Thank you

Thank you all for your continued focus on delivering high quality care to your community despite the almost insurmountable challenges that we continue to face on a daily basis.

The Canterbury Health System has been under tremendous pressure with many services at or exceeding capacity. While we have had a very mild influenza season to date, services are grappling daily with increased demand and complexity within an increasingly constrained Canterbury Health System.

Mental health continues to manage more patients than it has the facilities to support, which continues to create a very challenging environment for staff and patients.

I am so incredibly proud of the way in which everyone in the Canterbury Health System has continued to focus on patient flow and patient care despite our health system now being at and increasingly beyond capacity, whether that be intensive care, neonatal intensive care, paediatrics, mental health, maternity, surgery, general medicine, laboratory, radiology, emergency department, primary care, oncology, or in one of the many other areas of direct patient care. If it feels difficult at the moment, that’s because it is. We are working to capacity and then some.

We all need to continue to support those who work with us and alongside us, and for all of us to continue to make the best choices and decisions with the resources we have available. It has been an incredibly challenging seven years since the 2011 quakes, which resulted in the loss of over 44 buildings, population growth that has exceeded forecasts, unprecedented growth in mental health along with numerous service moves and ‘making do’ in less-than-ideal circumstances testing the ingenuity and patience of many – while continuing to provide services in the middle of a construction zone. And in the case of Christchurch Hospital, trying to maintain access when the parking options are shrinking as construction and roadworks dominate the landscape.

Now more than ever we need the “whole system to be working for the whole system to work”.

We will need to continue to adapt and be nimble as we face the challenges ahead of us.

Thanks to each and every one of you for continuing to do the best for the people who rely on us to provide expert treatment, care and support.

Canterbury is a large national contributor

Canterbury is a large health system delivering a significant proportion of New Zealand's health capacity. Based on Statistics NZ data, Canterbury has 11.5% of New Zealand's population. As well as providing care to our own population, we provide significant volumes of services to people from other DHBs.

On a national basis, recent data indicates Canterbury provided:

- 10.9% of acute [unplanned] and planned inpatient care, including 11.6% of acute surgical discharges but 13.7% of acute surgical discharges with a procedure
- 12.1% of elective [planned] surgery inpatient discharges

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› 11.8% of mental health and 11.5% of forensic mental health care
› 19.2% of oncology inpatients
› 14.3% of medical oncology, 22.7% of radiation oncology and 20.3% of LINAC [Linear Accelerator] cancer treatment in outpatients.

In some instances it appears that we provide less acute and planned/arranged care [discharges] than our share of population. However, the reality is that this reflects just how effective the Canterbury community acute demand initiative has been.

Last year 33,000 people were managed in a community setting, often in their own home with care being organised and led by a General Practice team – this saved 33,000 people and their families the inconvenience and disruption of having to be admitted into hospital. While these people are largely ‘invisible’ when it comes to national reporting, it’s a significant achievement, and one of the main reasons our health system has been able to keep functioning in the face of ever-increasing demand.

Interestingly, the achievements of our integrated system haven’t escaped the notice of the UK’s National Health System, and the King’s Fund who continue to publish reports that talk about what can be achieved in an integrated system. Canterbury’s integrated system is again cited in a July 2018 report by The King’s Fund: *The NHS 10-year plan: how should the extra funding be spent?* by Professor Chris Ham and Richard Murray.

I want to acknowledge that it’s tough at the moment, with no let-up in demand, and I want to thank you for the passion and professionalism you continue to bring to work every day, to ensure people who need our care and support are well looked after.

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

David Meates
CEO Canterbury District Health Board

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**An average year in Canterbury**

- 6,000 babies are born
- 270,000 radiology tests completed
- 670,000 outpatient appointments
- 99,000 presentations to ED
- 4.4 million laboratory tests completed
- 180,000 consultations with our specialist mental health services
- 21,000 elective surgeries completed
Bouquets

Mothers and Babies Unit, Specialist Mental Health Service, The Princess Margaret Hospital
I just want to express how grateful I am for the care I have received. Every member of the team I have met, from consultant, to nursing staff, to the Multi-Disciplinary Team, to the cleaner, have been kind and professional. I knew that I was safe and the nursing staff gave me hope. I’m grateful for all the times the nursing staff sat with me, helped me and made me see a better future. This unit is very special and I’m lucky it was here for me.

Clinical Records Audit Desk, Christchurch Hospital
I’d like to send a special thank you to the team running the Clinical Records Audit Desk. I asked for some records and expected a delay for them to arrive. Instead they began to arrive within 24 hours and continue to arrive. It’s made such a difference. Thanks for the rapid work.

