



The Canterbury can-do attitude is making it better for people using our health services every day

Canterbury DHB has a well-deserved reputation for its entrepreneurial approach to solving problems and improving patient safety. And nowhere is this more evident than in the Medical Physics and Bioengineering Department (MPBE) where the use of 3D printed models has grown from being an oddity a few years ago, to a much in demand service that is saving the DHB hundreds of thousands of dollars annually.

It's extremely gratifying to see departments within the hospital working closely together to create a better patient experience, and 3D eye orbit modelling is a perfect example of this.

Following requests from maxillofacial surgeons who were dismayed at the cost and time involved to use external 3D printing companies, MPBE purchased a small 3D printer and used industry-standard modelling software and their expertise in medical image processing to start producing bespoke eye orbit models.

This led to immediate patient benefits and significant cost and time savings for the maxfac surgeons. The time for surgeons to receive eye orbit models dropped from a two to three week turn-around to less than three hours, with the cost of each model dropping from \$1,000 each to around \$2.

The 3D models are now used routinely on every case, instead of being reserved only for the most complex cases. This has contributed to a fall in the revision rate for repairing a poorly-fitted plate from 30 percent to zero, and cost savings for Canterbury DHB of \$150,000 annually.

Having our in-house MPBE team located within the hospital campus means surgeons can work closely with the team on what they need, whether it's full skull models for neurosurgeons shaping titanium plates or vascular surgeons who require accurate, hollow models for shaping stent implants and planning vascular surgeries.

It's exciting to watch new technologies come on line, with the team investing in a second, industrial 3D printer, with a larger

print volume and the ability to print with a dissolvable support material that enables them to start making hollow models.

At the request of paediatric surgeons, the team has also been investigating low-cost moulding technology using 3D printed moulds to create models of internal organs out of silicone, rubber and latex. When placed inside a 3D printed baby rib-cage and covered with latex 'skin', these produce low-cost models on which surgeons can practice very delicate keyhole surgeries.

Among 3D models the MPBE team has printed are a bespoke anatomical model of an aorta that enabled surgeons to practice repairing a pseudo aneurysm for a patient with Marfan syndrome (a connective tissue disorder), a full adult rib cage to allowed surgeons to better visualise and plan what they would need to do for a patient whose ribs were displaced and malformed after being crushed in a vehicle accident, and surgical cutting jigs for mandible reconstruction.

The key benefit of 3D printing is to patient safety as these models allow informed, hands-on planning, ahead of the surgery. This means surgeons are better placed than ever before to prepare for the operation and to assess what surgical approach will offer the greatest chance of a safe, quick and successful procedure.

And it's all been made possible because a team has taken the initiative to embrace new technology and ask "will this work?" and give it a go.

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External recognition for our innovation

Last week we were very pleased to be announced as a finalist in the 2017 Deloitte IPANZ Public Sector Excellence Awards in the category Improving Public Value through Business Transformation, for our HealthPathways work.

HealthPathways is an online tool for GPs, to guide the way they provide care. It sets out what tests to do and when, when to refer on, and presents the options available. It means care is consistent and access to specialist care is fair.

Having HealthPathways in place has been key to the transformation of the Canterbury Health System where we are providing more and more complex care in the community. Importantly, we've been able to share HealthPathways with other DHBs in New Zealand, health systems in Australia and the NHS in

the UK. As well as our Community HealthPathways for general practice, we have Hospital HealthPathways to guide hospital clinicians.

HealthPathways save time and money – more than \$67 million in operational costs over the past ten years, by helping primary care to keep people well at home. HealthPathways improves access to care and supports the NZ Health Strategy.

More than 800 HealthPathways have helped guide the care of more than 25 million people – here and abroad.

Well done to everyone involved in the development and on-going growth of Community HealthPathways, and the new Hospital HealthPathways. See the IPANZ entry poster on page three.

Snow forecast this week – think ahead, make plans and be prepared

The latest forecast is below:

Arrival time for the wind change and initial rain is still looking like early Tuesday afternoon for South Canterbury, later in the afternoon for Mid Canterbury and early evening for North Canterbury. Snow levels will drop within six hours to 200m, and later on Tuesday night some falls could reach near sea level.

