



Our role in eliminating measles and rubella from New Zealand

Once again at the leading edge, Canterbury Health Laboratories (CHL) has had an important role in confirming the official elimination of measles and rubella from New Zealand.

The World Health Organization (WHO) has congratulated New Zealand on achieving measles and rubella elimination status. Our small island nation is punching well above its weight in achieving interruption of endemic measles and rubella virus transmission for a period of more than 36 months.

CHL, as the New Zealand WHO reference laboratory, played an important part in providing high-quality surveillance. The National Measles and Rubella Laboratory, based at CHL, has been instrumental in providing evidence using genotyping, phylogenetic analysis (the relationship between two or more measles viruses as indicated by similarities or differences detected within their genome sequences), as well as next-generation sequencing (NGS) which offers a higher resolution than the standard genotyping test.

CHL Scientific Officer Meik Dilcher and the team in the Virology/Serology section have been able to demonstrate differences in the molecular make-up of measles viruses from different outbreaks, showing that reported measles virus cases have been sporadic importations from other countries rather than an endemic spread within New Zealand.

Measles is a disease with serious consequences that is too often dismissed as a trivial childhood disease, when in fact one in 10 who contract it require hospitalisation. The MMR vaccine protects against measles, mumps and rubella, all which can be serious in young adults.

Even though New Zealand has eradicated measles, our population can still be affected by imported cases so it is important to continue vaccinating for this disease and ensure

our vaccination rates achieve 95 percent coverage to prevent sustained outbreaks. About 90 percent of young children have received both doses of MMR by age five in New Zealand, but only about 80 percent of teenagers and young adults have had both doses, which leaves them at risk.

During the 2016/17 year Canterbury had fully immunised 95 percent of eight-month-olds. Only 1 percent of children in Canterbury were not immunised on time. Coverage was high across all population groups, and although we did not reach the target for Maori, we did improve coverage to 92 percent.

It's a credit to Canterbury Health Labs that they perform this important role for WHO and to everyone in the New Zealand health sector and the families and caregivers that ensure our young people get the vaccinations that help us eliminate serious and preventable diseases.

Celo ready for wider use

Following on from our introduction to Celo back in October 2016, I am pleased to be able to confirm that the secure mobile application is now good to go.

This means that a wider group of clinicians can now safely share confidential patient information on the go. This is another first for Canterbury and the fruition of another idea that had its genesis through Via Innovations, an initiative set up to facilitate exactly this kind of collaborative innovation.

Celo, a recent finalist in the 2017 New Zealand Health IT Innovation Awards, enables encrypted, industry-compliant,

In this issue

- » The Library | Canterbury Health Laboratories survey... pg 4
- » Destination Outpatients: Getting to grips with support tools... pg 5
- » Unique opportunity at special Grand Round... pg 6-7
- » New service manager for Ophthalmology | Change of clinical director for Department of Cardiothoracic Surgery... pg 8
- » Donation of iPads to Christchurch Hospital wards... pg 9-10
- » All go for Celo... pg 10
- » Schoolchildren visit Canterbury DHB Operations Centre... pg 11
- » Helen Wood – in remembrance of a colleague | New Nurse Coordinator... pg 12
- » One minute with ... pg 13
- » New look for mortuary family rooms... pg 14
- » Bike Expo an opportunity | Canterbury Grand Round – Debate... pg 15

secure and real-time messaging for healthcare. The Celo App is a Kiwi innovation that has been developed by healthcare professionals from the ground up and has been specially designed for easy use in a clinical setting.

Importantly too, Celo is secure against cyber-threats such as the recently publicised malware, KRACK, because it doesn't have the vulnerabilities of some systems that use unsecured Wi-Fi. It works on both Android and iOS devices and uses banking-standard security software to protect patient information.

You can read more about this app on page 10.

Have a great week,



David Meates
CEO Canterbury District Health Board



Bouquets

Operating Theatre and Eye Clinic, Christchurch Hospital

I wish to thank everyone most sincerely for the attention and kind care given to me during my recent cataract operation, both in the operating theatre and at the Eye Clinic the following day. The professional and dedicated teamwork of the team was excellent. The nursing staff, anaesthetist, Surgeon Tom Betts, and all personnel, were of an excellent standard. With very many thanks again.

Christchurch Hospital

Awesome staff!