Ward 16, Christchurch Hospital
Wonderful nurses and nurse aides, they really looked after our sister, who has intellectual disabilities. Our sister needed hoisting for all movements, she is non-verbal and needed care and kindness and got that and more. I really valued the excellent nursing and great medical help from the doctors. All done in the midst of a busy and full hospital ward. Well done.

Emergency Department (ED), Surgical Assessment and Review Area and Ward 17, Christchurch Hospital
 Came to ED in the early hours with severe abdominal pain... Heartfelt thanks and appreciation to everyone involved in my care, wellbeing and recovery. Outstanding job from nurses in ED and on the wards. ED doctor Alex, Mr Sharma and team, surgical team, orderlies and radiologist – all friendly and professional. Everyone did an outstanding job. I had no fears and doubts. I was well informed and my concerns and questions were taken on board. I was reassured and felt I was in good, capable hands. Everyone was kind, warm, friendly and professional. The service I received was outstanding. A huge heartfelt thank you to everyone.

Volunteers, Christchurch Hospital
The volunteers are brilliant, especially Catherine, who was on duty in the morning of 7 August.

Christchurch Hospital
I was asked to pass on a compliment from (name withheld). He was recently in supporting a teenage gentleman with an impact injury and his family. His words were that the professionalism and helpfulness beginning from the help desk and throughout the lad’s hospital journey was superb and he was very appreciative.

Eye Outpatients Clinic, Christchurch Hospital
I found the Eye Clinic an extremely well run clinic, efficient and friendly staff. No waiting time to speak of. Well done.

Cardiology Outpatients, Christchurch Hospital
The service from the front office to the nurses is all one could ask for. It is not easy to please everybody, we all have different needs.

Christchurch Hospital
I would like to say the treatment and care I’ve had from your doctors and nurses was absolutely marvellous. I thank you from the bottom of my heart.

Surgical Progressive Care Unit, Christchurch Hospital
Thank you for being amazing and caring to my loved one. Nothing bad to say and very appreciative.

Oncology Department, Christchurch Hospital
The staff at Oncology (Radiation) are wonderful.

Ward 19, Christchurch Hospital
Sven and Claire rock.

Ward 18, Christchurch Hospital
The nurses on this ward were like angels, and the doctors were great also. The care of our mother has been exceptional at all levels.
Emergency Department, Christchurch Hospital
I do remember the incredible kindness of the wonderful team at the Emergency Department of Christchurch Hospital... I have been so impressed with the quality of our public health system, which is so responsive in times of need... my gratitude to each and every one of you, who devote your lives to the care of others. Thank you.

Ward 15, Christchurch Hospital
Nurse Lauren in Ward 15 was very good to my son. She spoke clearly and gave succinct instructions with a lovely manner.

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

“Overdiagnosis in primary care: framing the problem and finding solutions” – This review explores overdiagnosis in relation to the screening of asymptomatic patients, the drivers and consequences, and provides recommendations for research and discussion. From British Medical Journal, published online: 14 August 2018.

“Nanomedicine could revolutionise the way we treat TB. Here’s how” – Current treatments for one of the world’s deadliest infectious diseases relies on patients taking drugs in large daily amounts over six months. People often don’t finish their course. Immunotherapy using nanoparticles could hold hope as an easier and more effective treatment. From The Conversation, published online: 16 August 2018.

“Tick- and mosquito-borne diseases are increasing dramatically” – This articles explores the possible contribution of climate change to the three-fold increase in vector-borne diseases in the United States between 2004 and 2016, and how community engagement will be critical to address this increasing threat. From Scientific American, published online: 10 August 2018.

If you want to submit content to The Library email communications@cdhb.health.nz.
To learn more about the real-life library for Canterbury DHB:
› Visit: www.otago.ac.nz/christchurch/library
› Phone: +64 3 364 0500
› Email: librarycml.uoc@otago.ac.nz

If you have a story idea or want to provide feedback on CEO Update we would love to hear from you! Please email us at communications@cdhb.health.nz. Please note the deadline for story submissions is midday Thursday.
If you’re a non-staff member and you want to subscribe to receive this newsletter every week please subscribe here.
Facilities Fast Facts

Christchurch Hospital campus

It has been a very busy week across the Christchurch Hospital campus for construction and related works.

› Grease trap replacement by Food Services – most of the concrete has been broken up now, but further excavation will be needed before the new grease trap is installed.

› A large tree was removed near to Hagley Outpatients to allow site access.

› The fire sprinkler main has been relocated successfully – this will allow work to start on the Link piling on Tuesday 21 August.