Snow will break to showers early on Wednesday but showers will be frequent and could be heavy at times through Wednesday and into early Thursday. Expect 20-30cm of snow to accumulate above about 200m, with 30-50cm likely above 400m. Snow flurries are likely to sea level at times until late Wednesday, but accumulations on the ground may be a few centimetres only at times in heavy showers.

Further snow showers are likely till later on Thursday above 200m, and possibly for a time on Friday above 400m.

Winds will be gusty from the southwest and very cold, so windchills will be significant but not extreme, as gales are not expected.

Ice may be a significant road hazard on Friday night or Saturday morning.

There is some computer modelling about indicating a risk of very much heavier snow above the 3-400m mark with totals approaching 1m possible. However, this doesn't seem the most favoured outcome at this point in time, and would rank as an extreme (and therefore unlikely) event. However, it may be useful to be aware that the possibility exists.

This will be a week of disruption for travel and farming, and potentially hazardous for people as well as stock.

In summary:

[Snowfalls are expected around Canterbury](#) to low levels from Tuesday evening and this severe weather is expected to be with us for the rest of the week.

If you're planning travel to the Coast, Kaikoura or any of our rural sites this week, please check the forecast and road condition updates before you set off.

[Read the road warnings here](#). Note: Use Google Chrome to view the maps on this site - it's not compatible with our current version of Internet Explorer.

Please refer to the [adverse weather policy](#), which outlines Canterbury DHB's expectations for staff to turn up for work unless it's unsafe for them to do so. Make a plan to ensure you can safely get to and from work and talk to your manager if you need to make any alternative arrangements.

You can also find some useful advice for travelling to work safely in severe weather [here online](#).

Remember to check on neighbours, particularly those who are elderly and live alone. Now's the time to check you have batteries in your torches and transistor radio; check the gas bottle on your barbecue is full to use in the event of power cuts. Is your emergency kit fully stocked? For details of what to include in your kit see the [Get Ready, Get thru](#) checklist.



CANTERBURY

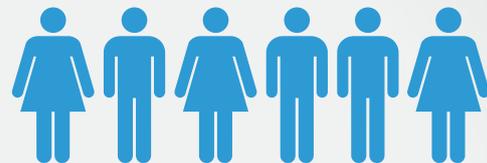
Community

HealthPathways

MADE IN CANTERBURY – USED AROUND THE WORLD

25 MILLION+

people all benefit from their own localised versions of the HealthPathways system



AUSTRALIAN HEALTH ORGANISATIONS



NEW ZEALAND DISTRICT HEALTH BOARDS



UK NHS TRUST



AT ANY SECOND

of the working day, 15-20 clinicians somewhere in our health system are looking at a HealthPathway



- ✓ Saves patients' and clinicians' time
- ✓ Saves money
- ✓ Improves access to services
- ✓ Supports the NZ Health Strategy

Canterbury
District Health Board
Te Poari Hauora o Waitaha

our health system

HEALTHPATHWAYS
is the Canterbury Health System's way of saying:

THIS IS THE WAY WE DO THINGS AROUND HERE

Facilities fast facts

Acute Services Building at Christchurch Hospital

Construction continues with the fit out and installation of services, and timber framing throughout the West Tower. There are still about two weeks of work left for the application of intumescent paint around the outside perimeter of the east tower and podium from Ground to Level 2. Work will take place weather permitting and in the right wind conditions. Air quality monitoring in the immediate vicinity of this work is ongoing.

As the wards on Level 3 start to take shape, thanks need to go to the User Groups for the huge number of hours they put into the project. Acute Services Building had 14 user groups running from Feb 2013 to June 2015 meeting every fortnight. That's 62 meetings with five attendees for two hours = roughly 620 hours of clinical time into design meetings, and does not include time at the Design Lab or work between meetings. During 2016 there was ongoing design input from the Facilities Development team undertaking audits and review of plans, of which there were roughly 5,829 drawings.

A reminder that now the building is under construction, there can be no more changes to the plans.

Outpatients Building

All of the main long steel columns are in place. There will be weekly concrete pours ongoing in Zone B with Level 3 being poured this week.

In Zone A, the roof structure is in place, which is about 1/3 of the total roof area. Intumescent paint spraying, and services, plumbing and sprinkler pipe installation is continuing on multiple levels.

