



Keep your focus on making it better for Cantabrians

In recent weeks there has been considerable media comment regarding information in Official Information Act documents that were released by Treasury. Acting Board Chair, Sir Mark Solomon, provided a [detailed response](#) which provided context to a lot of the information in the various documents released.

The fact is that we have a larger-than-forecast deficit, mainly due to additional costs as a result of the earthquakes, and the fact that Canterbury DHB's funding increases over the past six years have been less than the average increase of all other DHBs.

The depreciation on our buildings, and capital charges that we pay the government are also significant contributors to our deficit – these costs can be likened to the interest you pay on your mortgage. When we get new facilities, we have to pay more.

In the 2016/17 year we recorded \$55.8m in depreciation and capital charges, this coming year this will amount to \$72 million and when the new Acute Services Building is handed over we'll be recording \$115 million in combined depreciation and capital charges which go back to the government each year.

With over 40 Canterbury DHB buildings having been demolished as a result of the earthquakes, the challenges of sustaining services with ongoing levels of disruption have been unprecedented in this country. In addition, Canterbury's population has already reached the 2022/23 level used in forecasts by the Ministry of Health.

It is vitally important that the DHB and the entire Canterbury Health System is not distracted by the headlines and continue to do the right things for patients and for our system. We need to continue to provide the best possible care that we are able to provide with the resources available to us. It remains important that we continue to use our resources efficiently and effectively ensuring that we are removing any possible wastage in the system – be that staff or patient time, or how we invest each health dollar – as it can only be spent once.

The Canterbury Health System continues to deliver high quality care and has achieved international acclaim as a world-leading integrated system. Our financial management has been

scrutinised by [two PWC reviews](#) that concluded that Canterbury DHB has relatively stable financial performance and that our capital [building] programme is significant and unprecedented and capital-driven costs [capital charges and depreciation] are significant drivers of Canterbury's bottom-line financial performance.

In the past month a further benchmarking review by health economists Sapere demonstrates that our philosophy of providing more care in the community and keeping the hospital free for those who need specialist hospital-level care is not only better for patients, it's better for our bottom line. Further details can be found [here](#).

“Overall, the comparison of Canterbury and national expenditure suggests that the DHB is making allocative decisions which are in line with its long-term planning objectives, and with the objectives set by legislation. The pattern in general seems to match that which would be expected from a comprehensive range of investments across the health system in order to keep people well at home, at lower cost than in institutional care.”
– Sapere Report 'Benchmarking the resource allocation of Canterbury District Health Board,' July 2017.

At this time of year our hospitals and primary care are busy – I thank each of you for what you're doing to ensure people can access the services they need in a fair and timely way.

Have a great week,

David Meates
CEO Canterbury District Health Board

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Facilities fast facts

Acute Services Building at Christchurch Hospital

The application of intumescent (fireproof) paint to the steelwork at the Riverside end of the building is now largely complete, except for the steelwork around the internal lifts. This should mean that paint smells are a lot less noticeable around the site.

Other new work includes grinding the concrete floors on the ground floor – this process is surprisingly quiet – and fixing the acoustic ceiling to Level 1 below the plant rooms on Level 2.

The first photo below shows the rooftop plinths on which the building's cooling towers, part of the air conditioning system, will sit. They are a good example of how we are building this hospital to meet New Zealand's stringent seismic building codes. The plinths are much wider and thicker than would be necessary in countries with no seismic risk, and are also being braced with steel rods.



This photo shows the ceiling of one of the lower floors already complete with pink batts, cable trays for the electrical wiring and the main pipework in place

Christchurch Outpatients

Now that the building's steel frame is largely in place, the initial fit-out of the building is progressing well. The various specialist fit-out teams are moving quickly from one zone of the building to the next: each team wants to be the first to work in a new area as this makes it easier for them.

Although the Outpatients building does not yet look complete, the ability to make changes to the plans is long past. Locations of all key services, doors, walls, lifts, room divisions and room sizes have all been decided upon in consultation with user groups during the design phases and are now (literally) being set in concrete.

Other site work

Taxi rank to move - The taxi rank on Oxford Terrace is planned to move to a new location on St Asaph Street, at the rear of the Eye Outpatients Department. This should not affect staff or patients as most taxis we use are ordered via phone. Taxi phones are available for hospital patients and visitors at the main entrance to the hospital.



What a different a year makes. The photo on the left is 31 July, 2016 and the photo on the right is 31 July, 2017.

The Library

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

“[IHI Framework for Improving Joy in Work](#)” – ‘joy’ may seem like a fluffy concept but this white paper contends that part of the solution for preventing staff burnout in healthcare is restoring joy to people’s work. It summarizes a surprisingly large literature on theory and evidence about factors, such as management behaviours, system designs, communication patterns, operating values and technical supports. From Institute for Healthcare Improvement, published online: 2017.

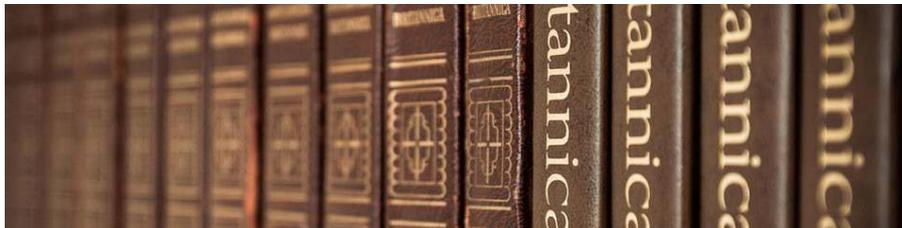
“[Sperm counts among western men have halved in last 40 years – study](#)” – recent findings from a study tracking sperm counts in almost 43,000 men reveal that the concentration of sperm in the ejaculate of men in western countries has fallen by over 52 percent. For the same group total sperm count fell by just under 60 percent. Research into the potential causes is required. From *The Guardian*, published online: 25 July 2017.