› Other drainage work has also been needed along the rear of the Oncology building.

› A high voltage cable is being laid from Christchurch Women’s Hospital across to the Acute Services building.

› Roadworks continue along Oxford Terrace, between Christchurch Hospital and the new Outpatients building. The stairs down to the street level outside the School of Medicine are being closed overnight when required for this work.

The first hospital buildings were constructed in 1862 and many buildings have come and gone on the site since that time. As a result, contractors on the current building projects often discover unexpected buried services that are not shown on any plans, including, this week, an old cast-iron fire mains.

The Acute Services building will have its first roof wash and clean soon. Work is also progressing on the entrance to the building, including steel fins that will act as a decorative and structural feature of this area.

Christchurch Outpatients

With around nine weeks to go until the new Christchurch Outpatients building opens, landscaping around the building is now underway, as shown in this webcam view. Oxford Terrace curves along the foreground of the picture. The old road surface and the buried tram tracks have been removed. The main entrance to the building will be beneath the grey triangular porch, and the main pedestrian crossing point to Christchurch Hospital will be where the white ute is parked, in the lower left of the photo.
Destination Outpatients – Week nine

Lifting the lid on the Christchurch Outpatients building
This week we go behind the scenes to find out how the new building works – what keeps it cool, what keeps the air fresh, and how the dentists will keep their patients laughing. Thank you to our amazing Maintenance and Engineering superstars Maintenance and Engineering Manager Terry Walker, Services Engineer Dave Watson and Facilities Commissioning Manager Alan Bavis who made our trip possible, and who managed to explain complex engineering terms in words of one or two syllables for the less mechanically minded.

Click here to see the Week nine video, which also includes a welcome message from Christchurch Hospital General Manager Pauline Clark.

Laughing all the way to the bank
Dentists can't do their jobs properly if their patient is not relaxed. Nitrous oxide – commonly called laughing gas – is used to calm more apprehensive patients and to help them feel comfortable during certain surgical procedures. The new Outpatients building has 12 hospital dental surgery rooms, including four surgery suites. Nervous patients can be reassured that there are 14 cubic metres of nitrous oxide in the building’s bottle bank.

For fans of the new Outpatients...
This photo shows one of nine big fans that are linked to the air-cooled SMARDT frictionless bearing chillers on the roof. A building such as Outpatients needs chillers otherwise it would get hot and stuffy inside very quickly. The chillers use about 480 kW of power each, equivalent to about 2,700 domestic refrigerators – that's a lot of cooling. Frictionless bearings use magnetic forces so the fans can spin very, very fast; the lack of friction reduces heat and saves wear and tear.

How do I find out more?
If you have any questions about the move to Christchurch Outpatients, please ask your manager or drop the COASTers a line at destination.outpatients@cdhb.health.nz

The Communications team will be in touch with each service ahead of the move to ask what your needs might be in terms of signage, posters, maps, information sheets and so on for patients. Appointment letters will also be updated ahead of the move.

For the latest updates, join the Facebook group: www.facebook.com/groups/destination.outpatients
Welcome to our new clinical medical leadership team members

Over the next few issues of CEO Update, we will be profiling new appointments that have been made to the clinical medical leadership team since the beginning of the year.

Clinical Director of Anatomical Pathology
Canterbury Health Laboratories

After working overseas in Canberra, London, Boston and Perth, Chris Hemmings returned to New Zealand earlier this year to take up the role of Clinical Director of Anatomical Pathology Canterbury Health Laboratories (CHL). The role was previously held by Gavin Harris.

As Clinical Director, Chris is responsible for medical leadership of the department, which she says covers everything from maintaining the day-to-day service to referrers, managing staff, and assisting the CHL management team with planning how the service will grow and develop into the future.

Her vision is for the department to be recognised as a national leader in diagnostic and academic pathology.

“I’d like to see our department (and pathology in general) gain greater recognition as a vital part of medical care. It’s been estimated that 70 percent of all medical treatment decisions are informed by a pathology result but sadly, most people (including a disturbing number of other health carers!) have no real idea of what we do,” says Chris.

“We have a mostly fairly young team of pathologists and an important part of my role is also to mentor and support them to develop their careers, and be the best they can be.”

The department has been short of pathologists recently and this has made it difficult to find time and energy for professional development.

“But as we hope to be fully staffed by mid-2019, I’d also like to see more of our pathologists engaging in the profession more broadly, such as through College activities, research and teaching.”

Chris says it’s been lovely to come home and to join such a great department. "It's a really cohesive, friendly group. We have some excellent diagnosticians in our pathologist team and I'm proud to be working with such talented people."