Kaikoura and Christchurch hospitals and Westpac Rescue Helicopter

While awaiting transfer by helicopter from Kaikoura I found all staff to be most helpful with the care they provided. This includes the helicopter staff on the flight down to Christchurch. All the staff involved at Christchurch Hospital were of good standard and helpful with the problem I arrived with. I wish to commend all the people who were involved with my care.

Ward 19, Christchurch Hospital

Thanks for looking after us. The nurses are very nice.

Radiology, Burwood Hospital

Outstanding prompt and professional service. Thanks.

Sharron, Oncology Day Ward, Christchurch Hospital

Nurse Sharron was wonderful, kind, compassionate, professional, knowledgeable and friendly. Thank you.

Ward 18, Christchurch Hospital

I would like to express my gratitude to the staff on Ward 18. As a student nurse it is a very daunting process coming into an unfamiliar environment however all the staff on Ward 18 have been amazing and gone the extra mile to ensure we are fully supported. I have never been to a ward which is so enthused about their patients and working as a team. The way the ward is run and how much I have learnt over the past eight weeks has encouraged me to one day work in a surgical ward, if not in

orthopaedics. I commend all who work there and thank them sincerely in aiding my training as a nurse.

Ward 19, Christchurch Hospital

It has been a pleasant few days at this ward. The doctors, nurses and staff have been very nice, kind and accommodating. Thank you all for the kind assistance you have given my husband and I. We wish you all well. Good luck with the new building.

Burwood Hospital

I would like to say a big thank you to Nick Lash and his surgical team at Burwood Hospital for the excellent patient care provided to ... with regards to her hip replacement surgery. You and your team, as well as the nursing staff in the Surgical Admitting Unit helped put our minds at ease during what was a reasonably stressful time for the both of us. Also a big thanks to the staff in Ward GG at Burwood for also providing excellent patient care.

Facilities Fast Facts

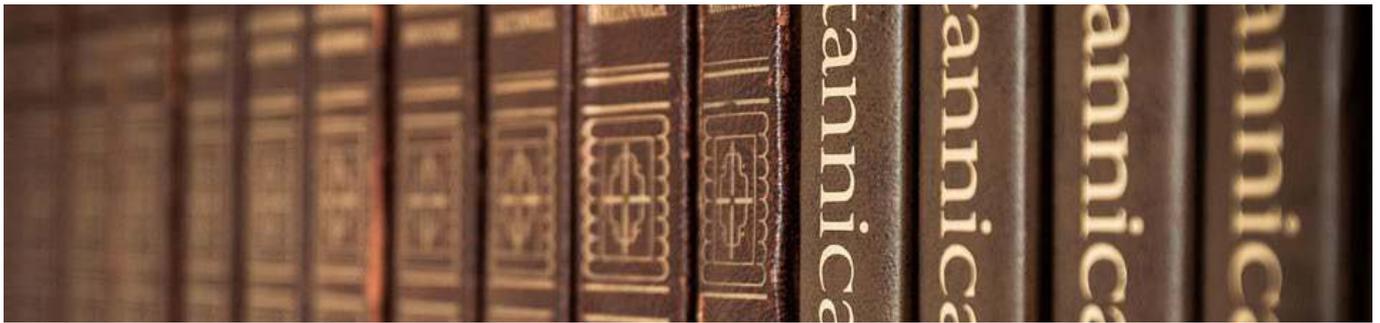
Roadworks ahead!

Downer and Ōtākaro have begun an extensive programme of roadworks that will affect pedestrian, cycle and vehicle access around Christchurch Hospital. These will cause major disruptions at certain times, and there will be very limited on-street parking. Please drive carefully, follow all Traffic Management Plan instructions and allow extra time for your journey. Plan your trip.



Planned works

		Oct	Nov	Dec 2017	Jan 2018	Feb	Mar	Apr	May	June	Jul	Aug	Sept	Oct
St Asaph Street														
1a	South side between Antigua St and Hagley Ave													
1b	North side between Antigua St and Hagley Ave													
Oxford Gap														
2	Between Chch Hospital and Chch Outpatients to create a pedestrianised roadway													
Antigua Street														
3	Between Oxford Tce and Tuam St TOTAL CLOSURE from Dec 2017 – no access for cycles or pedestrians (use St Asaph and Hagley Ave)													
Oxford Terrace														
4a	Stage 1 – South side Montreal to Pegasus Arms													
4b	Stage 2 – North side Montreal to Pegasus Arms													
4c	Stage 3 - Pegasus Arms to Antigua St													
Tuam Street														
5a	South side from Antigua St to Montreal St – loss of all parking													
5b	North side from Antigua St to Montreal St – loss of all parking													