“[As more adults are diagnosed with cystic fibrosis, radiologists look for patterns](#)” – radiologists can do more to monitor the wide spectrum of cystic fibrosis (CF) in adults, including nonclassic imaging findings, according to an article published in the July 2017 issue of the *American Journal of Roentgenology*. Recurrent pancreatitis, chronic sinusitis, and Congenital Bilateral Absence of the Vas Deferens (CBAVD) are several of the ways in which CF is identified in adult patients with relatively rare mutations and overall milder manifestations. The article states that radiologists need to be aware of these subtle manifestations to best monitor disease progression and response to therapeutic interventions. From *ScienceDaily*, published online: 26 July 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



The Parking Spot

A new timetable for the Staff Park & Ride to Christchurch Hospital

A revised timetable is now in operation for the Staff Park & Ride from Deans Avenue. The morning times remain the same. Following staff feedback the afternoon times have been extended earlier. The first bus will take staff back to their cars at 3.15 pm and then there will be a constant service until 6.30 pm.

The revised timetable begins today, Monday 31 July.

Please note that this is now a Monday to Friday service. The weekend service has been discontinued owing to lack of uptake.

Revised timetables have been sent out across the Christchurch camps.

Access to Staff Car Park at weekends

Staff are reminded that they can apply for access to the Staff Car Park for weekends and should contact carparking@cdhb.health.nz for more information.



CDHB Staff Shuttle

From 31 July 2017



NEW TIMETABLE - Monday to Friday

Deans Avenue to the Hospital

Departs Deans Ave	Arrives Hospital	Departs Deans Ave	Arrives Hospital
6:00	6:08	15:22	15:30
6:05	6:13	15:27	15:35
6:10	6:18	15:32	15:40
6:15	6:23	15:37	15:45
6:20	6:28	15:42	15:50
6:25	6:33	15:47	15:55
6:30	6:38	16:00	16:08
6:45	6:53	16:15	16:23
7:00	7:08	16:30	16:38
7:15	7:23	16:45	16:53
7:30	7:38	17:00	17:08
7:45	7:53	17:15	17:23
8:00	8:08	17:30	17:38
8:15	8:23	17:45	17:53
8:30	8:38	18:00	18:08
		18:15	18:23

Hospital to Deans Avenue

Departs Hospital	Arrives Deans Ave	Departs Hospital	Arrives Deans Ave
6:08	6:15	15:15	15:22
6:13	6:20	15:20	15:27
6:18	6:25	15:25	15:32
6:23	6:30	15:30	15:37
6:28	6:35	15:35	15:42
6:45	6:52	15:40	15:47
7:00	7:07	15:45	15:52
7:15	7:22	16:00	16:07
7:30	7:37	16:15	16:22
7:45	7:52	16:30	16:37
8:00	8:07	16:45	16:52
8:15	8:22	17:00	17:07
8:30	8:37	17:15	17:22
		17:30	17:37
		17:45	17:52
		18:00	18:07
		18:15	18:22
		18:30	18:37



Bouquets

Magnetic Resonance Imaging (MRI), Christchurch Hospital

I had a friend over yesterday whose five-year-old son had an MRI last week. He used your virtual reality approach and didn't have a general anaesthetic. I'm so proud of him and of your work! My son used to be a patient in the Child Haematology and Oncology Centre and having taken him for many MRIs under general anaesthetic I know what a difference your approach can make to kids and their families. No starving, no stressful post-anaesthetic recoveries and no anxiety for future procedures, not to mention the money you are saving the health system. I just wanted to say seriously well done! Awesome. The family is really thrilled too.

Sue Brown, Public Health Nurse, Public Health Service, Burwood Campus

Thank you so much for your encouragement and support for all of us while we worked together to help... Your manner with him was lovely – while you were firm, he also felt respected which was great. You do a fantastic job and I'm sure you are a saviour for lots of children and their families. Thanks again.

Lorraine, Catering Assistant, Ward 28, Christchurch Hospital

I have really enjoyed having Lorraine here while I stayed for seven days. She made my stay enjoyable and I always looked forward to her coming into my room. When my husband wasn't visiting it was nice knowing I'd have Lorraine visit with coffees, water, food etc. She is always happy and bubbly, gets to know your name and how you take your drinks etc. I really liked knowing she was with me for the whole day, even if we are woken extremely early! Thank you Lorraine, you have helped me stay happy and positive during my stay.

Ward 16 and Special Care Unit, Christchurch Hospital

I have received amazing care from the staff in the Special Care Unit and Ward 16. From the doctors, to the nurses and nurse aides. They are an absolutely wonderful caring team who make recovery so much better. They all deserve bonuses for the work they do. I hope they will be recognised often for this as they deserve it.

Orderlies, Christchurch Hospital campus

The orderlies seem to fly quietly under the radar. I'd like to thank them for everything they do. Always smiling and helpful. Much appreciated.

Ward 27, Christchurch Hospital

Thank you so much for the lovely care that was given to me whilst I was in Ward 27. The nurses were exceptional.

Bone Marrow Transplant Unit, Christchurch Hospital

Staff at the Bone Marrow Transplant Unit have been great – courteous, respectful, pleasant and professional – from cleaning staff, to food service, nurses to haematologists. Thank you!

Burwood Hospital

What lovely staff. Pleasant surroundings. Very accommodating of my elderly father.

Ward 27, Christchurch Hospital

I was a patient in Ward 27 and received fantastic care. Everyone is very hard working and compassionate.

Eye Clinic

Staff were thoughtful and thorough. I was kept well informed. They are a wonderful team. Keep it up!

Emily, Student Nurse, Ward 27, Christchurch Hospital

Emily, your care of my father ... was very much appreciated.

Christchurch Hospital

No complaint. Thanks to all involved in my hernia operation.

Trish and Leo, Emergency Department (ED), Christchurch Hospital

We would like to take this opportunity to say big thanks to the team, especially the nurse, Trish. She was willing to listen to what we had to say and explained to us what she was going to do and what we needed to know. Also the doctor, Leo, who carefully examined my wife ... They both were very kind and we had the best experience we've had in ED, although we were not well. Thank you all.