She is aware that it won't all be smooth sailing.

“The service faces a number of challenges that are probably familiar to other departments too – infrastructure, recruitment, and so on. We also need to keep on top of new developments and adapt to changing technologies, such as new lab software, and new testing platforms coming on line.”

Having recently completed a PhD looking at treatment response in rectal cancer, it’s hard to believe Chris spends much time relaxing but when she does she likes cooking for friends and listening to music.

At the moment she's enjoy getting out in her new garden and planning a vegetable patch. She's also very happy with the recent performance of her team, the Crusaders!
Chief of Medicine

David Smyth took over the role of Chief of Medicine from Alan Pithie in February this year.

Originally from England, David has a background in Cardiology. After doing his training in London, David took a Cardiology role in Hamilton to cover for a colleague who had gone on a sabbatical, and had been promised a job in the United Kingdom upon his return. That changed, though, when he applied for a role in Christchurch before returning.

“I didn't expect to end up getting the job, but I did. The rest they say is history, and I have been in New Zealand ever since,” David says.

After working as a Clinical Director of Cardiology for 10 years, David was looking for a new challenge, and the role of Chief of Medicine is going to provide him with this opportunity.

“The role I’ve stepped into is very complex and multi-faceted. There’s a leadership element where I provide support to clinical directors in their decision-making and planning, as well as a medical element where I provide senior management with information on what’s happening in the world of medicine.

“The most challenging thing so far has been coming up to speed with the pressures and work of other specialist departments, such as rheumatology, neurology and dermatology.

“However, this is also what has been the most rewarding: I get to work closely with colleagues in other areas and learn a lot from them, and I can use my longstanding experience as a clinical director to help them deal with challenges I have faced that they are now facing.

“I inherited a highly functional and efficient internal medicine service from Alan. My aim is to continue this trend, and carry on working in an efficient way that is the best for our patients,” David says.

Outside of work, David likes to keep fit by cycling to and from work and going mountain biking in the weekends. He also enjoys more relaxed pursuits, such as listening to music and reading.

“I also have four kids living in various parts of the world and I live vicariously through them.”
Canterbury DHB supports a Christchurch free from alcohol-related harm

A safe, vibrant, healthy Christchurch free from alcohol-related harm is the vision of the newly launched Christchurch Alcohol Action Plan (CAAP). More than 70 people attended the public launch event last Tuesday at Christchurch City Council (CCC), acknowledging the importance of collaboration in achieving this vision.

Alcohol-related harm is too important to ignore, particularly in Christchurch where we currently experience high rates of Emergency Department presentations, deaths and chronic illness related to alcohol. Alcohol attributes to approximately 800 deaths per year in New Zealand, and in 2011 alcohol was estimated to cost the Canterbury Health System $62.8 million.

Community and Public Health have worked closely with the Christchurch City Council and NZ Police over the past two years to develop the CAAP – a multi-agency response to community concern about harmful alcohol use. The CAAP encourages community action and participation in local responses to addressing harm.

Speaking at the launch, Dr Nicki Jackson, Director of Alcohol Healthwatch, commended partner agencies for the plan’s dual approach of addressing alcohol harm through advocacy at the national and local policy level, as well as supporting a community development approach with local agencies, communities, whānau and individuals.

Canterbury DHB General Manager of Public Health Evon Currie welcomes the plan.

“This plan has been developed with considerable input from community groups in Christchurch who recognise the many ways excessive use of alcohol is harming their communities. In the hospital setting we see this unnecessary harm in trauma patients and in increased cases of dementia, various cancers and other chronic diseases. Communities experience this harm in many ways ranging from domestic violence to safety concerns in the neighbourhood they live in.

“The evidence consistently shows that alcohol harm is reduced when the 5+ Solution is supported. This plan does not reduce the need for government level intervention but provides a vehicle for local communities to respond in a coordinated way to local issues.”

The 5+ Solution is a set of policy directives:

› Raise alcohol prices
› Raise the purchase age
› Reduce alcohol accessibility
› Reduce marketing and advertising
› Increase drink-driving counter-measures

PLUS: Increase treatment opportunities for heavy drinkers.

Canterbury DHB will continue to support the CAAP through a number of initiatives with local communities, Council and Police. In addition, the implementation of our own Canterbury Health System Strategy to Reduce Alcohol Related Harm, currently under development alongside the CAAP, will ensure a joined-up approach for health services in reducing the impact of alcohol-related harm on our staff and people using our health services.