The Library

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

- » [“Queenstown doctor key in change to Hippocratic Oath”](#) – the oath sworn by doctors around the world when they qualify has been amended to include a commitment to looking after their own health and wellbeing too. The key promoter was a Kiwi doctor who led a petition for the new clause, signed by more than 4,500 Australasian doctors, to help address burnout and support better patient care. A further interview is available [here](#). From *Radio New Zealand*, published online: 13 October 2017.
- » [“A Century-Old Discovery of a Virus Could Become Our Solution to Antibiotic Resistance”](#) – drugmakers are looking at phage therapy as a workaround for the growing threat of bacteria becoming resisting to certain antibiotics. This therapy refers to treatments made up of bacteria-killing viruses called bacteriophages and were first discovered in the early 1900s. From *Science Alert*, published online: 16 October 2017.
- » [“Men develop atrial fibrillation 10 years earlier than women, finds study”](#) – a pooled analysis of four large European community-based studies found that atrial fibrillation (AF) strikes men earlier than women and weight is a major risk factor. Body mass index was more strongly related to new onset AF in men than in women. From *BMJ*, published online: 16 October 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

Canterbury Health Laboratories survey

The annual Canterbury Health Laboratories referrer survey is open for submissions. If you send samples to the laboratory for testing then please take the time to complete the survey, which can be found by following this link www.surveymonkey.com/r/NNF6D6X.

The survey should take no more than 10 minutes to complete but provides a wealth of information which the laboratory can use to improve its service.



BETTER TOGETHER

Destination Outpatients



Getting to grips with support tools

On 12 October, the third Destination Outpatients – Better Together workshop was held at the Design Lab, with some 90 clinical and administrative staff attending. The aim of the workshop was to consider a range of tools to support how staff will work in the new facility. Topics for discussion included clinic scheduling, FloView, Health Connect South, patient check-in kiosks and South Island Patient Information Care System (SI PICS). In the coming weeks, progress on each of these aspects of the Outpatients project will be covered.

Copies of all the workshop presentations are available on the intranet: <http://cdhbintranet/corporate/outpatientsbuilding/SitePages/Workshops.aspx>

Construction of the Christchurch Outpatients continues at pace, with:

- » Around 200 people on site
- » Glazing going up on the east and north side of the building at a rate of 15 frames a day
- » Thousands of linear meters of data cabling that are needed to wire up approximately 2,200 data outlets.



A plan shows the work in progress on Level 3



The view of the building from the Oxford Gap between Christchurch Hospital and Outpatients



A view from one of the consult rooms on Level 1 through the other side of the windows



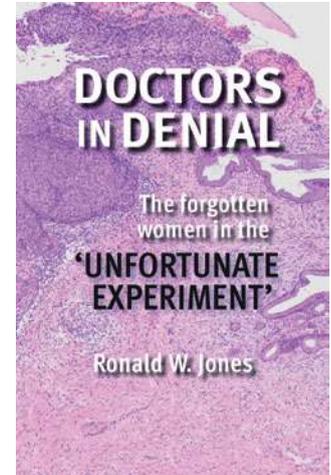
The masses of data cabling required to wire up 2,200 data outlets

Unique opportunity at special Grand Round

A patient-ethics themed double Grand Round on Friday 3 November will feature special guests.

These include Ron Jones, one of the doctors who exposed the 'Unfortunate Experiment' events at National Women's Hospital in the 1970s that led to Cartwright Inquiry; Charlotte Paul (former Medical Advisor to Judge Cartwright); and Joanna Manning, a Professor of Law specialising in health law and ethics and Member of the Cartwright Collective.

The session is titled "The evolution of ethics and respect in healthcare: why this matters to you" and presents a unique opportunity to hear these speakers. It starts at the usual time of 12.15pm but finishes later – at 2.25pm and will be held at a different venue – the Beaven Lecture Theatre, Level 7, Christchurch School of Medicine, Christchurch Hospital campus.



Clinical Director Service Improvement Richard French will chair the session.

A light lunch will be served from 11.45am – 12.15pm in the foyer outside the lecture theatre. All are welcome, there is no need to RSVP.