The Christchurch outpatients had six user groups running from Oct 2015 to June 2016 on an accelerated design programme meeting every fortnight which entailed 19 meetings with five attendees for two hours. That's roughly 190 hours of clinical time, not including time in design lab or work between meetings. There are roughly 1,000 plans and drawings that needed to be reviewed for the Outpatients build.

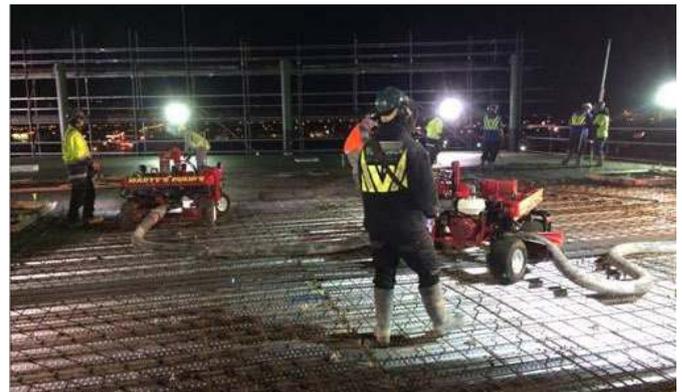
Energy Centre Project

The temporary boilers are expected to come on line at the end of this week with further testing to continue the following week. This week, contractors will be testing the alarm signals to ensure everything is fit for purpose.

Dominion Constructors Limited (DCL), who were awarded the contract for the tunnel repairs, will set a schedule of works for the tunnel repairs that are expected to begin before the end of the month. Where ever possible, any potentially disruptive work will be done over the weekends. Existing services are being stripped out of the tunnel ahead of repairs to it to create an IL4 rated conduit for future services. There are no plans for the tunnel to be returned for pedestrian access.



A view of the main stairwell in the central core between the West and East tower blocks



An early morning concrete pour to create Level 4 of Zone B at the Christchurch Outpatients

Metro Sports Facility progress update

The Metro Sports Facility will enter its construction phase this year. View a video on its progress and an interesting discovery on the site [here](#).

The Parking Spot

Parking is less fuss by bus



This morning staff at Christchurch Hospital gave their new staff Park & Ride service a go.

The service, which runs to and from the Deans Avenue car park, aims to remediate some of the parking issues for staff who work on the Christchurch Hospital campus, particularly the issue of having to walk to or from their cars in the dark.

The new service is being trialled for three months, and is run by Red Bus. Their buses run from 6 am until 8.30 am to bring staff to work, and from 4.30 pm until 7 pm to take staff back to their cars.

Staff please note that a member of the Security team will be on site at Deans Avenue from 6 am and until 7 pm.

Parking costs \$5 per day at Deans Avenue, or \$5.50 if paying by credit card. The bus itself is free to use. Staff will need to show their Canterbury DHB ID card to get the free ride.

Further instructions have been sent out to staff on campus, or are available at the **Parking Spot** on the [intranet](#).

There may be adjustments to the timings based on shuttle use over the trial period. Staff are welcome to give us feedback via the email carparking@cdhb.health.nz

Why are there lots of free spaces at the moment in the staff car parking building on Antigua Street?

A few staff have asked this question. The transport team says there are two main reasons:

1. Later on this year we will lose the temporary section of the afternoon car park on St Asaph Street, when the Metro Sports facility build begins. To address this issue we are therefore going to move users of that car park to the staff car parking building. To enable this, we have already relocated staff who predominantly work between the hours of 0600 and 1800 to the new 94 Tuam St car park.
2. The Medcar building on the corner of Tuam and Antigua Streets is about to enter its main construction phase. Concrete walls will be craned in and installed in sections. For safety reasons, during the few days this is being done we will not be able to use the northern end of our staff car parking building for car parking. Once the Medcar work is done, about half of the staff using the afternoon car park will be moved to the staff car park. There will be no change to the terms of use and afternoon parking will still be charged at \$2.20 per day.