Ward 11, Christchurch Hospital

My father had an operation to remove a cancerous lump from his neck. I have been extremely impressed with the nursing services on Ward 11, as well as the doctors/surgeons involved with my father's treatment. The staff have been very friendly and have provided confident and competent care. My father is very happy with his care.

Plastic Surgery, Burwood Hospital

All staff were wonderful, from nurses to doctor. Very professional and caring. Thank you.

Wards 17 and 15, Christchurch Hospital

Many thanks to all staff.

Orthopaedic Ward, Christchurch Hospital

I would like to thank the people of the Orthopaedic Ward for their professionalism, their kindness and their compassion for the way they helped both my grandson and his friend in their time of need. You all deserve the very best. Thank you. Best wishes to you.

Head and Neck Service and Gift Shop, Christchurch Hospital

Head and Neck Service great – no wait. Gift shop run by volunteers (best in country) and shop better than Brisbane Hospital as well.

Electrocardiogram, Cardiology Department, Christchurch Hospital

Very good service, seen quickly and no waiting around.

Oncology, Christchurch Hospital

Great hospital. Dealt with my sick Dad greatly.

Intensive Care Unit and Paediatric High Dependency Unit,

What brilliant staff you have in these units. Thank you from the bottom of my heart and God bless his own angels.

BETTER TOGETHER

Destination Outpatients



Getting ready for the big move

Ahead of the April 2018 move into the new Christchurch Outpatients, the 20-plus services involved in the shift are starting to have a supersized clean out of their offices spaces.

For tips on how to Five S – sort, set in order, shine, standardise, sustain – your work space have a look at the videos on the [Destination Outpatients intranet page](#).

If you are still not sure what to do with things you find in drawers and on shelves, keep these tips in mind:

- Patient labelled material any CD's and slides go in to the destruction bin.
- Journals, text books – dispose of in the normal paper bin or take home.
- Unused computer equipment (including screens, hard drives, scanners) and phones – log a job with service desk requesting removal.
- Desks/re-usable office equipment – notify The DHB Depot [using this form](#) – although the form says 'furniture' the depot recycles all manner of things from wastepaper bins, desk organisers right up to desks and cabinets. After sending the form the recycle@cdhb.health.nz team will arrange pick up. If anything is broken, it should be disposed of in the skip.
- Artwork – email: destination.outpatients@cdhb.health.nz and someone will come and evaluate it.
- Clinic equipment – dispose of in the skip. Note any items with Asset ID / Maximo numbers and email to Medical Engineering and Finance (break lasers so they cannot be reused).
- General rubbish – into the skip or the bins by the labs loading dock.

Even if your service is not moving, this might be a good time to give your office space the Five S treatment. Send your before and after photos to itsallhappening@cdhb.health.nz so we can highlight the great work and the difference a tidy up makes.

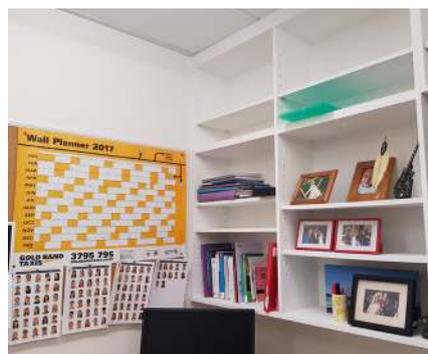
The proof is in the pudding!

Haematologist Sean MacPherson recently moved offices and took the opportunity to Five S his workspace and 'dump the junk'. See photos below.

Before



After



And this is everything that got thrown out

BETTER TOGETHER

Destination Outpatients



Progress to paperlite for the new Christchurch Outpatients building

The Canterbury DHB aims to cut down wherever possible on the large amounts of paper we create and file. As the DHB moves closer towards electronic patient records and online systems, the possibilities of going paperlite or even paper-free are increasingly being explored.

The new Outpatients building offers a great opportunity to take a good look at our existing systems of paper generation and paper handling, and to ask what can be done now to avoid lugging tens of thousands of paper files into and around the new building.

A key goal for COAST (Christchurch Outpatients and Ambulatory Services Team) is to ensure that, as much as possible, we do not need the paper clinical record as we move into the new facility. To support the work required they are focused on drawing up a set of guidelines about what information we must keep on people's 'paper' clinical records, what documents are kept in Health Connect South, what must be scanned and what can be sent to the shredder. Other work includes standardisation of forms, creation of e-forms and reviewing the structure within Soprano to make it easier to know where to find documents.

This work will help to slim down the amount of paperwork sent to and from Records and will be a good step on the road to ensure that the Outpatients services are as paperlite as possible at this stage as we move toward 'no paper' clinical records. It fits well with the good work done so far on Five S-ing people's workspaces, as highlighted in today's CEO update.

If you are in one of the services moving into the new Outpatients building and you need some advice about paperlite processes, please contact Felicity Woodham (felicity.woodham@cdhb.health.nz).

Workshop news

The next COAST workshop is being run at the Design Lab on Thursday 3 August. As well as updating staff on project progress to date, this workshop is aimed at designing effective and workable services and systems which are based on "activity follows" data on various people's roles that has been collected over the past weeks. Around 70 staff are expected to attend.

For more information on the workshop, contact Yvonne Williams (yvonne.williams@cdhb.health.nz)

Latest key messages from Canterbury Clinical Network (CCN)



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

- Updates on the work of the Pharmacy Service Level Agreement and Rural Health Workstream.
- Andrea Judd joining the Rural Health Workstream to provide a Kaikoura Health Te Hā o Te Ora perspective to the group.
- Alliance Support Team (AST) members Bill Eschenbach (Rural Canterbury PHO CEO) and Kathy O'Neill (Canterbury DHB's Team Leader, Primary Care) supporting the connection between the Ashburton SLA and the ALT until an ALT member is appointed to the group.