Time	Speaker	Topic	Affiliations
12.15 – 1.00pm	Dr Ron Jones	Setting the Scene: The National Women's story (The Unfortunate Experiment) and what we can learn from it.	Retired Obstetrician and Gynaecologist at National Women's Hospital and Clinical Professor at the University of Auckland. Author of "Doctors in Denial: The forgotten women in the Unfortunate Experiment" (Otago University Press. 2017).
1.00 – 1.25pm	Prof Joanna Manning	Recommendations of the Cartwright Inquiry: to what extent have they been accepted & implemented?	Professor of Law, University of Auckland, Specialist in health law and ethics; Member of the Cartwright Collective.
1.25 – 1.50pm	Emeritus Prof Charlotte Paul	Role of professional advisors and experts in inquiries: between the profession and the public.	Emeritus Professor, Department of Preventive and Social Medicine, University of Otago, Dunedin; Former Medical Advisor to Judge Cartwright.
1.50 – 2.00pm	Dr Mary Olliver	How cases reach the Health and Disability Commissioner and how complaints /incidents/Medical Council of New Zealand fit together.	Canterbury DHB Clinical Director of Special Projects.
2.00 – 2.20pm	Panel discussion and questions: Theme: Could the Unfortunate Experiment happen again/ happen in Canterbury? What are the risks/protective factors in place currently?	Above speakers plus, from Canterbury DHB/University of Otago: Greg Brogden, Corporate Solicitor. Associate Professor Peter Sykes, Gynaecological Oncologist.	
2.20 – 2.25pm	Wrap up and thanks from Chair.		

NEW TITLE
INFORMATION
OTAGO
UNIVERSITY
PRESS

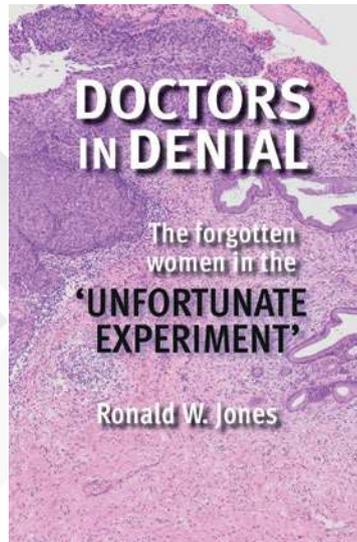
PUBLICATION DETAILS

Doctors in Denial: The forgotten women
in the 'unfortunate experiment'
Ronald W. Jones

Otago University Press
www.otago.ac.nz/press
History, Women's Health
paperback
230 x 150 mm, 264 pp.
16pp colour photographs
ISBN 978-0-947522-43-8, \$39.95

IN-STORE: 13 FEB 2017

See below for ordering information



DOCTORS in Denial

The forgotten women in the 'unfortunate experiment'

Ronald W. Jones

KEY POINTS

- First-hand account by one of the doctors who exposed the truth at NWH
- Gripping story of professional arrogance and denial

When Dr Ron Jones joined the staff of National Women's Hospital in Auckland in 1973 as a junior obstetrician and gynaecologist, Professor Herbert Green's study into the natural history of carcinoma *in-situ* of the cervix (CIS) – later called 'the unfortunate experiment' – had been in progress for seven years.

By the mid-1960s there was almost universal agreement among gynaecologists and pathologists worldwide that CIS was a precursor of cancer, requiring complete removal. Green, however, believed otherwise, and embarked on a study of women with CIS, without their consent, that involved merely observing, rather than definitively treating them. Many women subsequently developed cancer and some died.

In 1984 Jones and senior colleagues Dr Bill McIndoe and Dr Jock McLean published a scientific paper that exposed the truth, and the disastrous outcome of Green's experiment. In a public inquiry in 1987 Judge Silvia Cartwright observed that an unethical experiment had been carried out in large numbers of women for over 20 years.

Since that time there have been attempts to cast Green's work in a more generous light. This rewriting of history has spurred Ron Jones to set the record straight by telling his personal story: a story of the unnecessary suffering of countless women, a story of professional arrogance and misplaced loyalties, and a story of doctors in denial of the truth.

I have borne a burden of guilt for not having seen the study for what it was at the outset.

– Mont Liggins

He [Green] so believed he was right he was not seeing the results of what he was doing.

– Dennis Bonham

An excellent account of Herb Green's experiment in the natural history of CIS, and of the management of the condition internationally. An enthralling read.