Further information about the CAAP can be found here.
New MRI scanner gives boost to Burwood Radiology

The Radiology Service is looking forward to using the new MRI that arrived on site last week. This will bring the total number of MRI scanners for the Canterbury DHB to four.

The Siemens AERA 1.5T slotted into the planned future-proofed space at Burwood Hospital. It will take a few weeks to get the machine commissioned and ready to scan patients.

MRI team leader Pete Dooley says the new machine will help to reduce the pressure on the busy Christchurch Hospital site. The first patient is expected to be scanned at Burwood on 10 September.
Women of Influence nomination

Eldernet and Care Publications Director Eleanor Bodger has been nominated for the 2018 Women of Influence Awards.

She trained and worked as a nurse at Christchurch Hospital and later worked for Canterbury DHB as a social worker.

The Women of Influence programme recognises and celebrates women from all walks of life who make a positive difference in the lives of their fellow New Zealanders.

Other nominees this year include nine-time Paralympic gold medallist Sophie Pascoe, Secretary of Defence Helene Quilter, and Executive Director, SCAPE Public Art Trust, Deborah McCormick.

Eleanor says she created Eldernet in 1997 because she saw a need for a comprehensive information service that focused on issues concerning older people in New Zealand. Read more about Eldernet here.

The organisation played a critical role in supporting Aged Residential Care (ARC) following the Canterbury earthquakes, says General Manager Specialist Mental Health Services Toni Gutschlag.

“They worked closely (and tirelessly) with the ARC sector and Canterbury DHB creating an innovative electronic and text system that enabled the easy flow of information about damage, injuries, staffing and essential services without unnecessarily pulling staff away from their work on the floor.”

This enabled Canterbury DHB and Eldernet to have almost instant visibility of the status and bed capacity of the ARC sector, she says. This well-tested emergency system is now available to a number of DHBs and forms an essential part of our emergency management infrastructure.

“Eleanor and her team are dynamic, creative, straightforward problem-solvers and I valued being able to work alongside them during those earthquake events,” Toni says.

“My congratulations to Eleanor for being selected as a finalist in the Women of Influence business category.”
Advice for health professionals on how to ensure their wellbeing

Health professionals gathered recently for an evening on self-care and spiritual wellbeing.

The trigger for organising the interdenominational meeting was the addition of a new section of the Declaration of Geneva last year at the World Medical Association (WMA) meeting, at the instigation of the New Zealand contingent, says Haematologist Ruth Spearing, a Board member of the New Zealand Medical Association.

The Declaration of Geneva (Physician’s Pledge), adopted by the General Assembly of the WMA in Geneva in 1948, is a declaration of a physician’s dedication to the humanitarian goals of medicine.

The Oath now includes the statement "I will attend to my own health, wellbeing, and abilities, in order to provide care of the highest standard", Ruth says.

The event, held at Cashmere Presbyterian Church, looked at how health professionals can care for themselves and use mental strength to keep themselves resilient.

"It was a very valuable evening with lots of discussion on how health professionals working in an intensely busy environment can maintain their wellbeing.

"GP Graham MacDonald gave an excellent talk called, 'My mind is my friend' about how to use one’s thoughts to positively reinforce one’s wellbeing," she says.

There was an inspiring presentation by Maxillofacial Surgeon Les Snape on the vision and compassion of one woman that led to the development of the Christian Medical Centre at Vellore, South India, and how staff there prevent themselves from burning out. The hospital has more than two million outpatients a year.

Les’s talk was introduced with a quote from Nobel Prize winner, Rabindranath Tagore: “I slept and dreamt that life was joy. I woke and saw that life was service. I acted and behold, service was joy”.

The spiritual reflection was enhanced by wonderful music with the group enjoying the outstanding voice of GP Jeremy Baker, the violin contribution of Ear Nose and Throat Surgeon Justine Bradley, and piano and organ playing by former Christchurch Hospital Gastroenterologist David Troughton, Ruth says.

Christchurch Hospital Ecumenical Chaplain Sandra Wright-Taylor spoke about taking time to care and nurture thoughts and emotions and think about the things that inspire and energise us and enable us to have strong and healthy relationships.

She encouraged people to think about what happens when they are “running on low” and what signs and behaviours they exhibit. She then referred to Psalm 139 from The Bible: “Treat yourself like you matter. You are wonderfully and fearfully made!”

Sandra shared her own practices for spiritual and emotional health, including meditation and prayer, poetry, positive self-talk, naming things she is grateful for, cuddling a child or a pet, and walking on the beach. She suggested health professionals increase their knowledge about themselves and those they are close to, thinking about what they are passionate about, where they gain their strength when they are stressed by their workload and the emotional toll of their job. Ruth says she would like to give special thanks to Cashmere Presbyterian Church Minister Silvia Purdie and David Troughton who put the evening together.