Breastfeeding Week 2017 – working together for the common good

Little Willa Grace has learnt a few things in the first days of her life, most notably the fine art of latching on. The breastfeeding ritual is something that dad Ruben is more than happy to help his partner and new mum, Justine, get right knowing that his role is one of support to help make things easier.

Ruben and Justine are getting to know Willa and her feeding needs at the start of World Breastfeeding week. Appropriately the theme for the year is SUSTAINING BREASTFEEDING TOGETHER, a reminder that fathers, and whānau all have a role to play to help support mums to make breastfeeding an integral part of their babies lives.

World Breastfeeding Week runs from 1-7 August and ends on Friday with the annual and ever popular Big Latch On. The Big Latch On is an event that involves women gathering together at registered venues to breastfeed and to offer peer support to other breastfeeding women in their community. Family, friends and breastfeeding supporters from the community also attend the events to support and promote breastfeeding. Women staying in the maternity unit in Christchurch Women's Hospital can join in the fun at the Maternity day lounge on Level 5.

Canterbury DHB is also committed to supporting our staff who are mums and continuing to breastfeed. The breastfeeding room recently received a revamp and is available to staff, clients and visitors to use if they need to breastfeed. The room is in the Women's Outpatients Department (Ground Floor, Christchurch Women's Hospital).

With the support of Canterbury Breastfeeding Advocacy Service, we are developing a Canterbury-DHB wide policy to support staff on their return to work who may wish to continue breastfeeding their infant. In the next weeks, we will celebrate further as Canterbury DHB becomes recognised as a "breastfeeding -friendly workplace".

Did you know breastfeeding your infant has several benefits, including:

- Nutrition: Breastfed infants are provided with optimal nutrition and protection against infections.
- Food security: Breastmilk is a safe and secure source of food even in times of humanitarian crises.
- Poverty reduction: Breastfeeding is a low-cost way of feeding babies without burdening household budgets.

Canterbury DHB Director of Midwifery, Norma Campbell, says this week is a wonderful opportunity to celebrate and promote the importance of breastfeeding for the health of mother, baby and the entire whānau.

"This World Breastfeeding Week Christchurch Women's Hospital is celebrating the themes of World Breastfeeding Week Inform, Anchor, Engage, Galvanise – many hands make light work and everyone has a role to play."

She says the week was also a chance to celebrate all that our staff and volunteers do to help and support breastfeeding.

Objectives of World Breastfeeding Week, 1-7 August 2017

- Inform – understanding the importance of working together
- Anchor – recognising your role and difference in your work
- Engage – reach out to others to establish areas of common interest
- Galvanise – work together to achieve Sustainable Development Goals by 2030



Ruben and Justine with baby Willa Grace



Free health advice after hours from the comfort of your favourite chair

Why brave the elements, when you can access health advice from the comfort of home?

If you live in Canterbury – you have options!

- For **written health advice** about a wide range of common conditions you can check out HealthInfo – Canterbury’s go-to site www.healthinfo.org.nz.
- You **can call your own general practice team 24/7**. Dial the usual practice number after-hours and follow the instructions on the answerphone to be put through to a nurse. **The nurse can offer free health advice** – no matter what time of night! If it’s urgent and you need to be seen, the nurse can tell you where to go and what to do. We call it #carearoundtheclock – see how it operates by checking out this [video](#) which shows the after-hours triage nurses at work.

But if you do need to see a healthcare professional:

- Visit one of the **extended-hours urgent medical centres**:
 - The 24 Hour Surgery is now at 401 Madras Street - it’s open 24 hours a day, seven days a week.
 - Moorhouse Medical is open 8am - 8pm every day.
 - Riccarton Clinic is open 8am – 8pm every day.
- Your **pharmacist can also advise** on a wide range of products to alleviate symptoms of coughs, colds, sore throats and other common conditions.
- Emergency **mental health services** are available 24 hours a day, seven days a week on 0800 920 092.
- If you don’t have a regular doctor, **search for ‘family doctors’** on the Canterbury DHB website www.cdhb.health.nz to find links to all Canterbury general practice teams.

At this time of year our hospitals are busy providing care for those who are very sick and need specialist hospital care. If you come to the Emergency Department and it’s not an emergency, you could be in for a long wait as those in the greatest need are always seen first.

You can save time and phone for health advice from the comfort of home – call your own general practice team 24/7. And call sooner rather than later – don’t wait for things to get worse before seeking medical advice. It’s always better to nip things in the bud rather than waiting until you get so sick that hospital is the only option.

If you haven’t already had your influenza immunisation, it’s not too late, and it’s the best protection available to keep you flu-free this winter – talk to your general practice team and it’s also available at some pharmacies.



CARE AROUND THE CLOCK

Make your GP team your first call 24/7.
Even after hours a nurse is available to give free health advice. Phone your usual General Practice number 24/7.

#carearoundtheclock

Canterbury
District Health Board
Te Kaitiaki Takekōwhiri
Whānau Ora

Dedicated trauma nurse coordinator for Canterbury



Trauma Nurse Melissa Evans

Trauma is the leading cause of death for young people in New Zealand.

Now, the South Island has a team of dedicated trauma nurse coordinators working to improve the delivery of trauma

care in major hospitals across the South Island.

Melissa Evans is the Trauma Nurse Coordinator for Canterbury DHB. She gathers and records data in the National Trauma Registry, which is already providing insight into the extent of trauma in the region and will lead to future service improvements.

Melissa says she follows patients from initial presentation in the Emergency Department through to discharge.

“This can mean the trauma nurse coordinator is the only constant person a patient may see on the ward and throughout their admission.”

Every day, the patients who have been admitted with an ACC number are sent through as a report. From there, they are coded into non-major, major and excluded traumas.

“All major or any non-major patients who are at risk are reviewed on the ward and data is collected.”

Her role includes data entry, coding patients, trouble shooting, reviewing medical images and blood tests – working closely with all areas in the hospital, Melissa says.