– Professor Malcolm Copleston

AUTHOR

RONALD W. JONES is a retired obstetrician and gynaecologist and former clinical professor at the University of Auckland. He is a widely published international authority on lower genital tract pre-cancer and cancer. For over 30 years he has served on a range of national and international committees addressing the natural history, prevention and management of these cancers. He is a past president of the International Society for the Study of Vulvovaginal Disease and chair of the Scientific Committee of the International Federation of Cervical Pathology and Colposcopy.



Order all Otago books from Nationwide Book Distributors/ www.nationwidebooks.co.nz/ [books@nationwidebooks.co.nz/](mailto:books@nationwidebooks.co.nz) Ph: 03 312 1603/ Fax: 03 312 1604

New service manager for Ophthalmology

Ali Watkins is the new service manager for Ophthalmology, replacing Marilyn Ollett who retired at the end of August.

Ali started her nursing career at Canterbury DHB Mental Health Services in 2005. She moved to the Christchurch Campus in 2008 to join the perioperative team working as a registered nurse in theatre before taking up the role of Charge Nurse Manager – Ward 28 (Neurosciences) in 2012.

In late 2016 she became the Acting Service Manager Neurosciences and in May 2017 she was confirmed in the permanent role.

Ali will undertake Ophthalmology together with her existing Neurosciences role.

Throughout her career her focus has always been to ensure that patients receive the right care in a timely fashion by professionals who have a passion for what they do and for the patients they care for, Ali says.

“In addition I have a strong belief that staff and patients feel valued when there is an environment of respect and trust.”

She is relishing the opportunity to work with the staff in the Eye Service.

“I have been encouraged by their support and sincerity and empowered by their desire to contribute to the improvement of their service. I’m looking forward to being able to support and help facilitate a positive future for the service and the staff.”



Ali Watkins

Change of clinical director for Department of Cardiothoracic Surgery

Graham McCrystal has taken over as Clinical Director for the Department of Cardiothoracic Surgery at Christchurch Hospital.

Graham gained his MBChB from the University of Auckland in 1992. He undertook general surgery training then his Cardiothoracic Fellowship of the Royal Australasian College of Surgeons in 2006.

He was a Locum in Auckland during 2007 followed by two years overseas, divided between Brigham and Women’s Hospital in Boston and at Papworth in the UK. Graham joined Canterbury DHB in 2010.

Graham says he would like to modernise the processes within the Cardiothoracic Surgery department in anticipation of the paper-lite direction Canterbury DHB is taking.

“I should also like to increase the Cardiothoracic department’s level of engagement in the hospital community. I look forward to the challenges this shall provide.”

General Manager, Christchurch Hospital Pauline Clark says she would like to thank Harsh Singh, the outgoing Clinical Director, for his leadership and commitment to the role over the last two years.



Graham McCrystal

Donation of iPads to Christchurch Hospital wards

Patients in hospital with heart conditions can now get up-to-date health information on an iPad thanks to a generous donation.

Fifteen iPads with special security stands were donated to Christchurch Hospital and will be available in the cardiology areas, including Outpatients, the Lipids Clinic, and some of the general medical wards that take patients with heart conditions.

The iPads have been loaded with appropriate health websites such as the [Heart Foundation](#), [Stop Smoking Canterbury](#) and [HealthInfo Canterbury](#).

Graham and Dawn Armitage made a donation to the Christchurch branch of the Heart Foundation and specifically asked for the money to be used for the benefit and education of cardiac patients.

The Heart Foundation consulted with cardiac rehabilitation nurse specialists at Christchurch Hospital and the decision was made to buy iPads that could be used for bedside education about heart conditions and heart health for patients and their families.

The iPads were presented at a function held at Christchurch Hospital last Monday followed by an afternoon tea to thank the donors.

The iPads will help provide improved access to health information for patients and their families, says Ruth Davison, Clinical Nurse Specialist Cardiac Rehabilitation.

“We’re very excited to have them because it means people will be able to get reliable up-to-date information on heart health that’s patient-friendly and they can choose what they want to learn at their own pace.”

Graham and Dawn say they hadn’t realised the impact their gift would make to help patients understand their health issues better and were thrilled to see so many staff at the presentation.

The couple took time to talk with many of them about how they plan to put the iPads to use in their clinical areas.

Graham and Dawn’s visit was concluded by meeting a cardiology patient in Ward 12, and getting a real life demonstration of how the iPads will be used.

Quality Facilitator Michelle Casey says the Secondary Care Heart Failure workgroup have been looking at strategies to reduce readmissions in the patient group that has heart failure.

