waters of New Zealand and funded through Dry July. The bottle has a measuring guide along the side to help patients who need to drink a certain amount of water before they have radiation treatment.

Previous fundraising has helped purchase recliner chairs, exercise equipment, music systems, treatment chairs, family rooms, massage vouchers, electric beds, iPads, magazine subscriptions, humidifiers, AirPal mattresses, murals and many other items to improve the patient experience.

Staff in the Emergency Department approached Dry July from a different perspective. Instead of participating in Dry July, they took the opportunity to raise awareness about the risks of alcohol consumption by educating their patients and their families, whānau and visitors.

"We provided information, much of it from HealthInfo, and then advertised the ways in which we can help," says Nurse Coordinator Clinical Projects, Polly Grainger.

The leaflets have obviously been well read as staff have had to top up the supply each morning.

Barb Halligan of the Psychiatric Consult Liaison Team says they are very pleased with the number of patients who have discussed their alcohol use with the doctors.



Radiation Therapists with patient 'Murray', one of the recipients of the Dry July water bottle



Noticeboard in the Emergency Department covered with information about the risks of alcohol



Nurse Kate Boys holding some of the pamphlets offered for Dry July



# The Countdown Kids Hospital Appeal has begun!

The Countdown Kids Hospital Appeal officially began today, and will run until the end of October.

The nationwide appeal is in its 12th year of raising money for medical equipment for children across the country.



The cake

Of the \$11.6 million raised since 2007, \$1.2 million has been donated to Canterbury DHB's Child Health Division – funds which make a practical difference to the wellbeing of children in its care.

Seven-year-old Keira Hubball and her mother Vickie Hamilton were special guests at an event last week to mark the beginning of the appeal. Keira lives with a metabolic condition that means she is in a wheelchair and has recently lost her vision, so she is a regular visitor to Christchurch Hospital.

Countdown Group Manager Penny Hardaker says many of Countdown's staff have first-hand experience of hospital visits with their children, and there is great enthusiasm and determination to raise funds for such a worthy cause.

Penny's own son contracted meningitis as a two-year-old and, after years of follow-up care, she has seen how money raised via community fundraising has enabled the purchase of medical and play equipment to create a better experience for young patients.

This year's appeal will raise funds for medical and play equipment for use throughout the Canterbury Health System.

Clinical Director of Paediatrics at Christchurch Hospital, Clare Doocey, says the generosity of Countdown staff never fails to amaze, and Canterbury DHB greatly appreciates the time and energy they devote to the cause.

The appeal also sparks friendly supermarket competition, as Stuart Coe, Store Manager of Countdown on Moorhouse Avenue can attest to: "Every Countdown store wants to raise the most money for the kids. But we also help and support other stores with organising fundraising events. This year, we're doing things like sausage sizzles, cake sales and a fashion show. Because we know the money is going to a local and noble cause, it's easy to get strong support from our customers".



Attendees at the celebration of the Countdown Kids Appeal, from left, Christchurch Hospital Clinical Director Paediatrics Clare Doocey, Countdown South Island Operations Manager Jo McNaught, Vickie Hamilton and her daughter Keira Hubball, Countdown Group Manager Penny Hardaker, and Child Health Service Manager Anne Morgan

Canterbury DHB's Child Health Service is also running a number of fundraising events, such as dress-up days where you donate a gold coin to dress-up and \$5 if you don't dress-up, and a Step into Action event during September, where participants register for \$10 and count up their steps using a device of their choice.

Keep an eye out for events happening at Christchurch Hospital or at a Countdown near you!

The appeal runs until the 31 October. To make a donation, you can:

- › visit your local Countdown supermarket and donate at the checkout
- › visit [www.countdown.co.nz](http://www.countdown.co.nz) to make a donation online
- › Text KIDS to 3066 to make a \$3 donation (charges apply).

# Time to ditch old-fashioned 'Kiwi bloke' mentality

Canterbury men are being asked to ditch the stereotypes and just be themselves, as part of the latest campaign by All Right?

All Right? Mental Health Promoter Ciaran Fox says the campaign is needed because many blokes still believe that to be a man they need to live up to the Kiwi bloke stereotype.

"It's time to let go of the idea that a good Kiwi bloke should be strong, silent and stoic, and to lose the whole 'harden up' or 'get over it' mentality," says Fox.