DHB Staff Shuttle



Deans Avenue to the Hospital

Departs Deans Ave	Arrives Hospital	Departs Deans Ave	Arrives Hospital
6:00	6:08	16:30	16:38
6:05	6:13	16:35	16:43
6:10	6:18	16:40	16:48
6:15	6:23	16:45	16:53
6:20	6:28	16:50	16:58
6:25	6:33	16:55	17:03
6:30	6:38	17:00	17:08
6:45	6:53	17:15	17:23
7:00	7:08	17:30	17:38
7:15	7:23	17:45	17:53
7:30	7:38	18:00	18:08
7:45	7:53	18:15	18:23
8:00	8:08	18:30	18:38
8:15	8:23	18:45	18:53
8:30	8:38	19:00	19:08

Hospital to Deans Avenue

Departs Hospital	Arrives Deans Ave	Departs Hospital	Arrives Deans Ave
6:08	6:15	16:38	16:45
6:13	6:20	16:43	16:50
6:18	6:25	16:48	16:55
6:23	6:30	16:53	17:00
6:28	6:35	16:58	17:05
6:45	6:52	17:15	17:22
7:00	7:07	17:30	17:37
7:15	7:22	17:45	17:52
7:30	7:37	18:00	18:07
7:45	7:52	18:15	18:22
8:00	8:07	18:30	18:37
8:15	8:22	18:45	18:52
8:30	8:37	19:00	19:07



Bouquets

Acute Medical Assessment Unit and Ward 24, Christchurch Hospital

Our Mum passed away here this morning after receiving the most extraordinary palliative care from so many outstanding, wonderful nurses and doctors. Thank you so very much.

Maternity Ward, Christchurch Women's Hospital

The women here have been truly amazing! I honestly believe that without the help and support from these superstars I would be having a completely different experience with my little one. The support, knowledge and tips I've been given over the last few days are invaluable and I cannot thank them enough. I came here unsure and scared and I'm leaving confident with a calm wee boy who's now feeding properly and I couldn't be happier. Thank you from the bottom of my heart.

Burwood Hospital

It was lovely having someone to offer help as soon as I walked in the door, as I haven't been to this hospital before and didn't know where to go for my appointment in Radiology. Lovely, gentle, caring people who did the X-ray.

Lincoln Maternity Hospital

I requested to be transferred to Lincoln Hospital for after-birth services, after giving birth at Christchurch Women's. We have been so impressed with the facilities, and most of all, the staff have all been amazing! They have been so great with every query, and despite being extremely busy, they never made me feel as if they didn't have time. I always felt comfortable to ask anything and never hesitated to push the buzzer. As a first time mother I think this has been so helpful. We are so glad that this facility and all it has to offer is available.

Melissa, Post Anaesthesia Care Unit, Christchurch Women's Hospital

Melissa is a great nurse and made our visit very easy and made my son feel very comfortable. Thanks again Melissa.

Children's Acute Assessment Unit, Christchurch Hospital

Very grateful for the amazing care. Everyone was totally understanding. Great nurse and doctor throughout the night. Very impressed with surgeon Andrew who assessed my daughter in case she had appendicitis. He was so lovely with her, joking around and making her feel so comfortable. He was so parent-friendly (i.e. was able to explain things in normal language and explain exactly what was happening with her). We usually try and avoid the hospital when my son has severe asthma but now my confidence has grown and I feel so grateful for the service.

Gynaecology Ward, Christchurch Women's Hospital

From start to finish my care under this service has been exceptional. Everything has happened quickly and smoothly. Everyone I have met has been wonderful. Thank you for answering all of my many questions and giving me absolute confidence in the surgical team. Thank you to the team on the Gynaecology Ward – the care has been excellent. Special thanks to those who looked after me on my first post-operative night. Your friendly, professional and pro-active care has set me up for a great recovery.

Charlotte, Emergency Department, Christchurch Hospital

I'd like to pass on my compliments to the junior doctor who took care of my father today/tonight. Dr Charlotte was not only very thorough but genuinely wanted to

investigate the long-term health of my father rather than just 'patch him up'. We have been having trouble getting him to understand he needs more help with his declining health, so that meant an incredible amount to me and the rest of my family. She is a fine addition to your team. Please pass on my note.