“We are excited about the generous donation of the iPads as these will be used to start the education process for patients and families while in hospital.”

Nurses and pharmacists will be accessing the HealthInfo videos about heart failure that are visual and quick to watch that include how the heart works, what goes wrong in heart failure and how diuretics work in heart failure.

“This is an amazing opportunity for the general medical wards to provide patient and family/ whānau education that will help them to have a better understanding of their condition and how to manage it at home.”



iPad donors (from left): Graham and Dawn Armitage



iPad staff (from left): Registered nurses, Georgina Bayliss and Margot Fuller, Charge Nurse Manager Ward 23 Jo Goodwin, and Pharmacist Victoria Kershaw

[cont. on next page »](#)



iPad group (from left): Registered Nurse Acute Demand Fiona Davison, Clinical Nurse Specialist Mary Griffiths, Registered Nurse Acute Demand Michelle Hammond, Graham Armitage, Clinical Nurse Specialist Cardiac Rehabilitation Sheryl Gregson, Dawn Armitage, Head of Department Cardiology John Lainchbury, Quality Facilitator Michelle Casey, Clinical Nurse Specialist Cardiac Rehabilitation Ruth Davison, Heart Health Advocate Christchurch branch Heart Foundation Emma Griffin, and Consultant General Medicine Anthony Spencer

All go for Celo

As signalled in David's introduction, the Celo App is now widely available for Canterbury DHB clinicians. The Celo App has been developed alongside healthcare professionals and fine-tuned according to their feedback, specifically for easy use in a clinical setting. Through Celo, users can communicate with each other, send documents and photographs, and safely share patient details within a secure, encrypted digital network.

By working collaboratively with our clinical leadership, the development of this secure mobile app for health use has been prioritised for a number of reasons. The main one is that it allows clinicians to send and receive information securely between mobile devices, which in turn promotes safe, highquality care by making the best possible information available at the point of care.

One key feature of Celo is that patient information is never stored on an individual device, so if you lose a device you don't lose that vital information along with it, and there is no risk that confidential patient information will fall into the wrong hands through mislaying your phone or tablet.

Celo is now available to Canterbury clinicians who belong to an authenticated directory and will become more widely available to the Canterbury Health System as a whole over the coming months.

Staff with a Canterbury DHB email address will be able to sign up to the Celo App by visiting <https://www.celohealth.com/canterbury-district-health-board-user-onboarding/>

A desktop version is due to be released over the coming weeks and a planned integration with Health Connect South will allow information captured on Celo to be transferred securely to the clinical record where it can be useful to others in a patient's care team.

If you have any questions or for more information please visit www.celohealth.com



Celo in use – photo supplied

Schoolchildren visit Canterbury DHB Operations Centre

Two groups of schoolchildren from the Gifted and Talented (GATE) One Day School programme visited the Canterbury DHB Operations Centre (CDHB OC) at Christchurch Hospital over two days last week.

There were 32 children in each group made up of pupils from Prebbleton, Lincoln, Tai Tapu, Broadfield, Springston and Ladbrooks primary schools. They were interested in seeing how the health system works and learning about the number and types of inpatients and outpatients in hospital. They are currently doing a project on patterns.

CDHB OC is a data hub located on the ground floor of Parkside across the corridor from the Acute Medical Assessment Unit. Using software from the Hewlett Packard Labs in the US, CDHB OC has an eight-metre-wide Windows desktop created by stitching together the output of four data projectors.

Live content including dashboards, web applications, web sites, video and data analytical tools such as 'Signals from Noise' and 'Tableau' are brought together from across the health system.

Production Engineer Ian Shields explained to the students how acute and elective patients get into hospital and described the patient journey.

"I showed the pupils the dashboards and encouraged them to look for the stories in the data. Stories are a really powerful way of sharing what is happening."

They were really surprised by how accurate some of the acute and elective patient admission forecasts have been and got the idea that you can forecast the future by looking at the past.

"I was impressed by the quality of the questions and the answers given by the students," he says.

Prebbleton Primary School pupil Bill says he enjoyed the visit because "you can drill down into the data and answer questions to let you solve problems.

"The technology was really cool."

The CDHB OC is used by clinicians and management that want to gain insight into how their service is performing. A number of project teams also use the facility to monitor their projects as the tools can be used to understand the opportunity to improve patient care.

Once changes have been made to a process or models of care they can see the improvement by analysing the operational data.