“David has been an inspiration to many of us over the years. His contribution to our community can be summed up as the four ‘m’s – medicine, ministry, mentoring and, as experienced at the evening event, music.”
New Zealanders using more antipsychotics, especially older females

The prescription of drugs designed to treat conditions such as bipolar disorder and schizophrenia, and symptoms such as hallucinations and delusions, has increased in New Zealand by almost 50 percent in less than a decade, according to the first local study of its kind.

But instead of indicating an increase in Kiwis with diagnosable psychiatric disorders, it is possible that people are using the prescription drug 'off-label' to calm, relax and control themselves or help them sleep.

The University of Otago, Christchurch, study found one in 36 New Zealanders aged over 15 was dispensed an antipsychotic drug in 2015. The highest users are European females aged over 65 (5.04 per cent of that group are using them), then Māori males aged between 25 and 44 (4.77 per cent of that population).

The study features in the latest edition of the New Zealand Medical Journal.

Roger Mulder, psychiatrist and study author from the University of Otago, Christchurch, says this first insight into New Zealanders’ use of drugs first prescribed in the 1960s to treat psychiatric conditions is interesting but slightly concerning. It shows usage increased across all groups and parts of the country.

"The Ministry of Health tracks all prescriptions dispensed so we have a very accurate picture of use. What we can't say from this study is categorically why people are using these medications and at what doses. This is an area that would be useful to explore further."

There is no evidence rates of psychosis are increasing, so rate increases appear to be related to other issues.

"Antipsychotics are often prescribed 'off-label' for sleep and anxiety issues, so I suspect they may be being used in low doses for anxiety and sleep and in higher doses for behavioural control."

Roger says the increase in use of antipsychotics in New Zealand over less than a decade appears "quite steep". Australia's usage increased by 36 per cent between 2006 and 2014.

The researchers tracked use by ethnic group, age and district health board area. Their discoveries included that:

- The number of New Zealanders being prescribed antipsychotic medication has risen to one in 36 New Zealand adults, or 2.81 per cent of the population in 2015. In comparison, antidepressants are used by approximately one in 13 New Zealand adults.
- The highest rate of antipsychotic use was in European females aged over 65.
- Māori are more likely to be prescribed antipsychotics (3.37 per cent vs 3.15 per cent in 2015).
- Māori and Pacific males and females were prescribed clozapine, one of the most 'potent' of these medications, at rates disproportionately higher than others.
- The district health board area with the highest usage was West Coast, and the lowest was Counties Manukau.
One minute with... Norma Campbell, Director of Midwifery

What does your job involve?
I was appointed into the role of Director of Midwifery for Canterbury and West Coast DHBs last April. My job involves having operational oversight for midwifery at Christchurch Women’s, Lincoln and Rangiora maternity units and professional responsibility for midwifery across both DHBs.

Why did you choose to work in this field?
I have been a midwife for almost 40 years. Maternity is a really important area of our health system as it is the start of health for our future populations. Midwives get to work with young women and their partners and their transition to become new parents whether that be for the first or the tenth baby.

What do you like about it?
I decided to apply for this role as it was time to think about how we provide maternity services a bit differently within our health system, and what better DHB to work in than Canterbury to do this?

What are the challenging bits?
Too many women are birthing at Christchurch Women’s Hospital, which is the secondary/tertiary referral centre for most of the South Island. So why are so many well women birthing there? It’s time for us to start looking at where women start their labour in Canterbury if they are well, and that should not be Christchurch Women’s. We need to ensure our population of women are birthing in the most appropriate place for the level of care they need.

Who inspires you?
Helen Mirren, Judi Dench and Maggie Smith have all had amazing careers and as older women continue to inspire me.

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?
They are pretty hard to argue with as not only are they the values of our organisation but should also be values that most of us would aspire to in life. Responsibility for outcomes is a key driver for the changes we need to see in maternity and the health information women need.

One of the best books I have read was...
Marching Powder by Rusty Young. It is based on the true story of a British-Tanzanian man, who was apprehended at La Paz airport with five kilos of cocaine and incarcerated in San Pedro prison. Excellent read but very confronting.

If I could be anywhere in the world right now it would be...
London as that is where both of my children live.

What do you do on a typical Sunday?
Go for a bike ride or a walk in the hills and then a good coffee.

One food I really like is...
Crème brûlée. I never really eat dessert but cannot go past this on a menu.