“I like that I’m helping to make changes to how trauma patients are being cared for. A number of quality changes have been made to benefit the patients and Canterbury DHB

already and some initiatives have crossed over to non-trauma patients as well.”

Compared to the rest of the world, trauma nurse coordinators are relatively new in New Zealand, she says.

“I like that we are paving the way for a new service within the DHBs.”

With the changing face of nursing, the role of a trauma nurse coordinator could extend to advanced nursing practice and hopefully to trauma nurse practitioners, who can work alongside the doctors in managing the care of these patients in a complete and holistic way.

New South Island Alliance General Manager – Mark Leggett

From neonatal to elderly health services, the new South Island Alliance general manager’s career spans 30 years of clinical and executive management.

Bringing an in-depth expertise to the role, Mark Leggett describes his career so far as ‘eclectic’.

“My background means that I can bring a new perspective to the mix,” he says.

“We all come to work to make a difference – I want to add value to not only the South Island Alliance, but to the South Island health sector as a whole.”

Starting as a registered nurse and midwife, Mark worked his way up to senior executive level and has managed a wide range of health services, for both small and large private and public organisations, commercial and non-commercial. He was the Child and

Adolescent Health Service Manager for Taranaki Area Health Board, before moving to Christchurch with his wife – also a Registered Nurse – to pursue a broader range of opportunities in the health sector.

Other management roles include Healthlink South and The Fertility Centre, before becoming General Manager of Medical and Surgical Services for Canterbury DHB, from 2006 to 2009. This role was followed by Vice President of International Services for HHL Group (Healthcare New Zealand) from 2009 till 2016, working alongside some of the highest level business entrepreneurs and leaders in China.

The father of two was most recently Senior Consultant for Francis Health, where he completed a review of the services supported by the Ministry of Health’s funding of Living Donor

Renal Transplants in New Zealand and participated in the current Perioperative Improvement Programme at Bay of Plenty DHB.

Mark says he feels privileged to lead the South Island Alliance Programme Office team. “This is a great opportunity to be part of a South Island-wide initiative, working collaboratively with all the DHBs to deliver better health services to all of the South Island. I have seen the significant progress made in the past five years since the Alliance was established, and given my experience, I know many of the various key players in the industry – I couldn’t not apply for this role. It provides the chance for me to apply everything I have learnt over the years in a wider context, to help improve health outcomes for the entire South Island population.”

One minute with... Jan Danrell, Coordinator of Volunteers, Christchurch Hospital



What does your job involve?

Being the Coordinator of Volunteers involves a range of activities linked by purpose – that of providing patient comforts. This involves delivering services to patients, visitors and staff that will enhance their visit to the hospital in a positive and professional way, providing positive experiences with empathy. The main activities are:

- Wayfinding at Christchurch and Christchurch Women's hospitals, and at Deans Avenue carpark.
- A library service, a flower and gift delivery service plus a daily mobile shopping service for patients, offering a range of items, newspaper, magazines, confectionary, chips, stationery and stamps, toiletries etc.
- Helping at Hagley Outpatients, the Eye Clinic, Christchurch Women's Hospital, the Emergency Department, and other departments.
- Running a gift shop and postal centre in the main entrance of Christchurch Hospital
- Dispersal of the funds generated by the shop and the trolley.

My job involves interviewing, orientating, placing and training new volunteers in various roles. We have had a large number of applicants from overseas, which is exciting. I also buy the stock and gifts for the shop and oversee pricing. The proceeds of the shop and trolley are available for staff to apply for funding. The Volunteers committee meets monthly to consider applications for funds for projects, study grants, and a huge variety of comfort items including furniture and distraction 'items' (TVs, virtual reality items, CD players, toys,

and wheelchairs) for patients. I work with various Canterbury DHB staff to make these happen. Annually we donate up to \$200,000 worth of items. We have 150 volunteers.

I regularly communicate with other coordinators around New Zealand to share information.

Why did you choose to work in this field?

This role was the perfect fit for bringing together my accumulated skills. My family were all volunteers, which meant I was exposed early to volunteering. I was a teacher and graduate of London University (Health and Biochemistry). After teaching and studying accounting, I was the event organiser for the National Office of Guides New Zealand for 10 years, working on all the jamborees, and with some great volunteers. A year in Health Information followed, and then this role was advertised, one where I could use and combine my skills, and still have the challenges of learning retail and postal.

What do you like about it?

I love the volunteers and all the wonderful people I meet at the hospital, both from within and external contacts. I love the variety of work, and the rewards and pleasure we are able to give to the patients and their families. And I love meeting all the international volunteers from numerous places round the world, and we see wonderful changes as they gain in confidence and English. I have no trouble getting up early to come to work!

What are the challenging bits?

The most challenging bits are keeping volunteers fulfilled so that they give their best to the patients. This involves ensuring they have variety, and giving them ownership of their roles, especially in the gift shop. I believe volunteers should be consulted about the shop, as they are involved in stocking and display of items to make it attractive and easy for those who serve and those who buy. A sense of humour is essential as things do go wrong! Overall, volunteering needs to be a win-win experience for us all – it must be working as we never have many vacancies!

Who inspires you?

The volunteers' loyalty and clear demonstration of love for what they do is what inspires me. We have volunteers from 16 years old to 86, all working with one purpose. They often stand on hard floors for four hours at a time, never complaining. Their compassion and positivity for all is amazing, no wonder they are recognised with some national awards!

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?

The Canterbury DHB values are integral to the work of the volunteers. I work hard to encourage these to be displayed in all the volunteer work. The volunteers take seriously the fact that they are representing the hospital, along with the wonderful reception staff and orderlies, and show care and respect.

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

I was recently lent the book 'Time to Care' by Dr Robin Youngson. It was inspiring, with amazing examples of how those who work in healthcare can learn the skills and experience the results of compassionate caring. It has many ideas which can be used by volunteers and I am inspired to promote these. I love books by Bill Bryson. These are light reading - great for a weekend away.