The content on the eight-metre data wall is provided through the use of different layouts. This allows the purpose of the room to be changed at the pressing of a button on the controller touch screen.

Staff are welcome to visit CDHB OC any time from 8.30am to 5.00pm, Monday to Friday provided the room is not being used for a meeting.



Production Engineer, Ian Shields speaking to a group of children visiting the Operations Centre

Helen Wood – in remembrance of a colleague

Helen Wood had a passion for and loved nursing, and patients were always well looked after in her care.

She was on the countdown to her retirement when she lost her life in a tragic accident.

Helen was 17 when she began her nursing training at Christchurch Hospital in 1972.

She worked in a variety of nursing roles and wards between 1975 and 1998, before she transferred to work in the Nursing Pool at Christchurch Hospital.

In 2002 Helen was Acting Duty Nurse Manager for a short time. She then returned to her previous nursing position on the Nursing Pool which gave her the opportunity to work with and meet numerous nursing colleagues and other health professionals.

Charge Nurse Manager Liz Henderson says Helen was like a “whirlwind”.

“She had one speed, always in a hurry, and would stop people by grabbing their arms and giving them the latest news.”

Helen always enjoyed a chat.

“She would often appear in the Duty Office keeping everyone up to date with the latest hospital news!”

At the beginning of each year Helen would plan her annual leave round her fishing trips. When the whitebait season arrived, there was always a queue of people to purchase her catch – which she was pretty famous for.

“Helen enjoyed life to the fullest, she had a great sense of humour and was fun to work with. “

Helen will be greatly missed by everyone but memories of her will live on.



New Nurse Coordinator

The Nursing Workforce Development Team has welcomed Sharon Pryor to the team as Nurse Coordinator Professional Development Recognition programme (PDRP).

Sharon commenced her role in early October coming from Operating Theatre at Christchurch Hospital where she worked in a senior Registered Nurse role in Cardiothoracic, and as after-hours Theatre Coordinator. She was a PDRP Resource Nurse and Assessor and worked in an Acting Nurse Educator role.

Sharon has a passion for nursing education, Nursing Council competencies and the PDRP process for Operating Theatre nurses. She brings with her knowledge and understanding of PDRP, Nursing Council competencies and how they apply within the clinical setting.

Prior to starting this role Sharon moved through all levels of the PDRP and was supporting and encouraging nursing staff to attain their own PDRP levels.

Sharon says she is very excited to be in the role and is looking forward to encouraging, assisting, and developing the PDRP to grow at Canterbury DHB.

“I am passionate about the Nursing Council competencies and helping nurses understand what they mean and how they apply in their work setting.”



One minute with... Tracy Abbot, Administration Assistant, Health in All Policies Team, Community & Public Health

What does your job involve?

Administration support to the Health in All Policies team at Community & Public Health.

Why did you choose to work in this field?

It chose me! I was looking for employment that would contribute to the wellbeing of people and the world in general and then became really interested in the work done by the Health in All Policies team – but that was only after seeing the ad for the job and reading up on their work.

What do you like about it?

It's political – about changing the system – or that's how I see it. It's about always being aware of the bigger picture, acknowledging that there are influences on us all that can be changed by policy. And on top of that I enjoy the supportive culture here, the commitment to healthy relationships.

What are the challenging bits?

Well the work I do sort of looks after itself, it's the easy bit. The challenge is walking the talk around health and especially around the importance of relationships. I appreciate the care that others show to me – so there's a continual challenge to make sure I put out what I like getting!

Who inspires you?

The spiritual teacher Avatar Adi Da Samraj.

What do Canterbury DHB's values (Care and respect for others, Integrity in all we do and Responsibility for outcomes) mean to you in your role?

These values aren't things I just do at work – I find them inspiring for my whole life. I think they're all essential to being a happy human being.

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

The Knee of Listening by Avatar Adi Da Samraj.

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

Well, it may not be 'normal' but I'm actually quite happy where I am.

What do you do on a typical Sunday?

The morning is a recharge of my spiritual batteries – meditation, puja (ceremony), and some inspirational videos with a few friends and the afternoon is often spent outdoors – biking or gardening usually.



One food I really like is...

Salad – and cake – homemade please.

My favourite music is...

Something live, vocal, drumming maybe, spontaneous, small enough to be acoustic and ok for me to join in.

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

New look for mortuary family rooms

Spiritual, peaceful, comforting, were among the words used to describe the second revamped mortuary family and viewing room.