"Suppressing the real you in order to live up to the expectations of your mates or society can be incredibly damaging. We need to move beyond those narrow stereotypes of the past and look to the future of manliness.

"What this campaign is all about is letting guys know that being yourself is Manly As," says Fox.

James Milne is one of the men who have been photographed for the campaign. He says often the way the media portray men – through movies or television – is just full of clichés.

"They're either strong and muscular, or rich and overweight with a beautiful wife. It's not really reflective of real life. I feel like the expectations for men have moved on," says Milne.

As for the advice Milne would give to a younger version of himself?



"Be true to yourself and comfortable not to follow the crowd. I think that's becoming more acceptable and we need to encourage that."

Ciaran Fox says the campaign is not saying that it's bad to be a strong, silent type – rather it's saying that if this isn't you, then that's all right. You don't need to fit into the mould.

"It's time to say yes to things that we want to do but we're prevented from doing because we're worried we'll been seen as weak or different. It's time to acknowledge that we have feelings and emotions. It's time to put as much focus on growing mental fitness as we do on our physical fitness. Now that is Manly As."

## Western Australia celebrates its 400-pathway milestone

The Western Australia (WA) Primary Health Alliance HealthPathways team recently demonstrated how to celebrate it's 400-pathway milestone in style, with party food that set a new standard for the HealthPathways Community.



The initiatives of the WA team in system redesign, linking educational opportunities with General Practice events, establishing working groups, and taking the time to have some fun along the way, are great engagement strategies that are clearly yielding results.

To find out more see the [Latest News on the HealthPathways Community website](#).

# One minute with... Vaea Coe, Mental Health Promoter

## What does your job involve?

Building relationships and engaging in wellbeing conversations with our Māori community and people from a refugee and new migrant background.

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

Wellbeing is important to me and my role is an extension of my values.

## What do you like about it?

Being part of the awesome All Right? team and surrounded by an extended Community & Public Health whānau is very cool. I enjoy being connected to communities and whānau. I feel privileged to hear their stories, journeys and aspirations toward living well.

## What are the challenging bits?

Limited resource, time and capacity.

## Who inspires you?

I am inspired by many, one in particular is the creator of Whānau Ora, Dame Tariana Turia.

## 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?

Building relationships, understanding people and values, flexibility, stepping outside my comfort zone, showing face, kanohi ki te kanohi, being an active participant within the communities. Enabling communities and whānau to be my guide.

## One of the best books I have read was...

I have many. My recent is *When Breath Becomes Air* by Paul Kalanithi.

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

My grandmother Maselina's birthplace on the Island of Savai, Samoa.

## What do you do on a typical Sunday?

If my mum stays over, we'll be dancing around my kitchen before we go to church. Maybe a bit of gardening, or just chillaxing.



## One food I really like is...

My daughter's green vegetable soup.

## My favourite music is...

Lounge.

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).



# 24 Hour Surgery not to be named as a patient's general practice

Recently, a number of patients visiting Canterbury DHB services have been naming their general practice as the 24 Hour Surgery. Please be aware that the 24 Hour Surgery does not enrol patients and is an after-hours urgent care facility. Therefore, it is not a good option for the surgery to receive patient results/records from their hospital presentation. If a patient is not enrolled with a practice, this is a good opportunity to suggest they do so.

There is information on the [Canterbury DHB website](#) about how to do this.

[Partnership Community Workers](#) can also help connect people with a general practice.

## Canterbury Grand Round

Friday 10 August 2018 – 12.15pm to 1.15pm, with lunch from 11.45am

Venue: Rolleston Lecture Theatre

**Speaker 1: Dr Eric Matteson, Rheumatology CDHB and Mayo Clinic – “Total Joint Arthroplasty for Rheumatic Diseases: Utilisation Trends and Recommendations for Perioperative Medication Management”**

With advances in treatments, there has been a shift in the numbers and types of orthopaedic surgeries performed in patients with rheumatoid arthritis. Overall, fewer surgeries are being done on small joints, while the number of joint replacements for hip and knee arthritis has increased. Patients with rheumatoid arthritis and other systemic rheumatic diseases are at higher risk of infections, but there is uncertainty how this risk, or the medication management of the diseases affects risk in the perioperative period. This discussion will include a review of the recently published American College of Rheumatology–American Association of Hip and Knee Surgeons guidelines for management of disease modifying agents which are intended to mitigate infection risk.