Cardiology and Ward 14, Christchurch Hospital

I would like to compliment all the staff who looked after my husband. Everybody with whom he came in contact was professional and kind. But in particular the nurses in Ward 14 were so wonderful. Gentle, friendly and caring. The media often portray our health services in a very negative light. Please pass on our thanks to all the staff on Ward 14. We don't live in Christchurch or I would come in with a cake for morning tea.

Sue, Deborah and Lucia, Mental Health Services

Very helpful and friendly (nurses), thank you so much.

Park and Ride and Acute Medical Assessment Unit, Christchurch Hospital

Good service. Especially grateful for the parking arrangements. The parking attendant offered to park our car.

Ward 18, Christchurch Hospital

Mark is a very good nurse, as are all the nurses on Ward 18. Thanks for all the help.

Ward 11, Christchurch Hospital

Doctors and nurses are so friendly and helpful and very kind.

Plastics Department, Christchurch Hospital

Lovely RN Sara. Great service. Thank you.

Child Health Acceleration Programme (CHAP) gaining momentum

A year ago, if you mentioned 'CHAP' in Child Health, many people might have given you a blank look.

Nowadays, the Child Health Acceleration Programme (CHAP) has become part of the everyday Child Health lexicon.

CHAP is a 12-month supported programme during which the participants experience two clinical rotations within the Child Health specialty alongside supported postgraduate study.

The programme focuses on enhancing the personal and professional development of registered nurses working within child and youth health. It provides a range of professional development opportunities with focus on a whole system view of child and youth nursing.

There are four components:

1. Participants undertake two postgraduate Level Eight papers during the year.
2. Two four-month rotations in two pre-selected specialty focused clinical areas.
3. Mentor support for each participant to achieve programme expectations.
4. Professional Development Recognition Programme participation.

Over the past year, the CHAP nurses have rotated around the Child Health department, gaining new clinical knowledge and skills and teaching staff in their new areas from their own clinical expertise and experience.

They have all undertaken Level Eight postgraduate study supported by Health Workforce funding. At the moment they are taking part in a research study about their experiences.

These findings will be presented at the Australasian Nursing Education conference in Christchurch later this year.

On June 1, the first group of CHAP graduates gathered alongside the new incoming programme cohort for a combined graduation and induction ceremony and afternoon tea. Speeches were made, a cake was cut and certificates received. It's a credit to the CHAP organisers and participants alike that there is such excitement about the programme in Child Health.



2017-2018 CHAP candidates, from left, Rachel Boyes, Kate East, Alysha McNabb and Sinead Shearing



CHAP graduates, from left, Laura Lagan and Emma Smith cut the cake.

New Surveillance Audit Report received

The [Surveillance Audit Report](#) from March 2017 against the Health and Disability Service Standards NZS 8134 has been received. Canterbury DHB is certified until the 21 September 2018. The date for full Certification Audit is as yet not agreed.

Summary of Corrective Actions

- Required improvements closed out from the previous certification audit include nursing assessments and care planning at Tuarangi and Canterbury DHB restraint committee structure. All partial provisional facility management improvements required at Burwood were verified to be closed out.
- Required Improvements remaining from the previous certification audit include document control, corrective

actions plans, performance appraisals and credentialing, nursing assessments, early warning scores and medication management (across services audited with the exception of Tuarangi).

- There are new required improvements as a result of this audit including informed consent (not for resuscitation and general consent), provider arm clinical governance reporting structures, aged care contract requirements, service delivery practice, and restraint minimisation.

Staff with responsibilities for the Corrective Actions have been notified and the Canterbury DHB Quality Managers group overseeing the process.

SI PICS marks one year at Older Persons Health & Rehabilitation

Last week marked the first anniversary since the introduction of the South Island Patient Information Care System (SI PICS) to OPH&R (Older Persons Health and Rehabilitation). The initial implementation was to the outpatient services and community services teams based at Burwood and The Princess Margaret Hospitals in late June 2016.

The first go-live involved:

- Training 100 core administration, and 240 other staff in using SI PICS.
- Importing 75,000 patients records from Homer PAS and SAP (our older patient administration systems) into SI PICS.
- Migrating 4,364 referrals and 2,500 wait list entries.

Since then there has been an upgrade to a new release of SI PICS, and the progressive implementation to inpatient services at Burwood.