Gone are the dusty dated prints, cream coloured paint and heavy, bulky furniture that have been there for the past 27 years.

In their place is flowered wallpaper in muted tones, furniture that's light and easy to move around as a family needs to and recessed lighting that removes the glare and infuses the area with soft light.

Attractive contemporary prints that speak of family, love and peace adorn the walls.

Canterbury DHB's interior designer in the Site Redevelopment offices, Marcy Craigie, says the revamp was made possible thanks to a very generous donation from the Christchurch Hospital volunteers.

The rooms have been fitted out with soft lighting, night lights for visitors who sleep over, and a sound system with iPhone and android docking stations.

The new furnishings include comfortable sofas and chairs, an ottoman that converts to a single bed and a matching recliner that doubles as sleeping accommodation so elderly visitors do not need to either sleep on the floor or share a sofa, and there is a generous supply of fluffy blankets.

There is a dedicated handmade pottery bowl for ceremonial hand-washing.

Hospital chaplains and members of the DHB Māori Health team, and volunteers held a blessing service for the rooms last week.



Marcy Craigie thanked the Volunteers for all their hard work that made the revamp possible



Above: A corner of the viewing room with docking station and sound system.

Left: The entrance to the mortuary family and viewing room 2

Bike Expo an opportunity

Sitting in our cars, instead of using our legs to get around, can take a toll on our health.

Cycling and walking as part of a regular daily routine makes us more active which has a big positive impact on our physical and emotional wellbeing.

Cycling Action Network, a registered charity that encourages cycling, is hosting the first-ever New Zealand Bike Expo on 28 and 29 October. It will help provide ideas, energy and inspiration for experienced and new(ish) cyclists.

The New Zealand Bike Expo is at the Air Force Museum in Wigram on 28 and 29 October.

The Expo is for everyone. If you're looking for a new bicycle, wanting tips on e-bikes, considering a bicycle holiday, or want to try out some cycle trails, or train for an event, this event will get you on your journey.

About 50 exhibitors will feature hundreds of brands and experiences. If you're looking for a new bicycle, wanting tips on e-bikes, considering a bicycle holiday, or want to try out some cycle trails or train for an event, the NZ Bike Expo will get you on your journey.

Besides the indoor exhibition space holding about 50 exhibitors, outside are trial areas: a kids track, an off-road demo track, and the 1km runway route for testing e-bikes and road cycles. Speakers, prizes, games, will make this a consumer show with a difference.

The Expo is the grand finale to Biketober, check out the 50 other events too! – www.biketober.nz/christchurch

For more information

Twitter: @nzbikeexpo

www.nzbikeexpo.nz

www.facebook.com/nzbikeexpo

Advance tickets: www.eventfinda.co.nz/2017/nz-bike-expo/christchurch/tickets



Photo credit: NZTA

Canterbury Grand Round – Debate

Friday, 27 October 2017 – 12.15pm to 1.15pm, with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Debaters:

Dr John O'Donnell, Immunology – For

Dr David Smyth, Cardiology – Against

“Moot: Medicine is more sophistry than science”

Retractions of scientific publications are rising exponentially. Modelling suggests 85 percent of published scientific claims are false. Estimated losses from irreproducibility are between \$10 and \$50 billion/year in the US alone. A Nature journal survey of 1576 prominent researchers from a cross section of science found 90% believe there is a crisis. Some point to errors in statistical inference, others to poor study design and others to fraud. Is it sound science or sophism?

Chair: Sean MacPherson

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 Room 1.5
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton
- » The Princess Margaret Hospital, Riley Lounge
- » Pegasus – No room this week

All staff and students welcome

Next is – Friday, 6 November 2017 (Rolleston Lecture Theatre)

Convener: Dr R L Spearing

(email: ruth.spearing@cdhb.health.nz)

Central Otago Cherries for Christmas 2017

Bone Marrow Cancer Trust
Ranui House (patient accommodation)
in Association with Iversen Orchard

Buy your cherries for Christmas and help keep our families together.

\$30 per kg box (\$10 per kg goes to Bone Marrow Cancer Trust – Ranui House)

Order before 15th December 2017

www.bmct.org.nz/cherry-order

03 377 2515

Collection Date: Approximately 19th December 2017 – This will be confirmed by email

Orders must be collected from
Ranui House, 1 Cambridge Terrace, Christchurch
WE CANNOT SEND ORDERS TO YOU!