**Speaker 2: Dr David McGregor, Nephrology – “Keeping dialysis at home”**

Home dialysis has many advantages over hospital based dialysis for the long-term treatment of kidney disease. Christchurch has had a very successful home dialysis programme but faces challenges in continuing this service in the years ahead. I will discuss some of the barriers and potential solutions to continued home-based dialysis in NZ.

**Chair: Siobhan Cross**

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 1.02

All staff and students welcome

Next is – Friday 17 August 2018, Rolleston Lecture Theatre

Convener: Dr R L Spearing – [ruth.spearing@cdhb.health.nz](mailto:ruth.spearing@cdhb.health.nz)

# Wellbeing Workshops

For All Canterbury District  
Health Board Staff

You play a crucial role in the delivery of high quality care to the Canterbury/West Coast community. It's just as important that we care for ourselves and each other too; *Care Starts Here* with each of us making the time to *be and stay well*. Getting a better understanding of how you manage stress – and increase the number of positive relationships and social connections – enhances your overall wellbeing.

We are running a number of workshops in 2018 encouraging you to put your wellbeing first. Evidence suggests that by doing this, those around you – your family and friends, your colleagues and patients – will also benefit.

We recommend attending a Wellbeing Workshop before you attend a **Strengths Workshop**.

## Workshop Details:

- All Workshops run for 2.5 hours, including refreshments
- Facilitated by Alison Ogier-Price MSc Psyc, B.Comm, BA Hons, C.AT, MNZAPP
- For dates and to register for a workshop – [click here](#)

## Workshop Overview:

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

## For More Information Contact:

**Lee Tuki** - Staff Wellbeing Coordinator

**E:** [Lee.Tuki@cdhb.health.nz](mailto:Lee.Tuki@cdhb.health.nz) **P:** 027 689 0285

[Click Here to Register](#)

# AT ANY SIGN OF STROKE — CALL 111 —



*At any sign, act **FAST** and give someone the best chance of recovery.*



# LEAD BY EXAMPLE

Gain the knowledge and skills to supervise your peers to manage and ensure critical reflection, compliance, risk minimisation and service delivery. With a Postgraduate Certificate in Professional Supervision from Ara, you can help meet the increasing demand for professional oversight in the social service, community and health sectors.

This one-year, part time programme uses a blended delivery model that combines face-to-face classes, online activities and workplace assignments.

Apply now, start August.

**[ara.ac.nz](http://ara.ac.nz)**

CHRISTCHURCH | ASHBURTON | TIMARU | OAMARU | ONLINE



**Ara**

Institute of Canterbury

Ara rau, taumata rau

# Are you up for the challenge?!

It's time to get your crew together!

This event is a **unique opportunity** to support the local rowing community and be involved in an **enjoyable** and effective **teamwork** initiative.

- Find a crew of at least **8 people** who want an experience to remember!
- We'll teach everyone how to row an eight over four weeks and then you compete against other corporate teams in a round robin competition over 500m.
- You provide the people → We'll provide the coaches, boats, and heaps of encouragement.



## Corporate Rowing Challenge Spring 2018

**The Regatta: Sunday 14<sup>th</sup> October 2018**  
**Indoor Event: TBC**

Training starts: **Saturday 15<sup>th</sup> September** (or earlier if required)  
Maximum of **12 sessions** over 4-6 weeks (morning, evening and weekend sessions available)

Rules: Each crew must have at least **2 women**  
No crew can have more than 2 registered rowers

Extras: **Free Race T-shirts**  
**BBQ, Beers and Prizegiving** at the Regatta

Cost: **\$1400 + GST per crew**

Register by: **Friday 31<sup>st</sup> August**

Contact: Jane, Avon Rowing Club Manager  
[manager@avonrowingclub.com](mailto:manager@avonrowingclub.com)  
021 027 13015

Information Evening | Master of Nursing Science (MNSc)

## Become a Nurse – build on any degree

Find out more about our two-year, Christchurch-based, Master of Nursing Science  
Tuesday 28 August | Centre for Postgraduate Nursing Studies,  
University of Otago, Christchurch, 72 Oxford Terrace | 5:30pm – 6:30pm  
Please register to attend: [nursing.science@otago.ac.nz](mailto:nursing.science@otago.ac.nz)  
[otago.ac.nz/nursingmasters](http://otago.ac.nz/nursingmasters)

POSTGRADUATE



CHRISTCHURCH