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

Too many places in the world to choose one but Doubtful Sound in my campervan would be one of my favourites.

My ultimate Sunday would involve?

Relaxing somewhere beautiful and quiet in New Zealand with blue sky, sunshine, no wind, in a deck chair with friends, and sharing a meal and a wine.

One food I really like is...

A favourite is hard to pick, probably fresh bread with fresh salad and fruit.

My favourite music is...

I like a variety of music, no favourites as it depends on mood! I do like jazz though!

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

Step to Steptember

The management team from Canterbury Linen Services (CLS) – Rodney Fisher (General Manager), Dayne Wipou (Production Manager), Clive Hackett (Customer Service Manager) and Billy Powell (Health and Safety Coordinator) – are taking on their staff to complete more than 10,000 steps per day to raise money for the Cerebral Palsy Society.

CLS is a subsidiary of Canterbury DHB.

CLS management would like to encourage everybody to get involved at Steptember.org.nz - not only to raise money for the Cerebral Palsy Society, but also to increase awareness of health and wellbeing in your daily lives. Get active!



Canterbury Grand Round

When: Friday, 4 August 2017 – 12.15pm to 1.15pm with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker 1: Lara Hopley, Specialist Anaesthetist, Waitemata DHB and Jo van Schalkwyk, Perioperative Physician, ADHB

“Should clinicians code ... or should coders learn medicine”

In the half-century since Larry Weed explained how to fix health IT, we haven't. The best systems are expensive, proprietary, have modest benefits on error and quality, and mildly slow us down. We put forward a two-tier solution, where clinicians become active participants in continuously improving the quality of medical software, and the computer becomes a partner in excellence. Hard work will be required. Do try this at work.

Chair: Helen Lunt

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 2.6
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton
- » The Princess Margaret Hospital, Riley Lounge

All staff and students welcome

Next is – Friday, 11 August 2017 (Rolleston Lecture Theatre)

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

Stroke support improved “immensely”



Shona Andrell

With the annual South Island Stroke Study Day coming up in November, a Christchurch woman shares her story, which focuses on the care and support that is such an important part of rehabilitation.

Stroke has been a big part of Shona Andrell's life for over 20 years.

She has been involved in the care and support of both stroke survivors and carers since her husband Ian's first Stroke in 1996 – and last year, she suffered a stroke herself.

Over the past two decades, she has seen improvements in the quality of care provided to stroke survivors and their families – and she has also helped facilitate that change.

Ian Andrell had just turned 60 when he had his first stroke. He faced a long rehabilitation period and spent about a month in hospital.

Shona says during this time she felt lost.

“I didn't feel I got much moral support. I went from hospital not knowing what I was entitled to.”

When Ian returned to work Shona drove him each day. She also had to shower and dress him. Shona's family were concerned about her stress levels and lack of support. After a meeting with

Shona and Ian's general practitioner, a meeting with a stroke field officer was organised.

A suggestion was made to join a stroke club for support, so the couple went along, but the other attendees were all elderly.

Realising a need for a stroke club to support younger stroke survivors, the Stroke field officer helped establish one with Shona. This became the Richmond Younger Stroke Club.

Ian had another stroke in 2009. This time, the stroke resulted in Ian suffering acute paranoia. It was soon decided that Ian's needs were best catered for in a residential care facility. Shona visited Ian in care every day, until last year when she had a stroke herself.

She says the range of support available has improved immensely over the years.

“It was just so different from when Ian had his stroke. I had daily physio and saw an occupational therapist most days, who taught me helpful shortcuts and skills to shower and dress myself. I found that really useful when I came home.”

The social interaction at the Burwood Hospital stroke ward was also beneficial.

Shona shared her story with health professionals at the annual South Island Stroke Study Day at the end of last year, run by the South Island Alliance Stroke Workstream.

Almost 250 Stroke service providers, stroke teams, general practitioners and practice nurses from across the South Island learnt about a wide range of stroke-specific topics at the event, including the management of post-stroke depression, and the transition from hospital to home.

A case study is presented by a stroke patient at each event, so attendees can learn how to enhance their practice of quality stroke care. This year's Stroke Study Day will be held on 2 November.

“New Zealand is pretty good at catering for people with disabilities and providing facilities these days,” Shona says.

A lot has been done over the past 20 years, but there's always room for improvement to make services more accessible for everyone.

South Island STROKE STUDY DAY

Enhancing your
day-to-day
practice 2017

Thursday 2 November 2017
9am to 3.15pm
Rolleston Lecture Theatre,
Christchurch Hospital

TOPICS:

- Stroke - Imaging (MRA, CTA) and diagnosis
- Māori perspective on stroke services
- Spasticity- treatment options to improve function
- Visuospatial problems
- Continence
- Intra-arterial clot retrieval - a 'game changer'

And more.

COST: (early bird registrations to be paid by 4 October 2017)
\$50 Early bird individual registration
\$85 full cost from 5 October 2017

Stroke services providers and stroke teams from across the continuum of care are invited for a study day, focused on how we can improve the quality of care we provide stroke patients.

For more information and registration:
strokenetwork.org.nz/SI+Study+Days
Claire Gee, Stroke Foundation
Southern Regional Administrator.
southern@stroke.org.nz
03 381 8500



Reducing the load on email inboxes

Ever returned from holiday to rear back in horror from your grossly overflowing inbox?