OPH&R are the first users of SI PICS in what will be the single patient administration system across all five South Island DHBs.



Deborah Chestnut, Ward Clerk at C1 with Super User Beverley Ballantine

Kitrina Griffin is a Ward Administrator in Ward AG – Older Person's Mental Health at Burwood. She is one of around 350 active SI PICS users today. Kitrina was involved with the SI PICS team in documenting existing ward processes and identifying areas for improvement and she has been an active member of the Inpatient User Group. Last week we caught up with Kitrina and asked her what she thought about SI PICS.

What were your first impressions of SI PICS?

"I feel SI PICS is easy to use and user friendly. I liked SAP but there was a lot of flicking between the screens when admitting patients. In SI PICS I base myself in the Ward Bed Board screen and can easily complete my daily ward tasks like updating contacts and placing patients on leave."

How has SI PICS improved your work?

"The Ward Bed Board is great, makes label printing very easy. Overall I can manage my daily tasks faster with a smoother workflow. The HoNos form now being available in Health Connect South is much easier to complete and a nicer format for data entry."

Does SI PICS meet the needs of your team?

"Yes, in general. The reporting side of PICs is not a comprehensive as SAP, but it is early days yet."

How do you find the level of support?

"It was and still is great having the onsite face to face support. I attend the monthly SI PICS IP User Group, it's a relaxed forum to raise issues and helpful to problem solve as a group. I have become very skilled at changing printer ribbons; they are rather tricky things to replace."

Any suggestions for the PICS Team?

"Training – training was good and I picked SI PICS up reasonably quickly. The drop in sessions were a good idea, but often you only have a spare 10 minutes so by the time you walk down to the training area it's time to come back. Being able to access a test training system on your own PC when you have a spare few minutes would ensure everyone got to practise with SI PICS and help consolidate what was learnt in training."

The General Manager Older Persons Health & Rehabilitation, Dan Coward said, "It is always an adjustment coming to grips with major new systems and after a settling-in period, I think this first year has had challenges but has gone really very well. I am proud of the way our teams have worked so hard. We have some very engaged users, and ideas for improvement from people such as Kitrina are always welcomed - and listened to. Each new release and update is designed to bring new features and other improvements."



Dan Coward with members of the testing team during the original go-live weekend

Stella Ward, Executive Director Allied Health and the CDHB Executive Sponsor for SI PICS, said, "As the first major user group of this new software, I congratulate the OPH&R team on reaching this milestone.

"We are working hard to deliver improvements on a regular basis, and to extend the use of SI PICS across the rest of the Canterbury Health System and the South Island.

"Those core users who work with the system on a daily basis to support patients' as they come into contact with the Canterbury Health System are key. It is important to also acknowledge the impact these systems have on many others. Decision Support, Finance and ACC, Planning and Funding, Information Services, other projects, the Organisational Development Unit, and operational managers all have been impacted by and contributed to the success of this programme so far at Canterbury DHB. Well done!"



Stella Ward with Andrew Hall during the go-live weekend in 2016. Andrew was involved with the original Homer PAS implementation in 1995

Since go-live, in one year of using SI PICS there have been around

- 350 users regularly using SI PICS
- 13,000 patient records updated
- 39,000 new referrals entered
- 54,000 waitlist entries created
- 55,000 outpatient visits managed
- 77,000 community visits managed
- 1,000 inpatient admissions managed (since March 2017).

Scam warning: Bogus Windows support phone calls

By lunchtime today alone, Information Services Group (ISG) had received eight reports from staff who had received a phone call from someone offering Windows support. These are bogus calls, and while they may say they are calling from IT, they aren't Canterbury DHB staff.

Well done to those eight staff who were on the ball and did the right thing in reporting the calls - please be vigilant and don't fall for these scams. Luckily no one has followed their instructions to date so this is speculative, but it is likely the scammers are after information that might allow them to lock your account and ask for payment to unlock it, or they are looking for a way to hack accounts that will give them access to passwords or even bank account details.