My favourite music is...
Newton Falconer, followed closely by Ed Sheeran of course.

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

Friday 24 August 2018 – 12.15pm to 1.15pm, with lunch from 11.45am. Rolleston Lecture Theatre

Speaker 1: Professor Keith Grimwood, Professor of Paediatric Infectious Diseases, Griffith University and Gold Coast Health, Australia
“Early-onset neonatal group B streptococcus sepsis in New Zealand: Before and after national prevention guidelines”
This presentation provides an overview of early-onset GBS sepsis in neonates, the strategies involved in reducing these serious infections and how they were introduced into New Zealand.

Speaker 2: Dr Simon Rowley, Neonatologist, ADHB
“Neonatal care, the last 30 years: The changing face of neonatology (What did we get wrong?)”

Chair: Professor David Murdoch
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 1.01

All staff and students welcome

Next is – Friday 31 August 2018, Rolleston Lecture Theatre
Convener: Dr R L Spearing – ruth.spearing@cdhb.health.nz

Expression of interest: Māori representative to join the South Island Child Health Service Level Alliance

The South Island Child Health Service Level Alliance (CHSLA) operates within the South Island Alliance framework, and exists to support South Island district health boards, primary health care and other community based health and social services to improve the health outcomes of children and young people.

The group acknowledges the importance of Māori representation in such work and are inviting mana whenua with an interest in children and young people to put forward an expression of interest or a nomination for this rōpū/group.

The role includes:
› Assisting the CHSLA to understand the perspectives of Māori, carers and the public relevant to the work of the group and providing a Māori viewpoint in all group activities.
› Where appropriate, providing a link to other groups, including mana whenua representatives, Mataa Waka Roupu and Māori providers and communicating the work of the CHSLA to and from these groups in consultation with the CHSLA.
› Regularly attending and participating in CHSLA meetings. The group meets monthly via teleconference and quarterly, face to face in Christchurch.
› Preparing for meetings by reading papers, and raising any issues needing clarification with the CHSLA facilitator.

Expressions of interest close on 7 September.
For more about this role or to complete the application form, visit the South Island Alliance website.
Bargaining fee ballot for non-NZNO members

A bargaining fee ballot process has commenced for all non-New Zealand Nurses Organisation (NZNO) members whose work falls within the coverage clause of the new NZNO Nursing and Midwifery Multi-Employer Collective Agreement.

Details of the online ballot have been sent to all non-NZNO members via their Canterbury DHB email address, or personal email where necessary, and therefore we encourage you to check your email and participate in the ballot.

The ballot closes at **5pm on Friday 24 August 2018**. Any questions on the ballot process should be sent to People and Capability via [Max – The People Portal](#).

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Staff Wellbeing Programme: Westpac financial sessions

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

› In August, the focus will be on home buyers and wealth.

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

<table>
<thead>
<tr>
<th>Topic</th>
<th>Canterbury DHB Site</th>
<th>Date</th>
<th>Day</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AUGUST</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Home buyers and wealth</td>
<td>Burwood Hospital</td>
<td>28th Aug</td>
<td>Tues</td>
<td>5–6pm</td>
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<tr>
<td></td>
<td>Community &amp; Public Health</td>
<td>30th Aug</td>
<td>Thurs</td>
<td>5–6pm</td>
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<td></td>
<td>Oxford Terrace</td>
<td>31st Aug</td>
<td>Fri</td>
<td>12–1pm</td>
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<tr>
<td></td>
<td>Christchurch Campus</td>
<td>4th Sep</td>
<td>Tues</td>
<td>1–2pm</td>
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<tr>
<td><strong>SEPTEMBER</strong></td>
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<td></td>
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<tr>
<td>Manage your money</td>
<td>Hillmorton Hospital</td>
<td>20th Sep</td>
<td>Thurs</td>
<td>4–5pm</td>
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<tr>
<td></td>
<td>Burwood Hospital</td>
<td>21st Sep</td>
<td>Fri</td>
<td>12–1pm</td>
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<tr>
<td></td>
<td>Oxford Terrace</td>
<td>24th Sep</td>
<td>Mon</td>
<td>5–6pm</td>
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<tr>
<td></td>
<td>Christchurch campus</td>
<td>25th Sep</td>
<td>Tues</td>
<td>4.30–5.30pm</td>
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<tr>
<td></td>
<td>Community &amp; Public Health</td>
<td>26th Sep</td>
<td>Wed</td>
<td>12–1pm</td>
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</tbody>
</table>