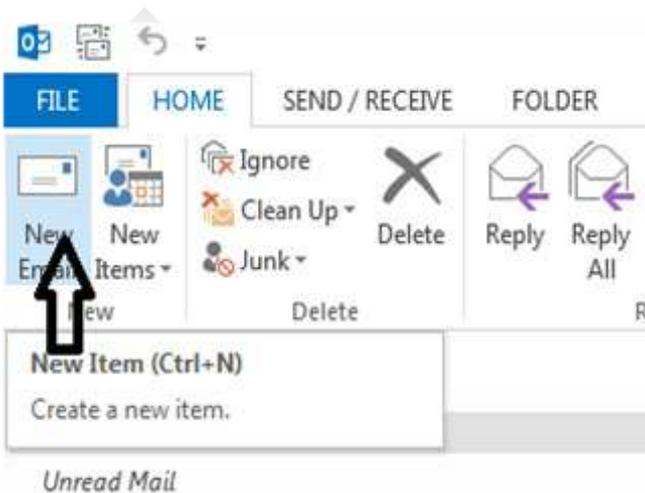
Clinical Psychologist, Simon Pankhurst, who works for the Child and Family South Community and Outreach Team, is on a crusade to reduce the time we spend reading, sorting and deleting emails.

“There is a very simple thing we can all do especially when we send group emails to 5+ people - we can set the email to expire,” says Simon. “This means that after a certain date and time it will appear with a line through it to help make it known that it is no longer relevant.”

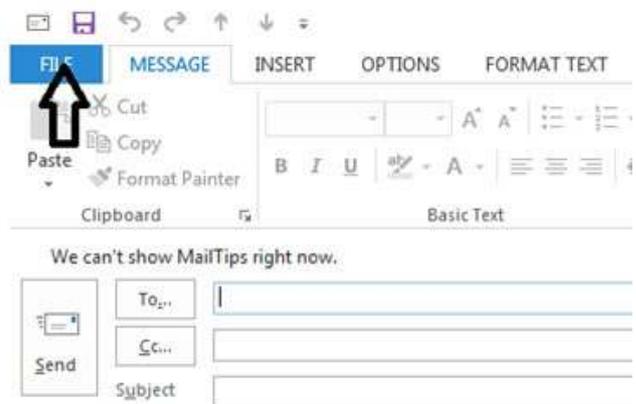
The three simple steps to make an email expire are:

1. Write the email and click File.
2. Click properties.
3. Check the box and set the expiry date and time and send.

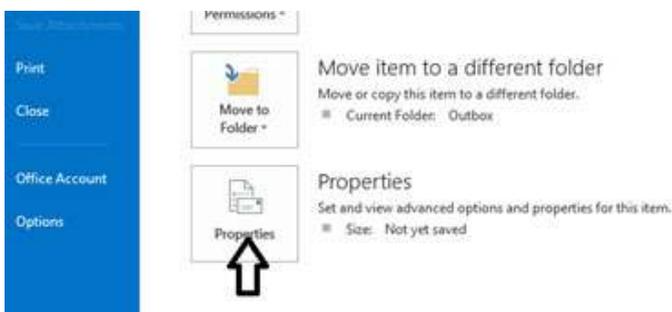
Your colleagues returning from holiday may thank you for it.



1. Control N to open a new email message or



2. Before starting Click "File"



3. Click Properties



4. Check "Expires after" and set the expiry date to a date when your email will be no longer be relevant. E.g. if you are emailing a meeting date, then just after the meeting. Click close and send.

Health Quality & Safety Commission's E-digest out now



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



E-digest, Issue 70, 12–25 July 2017

In the latest edition of the Health Quality & Safety Commission's E-digest you can read about a revised Ministry of Health guide to community engagement for people with disabilities; updated patient deterioration resources including a series of tools and guidance documents to help you prepare for and implement improvements to your recognition and response systems; and Adverse Event Review workshops being held in Christchurch 3–4 August 2017. These workshops are relevant to all health sector staff who undertake reviews on serious adverse events, and would like to understand and master the essential components of a high-quality review.

Read more [here](#).

South Island STROKE STUDY DAY

Enhancing your day-to-day practice 2017

Thursday 2 November 2017
9am to 3.15pm
Rolleston Lecture Theatre,
Christchurch Hospital

Please complete registration online (strokenetwork.org.nz/SI+Study+Days) or complete the registration form below and return to Claire Gee, Stroke Foundation Southern Regional Administrator. Email: southern@stroke.org.nz

Name:

DHB district:

Discipline:

Work place:

(Primary care, age residential care, rehabilitation, acute hospital, community provider etc.)

Email:

Dietary:

(please indicate any special requirements)

Attendance approved by:

(manager's name)

Cost: (early bird registrations to be paid by 4 October 2017)
\$50 Early bird individual registration
\$85 Full cost from 5 October 2017




Payment options:
We would prefer payment by direct credit when registering:
Direct credit BNZ account number: 02 1269 0023111 004
(please reference with your SURNAME and SISD).

Cheque: Payable to Stroke Foundation of NZ, PO Box 26024, North Avon, Christchurch, 8148

If you need an invoice to organise payment please tick here and provide contact name for account department and address details.

Health Research Society of Canterbury - Poster Expo 2017

Thursday 10th August 6:00–8:00pm

In the John Britten Building Foyer
corner of Creyke and Engineering Rd
(formerly the NZi3 building)

Display recently presented or new research
posters and network with health researchers

Pizza and refreshments provided

For all Canterbury Health Researchers

Entry free to members

(Join the HRSC for \$10 on the night using VISA or cash, or join the
society NOW at <http://www.hrsc.org.nz/>)

All POSTERS can be entered into the poster competition with a
CASH PRIZE of \$100 (The Rutherford Poster Prize).

Registration of Posters: To display a poster please email
paul.docherty@canterbury.ac.nz with the title, affiliation
(Dept and Institute) and name of the presenter.

Further Information

Dr Margaret Currie, 364 0554, margaret.currie@otago.ac.nz

A/Prof Steven Giesege, 3642 987 ext 7049, Steven.Giesege@canterbury.ac.nz

Dr Paul Docherty, 364 2987 ext 7211, paul.docherty@canterbury.ac.nz

Canterbury

District Health Board

Te Pori Hauora Ō Waitaha



Simulation Instructor Course



Canterbury District Health Board are proud to offer this internationally recognised, 4 day simulation Instructor course, working in partnership with the Boston based Centre for Medical Simulation (CMS). The course is designed for simulation educators who seek to create high-quality healthcare simulation programs.