Only ISG deal with Microsoft directly on matters that relate to Windows or other computer applications, so there is no need for Microsoft to contact any other staff directly. **If ISG contact you, they should identify themselves and if they aren't responding to a service request you made, check their name in the internal directory.**

Any staff receiving a bogus call that relates to IT issues should make a brief note of what is said/offered (if you have time), then **hang up and report the call to ISG.**

- Don't give them any personal or Canterbury DHB details,
- Don't open any email they send you and if you accidentally do open one, don't click on any links – and beware of the 'unsubscribe' trick, just report the email as spam using the Sophos tool.

WellFood is one week old!

Celebrations to thank WellFood staff for a smooth transition and welcome them officially as Canterbury DHB employees were held at Princess Margaret, Hillmorton, Burwood and Christchurch hospitals last Friday with an Ashburton event to follow later this week.

WellFood is the new name for food services across the DHB and also includes orderlies, cleaning and laundry services at Ashburton Hospital.

You can find out more about WellFood on the [intranet](#) and send any questions or suggestions to wellfood@cdhb.health.nz



Scenes from the WellFood staff celebrations



Getting a sporting chance to beat glaucoma



Andy Dickerson

A chance encounter with a Kiwi sporting legend and his wife saved Canterbury DHB member Andy Dickerson's eyesight from serious damage.

Sports fan Andy spotted former cricketer Sir Richard Hadlee and his wife Dianne on the front cover of the *New Zealand Women's Weekly* when he was searching for something to read at the hairdresser.

Richard and Dianne are Glaucoma New Zealand Ambassadors and the pair were encouraging people to get their eyes tested regularly.

Andy decided to heed that advice and in early 2016 he was diagnosed with primary open angle glaucoma – a condition with no early symptoms that could have made him blind.

"This came as a shock to me as I had always had very good eyesight, no symptoms and no family history. Glaucoma was the last thing in the world I expected to be diagnosed with," Andy says.

Without that eye examination, he could have had irreversible damage to his eyes by the time symptoms began to appear.

Andy says that like many people in Christchurch, his home was badly damaged in the earthquakes and it took years to resolve insurance issues. He then moved to North Canterbury. It was during this unsettling period he let his eye appointments slip.

"I've worked in the health sector my whole career - I should have known better. I should have had an eye test much sooner."

Andy is sharing his story in support of Glaucoma New Zealand Awareness Appeal this month in the hope he can convince others to get their eyes checked, and donate to the charity.

"I am asking everyone to support Glaucoma New Zealand and help get the message out there in our communities and workplaces that regular eye tests can save your sight."

Andy says his prognosis is good because he sticks to a daily routine of taking prescribed eye drops and keeping up with eye checks.

"I am very hopeful of keeping my sight if I continue with the treatment. At 54 years of age there is always the chance a better treatment will be developed in the future. I consider myself extremely lucky."

Sir Richard says it's "a great feeling" that he and Dianne can make a difference through their roles as ambassadors for Glaucoma New Zealand.

"Men can be blasé and think: 'she'll be right mate' - but then one day things might not be right. You can't afford to be macho about it, you have to get the checks done."

Glaucoma is the name given to a group of eye diseases in which the optic nerve at the back of the eye is slowly destroyed. It is the leading cause of preventable blindness in New Zealand but treatment is possible if it is caught early enough.

Richard says Glaucoma New Zealand's annual appeal is a great cause to support because there is no cure and funding research is vitally important.

Donations can be made via Glaucoma New Zealand's website www.glaucoma.org.nz or by visiting your nearest ASB Bank branch during July. Participating optometrists, ophthalmologists and pharmacies will also have Glaucoma NZ collection boxes in July.

Glaucoma New Zealand recommends an eye examination for glaucoma every five years from the age of 45 and every three years from the age of 60. However, at any age, if you notice changes in your eyesight, you should have your eyes examined immediately.

For more information phone 0800 452 826 or email info@glaucoma.org.nz or visit glaucoma.org.nz.

Southern cancer MDMs adopt Southern DHB solution

Southern DHB's innovative cancer multidisciplinary meeting (MDM) system will soon be supporting quality clinical decision-making for cancer patients across the South Island.

Designed by local clinicians and an IT developer, the electronic MDM system has been in use in Southern DHB since 2013. It is being made available progressively across the South Island via the Health Connect South clinical portal from 31 July.