**How to register:**
Please register via the Google forms link [here](#).

For more information on Staff Wellbeing please contact Staff Wellbeing Advisor Lee Tuki, [lee.tuki@cdhb.health.nz](mailto:lee.tuki@cdhb.health.nz).
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  P: 027 689 0285

[Click Here to Register](#)
Apply now for Precision Driven Health summer research scholarships

Precision Driven Health (PDH) welcomes applications from supervisors for summer research projects to support a student. The summer research application form is available on the PDH website. Applications from any PDH-related research area are welcomed, but there is high interest in receiving applications in the following specific areas:

- Economic analysis of health data to measure the effectiveness for data-driven decision-making in precision health
- Modelling healthcare pathways to enable interoperability, and the collection of data around the process of care
- Activating patients and increasing their engagement in health data management
- Reducing inequity in healthcare quality (distinct from healthcare outcomes) using data-driven approaches
- Data-driven visualisation to improve healthcare quality
- Application of genomic data to clinical practice
- Data-driven approaches to understand and predict the impact of social interventions on health

Project applications close on 15 September 2018.

The latest edition of eCALD news is out now

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

This news edition includes:

- eCALD® Research Commentary 20th Edition focuses on the series of Growing Up in New Zealand (GUINZ) studies
- Cross-Cultural Interest Group: "Who are we, what we do, and what we are learning about working cross-culturally
- Refuge in the City: Former Refugees in Urban New Zealand 2-Day Conference
- Diversity Awards New Zealand 2018
- World Refugee Day 2018
- Education Review Office: Responding to language diversity in Auckland Report
- New Zealand Health Survey Regional Data Explorer
- CVD Risk Assessment and Management Guidelines for Primary Care

Find out more here
Health Quality & Safety Commission 
New Zealand’s e-digest is out now

The latest issue of the Health Quality & Safety Commission New Zealand's e-digest is out now. Stories include: Three steps to better health literacy; Developing a co-designed diabetes model of care; and ‘train-the-trainer’ workshops for consumers and providers in the health and disability sector. You can read more here.
SEXUAL HEALTH SEMINAR
THURSDAY 23 AUGUST 2018
FROM 1.00PM – 4.30PM
Community and Public Health
310 Manchester Street, Christchurch

1.00pm - 2.00pm
WELCOME
Time to catch up with work we are currently involved in, to share information and new resources, and projects planned for this year.

2.00pm - 3.00pm
GENDER TRANSITION – THE INS AND OUTS
PRESENTER: DR SUE BAGSHAW
Sue works as a doctor at 298 Youth Health Centre. She is also a senior lecturer in adolescent health in the Department of Paediatrics at the Christchurch School of Medicine, and Training Contractor at the Collaborative Trust (a research and training centre for youth health and development). She will speak about the process of gender transition. Josh, a young trans man, will also speak from his perspective.

3.00 - 3.30pm
AFTERNOON TEA

3.30 - 4.30pm
MATES AND DATES: A HEALTHY RELATIONSHIPS PROGRAMME
PRESENTER: SOPHIE BAILEY
Sophie Bailey is a Mates and Dates Facilitator in Christchurch. She is working towards a Master of Health Sciences Degree, specialising in Community Health and intimate partner, family and sexual violence. She will speak about Mates and Dates which was designed to help prevent sexual and dating violence by teaching young people healthy relationships skills and behaviours. It is now running in some Christchurch secondary schools.

4.30pm
CLOSING

There is no cost for these seminars and afternoon tea will be provided.
Please let me know if you will be attending.

Diane Shannon, Health Promoter
Community and Public Health
(a division of Canterbury District Health Board)

P 03 378 6755
E diane.shannon@cdhb.health.nz
Healthy Volunteers Wanted for

Irritable bowel syndrome (IBS) Research

If you are aged between 18-70 years old, healthy, currently live in Christchurch, have no issues with your gastrointestinal health and are interested to be part of the study please get in contact with the Research Team for more information.

This research aims to identify the causes and mechanisms of IBS. We are looking at different aspects of your everyday life and how they are associated with gastrointestinal symptoms.

We are looking to recruit people who have IBS to be part of this observational study as well as people who have no gastrointestinal symptoms at all. This research is very important as there is very little knowledge about the causes of IBS.

This study involves filling out questionnaires about your current health and quality of life, keeping a food and symptom diary for 3 days and collecting some biological samples. There is only one meeting with the research team for 15 minutes.

Your help will be rewarded with a $20 petrol voucher.

For more details please contact:

COMFORT Research Team
University of Otago, Christchurch
comfortcohort@gmail.com
(03) 364 1788

This project has been reviewed and approved by the HDEC. Reference: 16/NTA/21