This course immerses healthcare simulation instructors in a multi-method course wherein participants learn how to teach clinical, behavioural, and cognitive skills through simulation. It draws from the disciplines of aviation, healthcare, psychology, experiential learning, and organizational behaviour. Participants explore simulator-based teaching methods applicable across the healthcare education spectrum, including undergraduate and graduate medical, nursing and allied health domains. The daily formats vary and include; simulation scenarios, lectures, small and large group discussions, and practical exercises with feedback..

Thursday 12th October—Sunday 15th October 2017

Venue: CSU, 5th Floor Riverside, Christchurch Hospital.

Cost: \$NZ7,000 per person

Closing date for registrations - 30th July 2017

CRITERIA FOR SELECTION

- Places will be allocated with an emphasis on a multi-professional team
- First registrations received will be offered first places and a payment due date
- Received payment with written confirmation secures workshop place
- Non payment by due date will see that offer passed to another candidate
- After the 4 day workshop, all attendees will have the opportunity to work with a qualified simulation instructor to support and debrief you following your first session
- Access to a computer is required to download learning material and view video clips

Right care and support, by the right person, at the right time, in the right place, with the right patient experience

CONTACT
DETAILS

[Email: skills.unit@cdhb.health.nz](mailto:skills.unit@cdhb.health.nz)

CANTERBURY DISTRICT HEALTH BOARD

CMS—Simulation Course

Registration—Closing date 30th July 2017

- Complete the registration section below
- Attach your simulation project abstract

Send via email to: skills.unit@cdhb.health.nz

Once all the documentation has been reviewed, you will be notified if you have been successful and given instructions for payment. Failure to pay by the due date will result in your place being offered to the next candidate.

Simulation project

To meet the criteria to attend this course you need to supply an abstract (maximum 300 words) that will be presented to local, national and international groups.

The project needs to be

- Inter-professional
- Align with organisational and/or national targets

Cancellation Policy

Closing date 30th July 2017

Once payment has been received we require notice of cancellation in writing to skills.unit@cdhb.health.nz

Cancellation within 28 days of course commencement will incur a charge of 5 %

Cancellation within 15-27 days of course commencement will incur a charge of 25%

Cancellations within 7-14 days of course commencement will be charged at 50%

Cancellations of less than 7 days of course commencement will be charged 100%

REGISTRATION DETAILS (please print)

Full name:

Profession:

Place of work:

Contact Email:

Telephone Number:

Special dietary requirements:

Special needs:

Scan & Email to: skills.unit@cdhb.health.nz

**THE NZ EARLY INTERVENTION IN PSYCHOSIS SOCIETY
AND TOTARA HOUSE PRESENT THE 2017 EARLY
INTERVENTION IN PSYCHOSIS TRAINING FORUM:**



Resilience

Rebuilding

Growth

**RESILIENCE, REBUILDING AND GROWTH:
PROMOTING WELLNESS AND RECOVERY
FOR YOUNG PEOPLE, FAMILIES AND
COMMUNITIES AFFECTED BY PSYCHOSIS**

Monday 6th and Tuesday 7th November 2017

Post Conference Workshops Wednesday 8th November

The Atrium, Hagley Park, Christchurch

Save the date and join us for the biennial EI training forum. It will be a great chance to hear about the latest developments in Early Intervention in Psychosis, both nationally & internationally. We hope to deliver a programme that has broad appeal to clinicians working with people & families who have been affected by psychosis, both in & out of dedicated EI settings. We are excited that we will have input from Orygen, The Australian National Centre of Excellence in Youth Mental Health & world-renowned experts in EIP. We will be strongly promoting service user involvement, showcasing creativity in recovery & highlighting the value of Peer Support throughout the event.

CALL FOR SUBMISSIONS:

WE WOULD LIKE TO INVITE YOU TO CONSIDER A TOPIC THAT YOU COULD DELIVER A POSTER, PRESENTATION OR WORKSHOP ON DURING THE CONFERENCE

TOPICS COULD INCLUDE:

- Cultural perspectives on recovery
- Promoting physical health
- Working with families
- Peer support interventions
- Resilience & posttraumatic growth
- Psychosis & co-occurring conditions or substance use
- Psychosis & cognitive or neurodevelopmental issues
- The delivery of EI Services
- Promoting functional, social & vocational recovery
- Current research in EI
- The pitfalls & potential uses of technology
- Talking therapies for psychosis
- Resilience & wellbeing for young people, families, staff teams & communities
- Suicide prevention

PLEASE CONTACT TOTARA HOUSE TO DISCUSS ANY IDEAS YOU HAVE

TEL: 03 335 4525

Eleanor.Baggott@cdhb.health.nz
Gaynor.James@cdhb.health.nz

Get the latest conference developments and find more details about the programme, speakers and workshops at:

www.earlypsychosis.org.nz

www.facebook.com/NZEIP

Registrations will open in July

New Zealand Early Intervention in Psychosis Society (NZEIPS) Inc.



Te Pou
o Te Whakaaro Nui

Canterbury
District Health Board
Te Poari Hauora o Waitaha



Bereaved by Suicide?

WAVES

A Bereaved by Suicide Group

This grief education programme is for adults (18+) who have been affected by the suicide of someone they know.

The group allows members to

- share their thoughts and feelings around what's happened
- discuss the nature of suicide
- gain information and ideas about how to care for themselves and others, including children, after a suicide

The group is facilitated by professional social workers and/or trained facilitators and runs over 8 weeks.

Next programmes:

Dates: Mid August 2017

Time: Runs on a Wednesday evening from 7.00pm – 9.00pm

Cost: Koha/Donation

To register your interest in attending please contact

Jamie at Supporting Families in Mental Illness

Phone: (03) 595 2683 or 0800 87 66 82 or by email waves.sfpb@xtra.co.nz

Email: waves.sfpb@xtra.co.nz