MDMs bring together a range of specialists involved in diagnosing and treating cancer to discuss individual patients and make treatment or care plan recommendations. They are a key part of best clinical practice and patient management; providing continuity of care and reducing variation in access to treatment – and ultimately improving outcomes for patients.

The electronic MDM system was developed to support these processes following an extensive review of local services, says Dr Blair McLaren, Southern DHB Medical Oncologist and MDM Clinical Lead: "We took a pragmatic approach, with the aim of creating an intuitive and functional electronic form that could be easily completed in real time to support and document decision-making in the MDM. It was also important to ensure there was consistency across the different tumour streams that use the system."

The project was initially led by a design and development team consisting of Dr Colin Wong, Respiratory Physician and Chair of the lung cancer MDM; Lance Elder, the Application Developer; Paula Goodman, former MDM Quality Facilitator and Dr McLaren.

Making the system available across the South Island will provide many benefits, says Dr Adrian Balasingam, Chair of the South Island Cancer MDM Governance Group and Canterbury DHB Consultant Radiologist: "We are really excited about the opportunities and improvements this software system will bring to the rest of the South Island. Currently, a mix of different systems is being used such as letters sent by post, emails and spreadsheets. It could be weeks before all the information was collated, finalised and available for everyone to view. Now, this information will be available to our clinical teams and GPs within hours or a day. Southern DHB's solution will significantly speed up the entire process, which is also a key enabler of the FCT (Faster Cancer Treatment) initiative."

Other advantages of a single, shared electronic MDM system include: better alignment of MDM processes and practice across the South Island; quality and consistency of referral information; improved timeliness of clinical documentation following MDMs; increased visibility of patient care coordination and inter-district flow; and better support for clinical audit and reporting requirements.

The MDM system will be piloted by the Canterbury gynae-oncology and lung cancer MDMs for six weeks before being made available progressively to all remaining cancer MDMs hosted in the South Island. The South Island Alliance's Southern Cancer Network is leading the project and the South Island Cancer MDM Governance Group is providing clinical leadership.

Regionalisation of the system also supports the Ministry of Health's Cancer Health Information Strategy and Cancer Plan 2015-2018, which has a focus on the standardisation of MDM data and development of appropriate tools to support this.



A Southern DHB MDM in action

Christchurch Victory Parade Emirates Team New Zealand route confirmed

The route for the Emirates Team New Zealand victory parade has been confirmed as Christchurch gears up to give a warm (or perhaps snowy) South Island welcome to the champion sailors.

The parade on Wednesday 12 July will start at 12 noon at the corner of Colombo and Lichfield Streets (next to the Bus Interchange). It will head north along Colombo Street before turning left into Hereford Street and right into Montreal Street. The parade will finish at the Christchurch Art Gallery where there will be a formal welcome and speeches. Twenty-five members of the team will be taking part in the parade which will feature other entertainment.

Some road closures are expected between 9am to 2.30pm on the Wednesday. Canterbury DHB's emergency planners are meeting parade organisers the day before for a full briefing. To view potential disruptions and the latest information visit www.christchurchnzparade.com.

Emirates Team New Zealand Victory Parade map



Skin clinic discovers new leprosy cases

Fifteen probable new cases of leprosy were found at a skin clinic in Kiribati attended by two Christchurch clinicians.

University of Otago and Canterbury DHB Infectious Diseases Specialist, Stephen Chambers, Dermatology Registrar, Emma Trowbridge, and Older Persons Health Clinical Assessor, Jude Baker, along with two other New Zealand doctors were part of a group of medical practitioners who travelled to Kiribati to participate in a skin clinic organised by the Pacific Leprosy Foundation (PLF).

Jude did her pharmacy role along with the General Manager of PLF, Jill Tomlinson, who oversaw the whole programme.

The skin clinic is the third phase of the leprosy eradication program that PLF, alongside the staff of the Kiribati Leprosy Unit, have been successively implementing across villages in Kiribati since 2015.

The main aim was to detect and treat leprosy and to also provide diagnoses and treatment for patients with other dermatological conditions.

Fifteen probable new cases of leprosy were detected, Emma says.

Biopsies were performed to confirm the diagnosis, and the samples will be processed by Canterbury DHB's Anatomical Pathology department with Anatomical Pathologist, Jacqui Gardner reporting the histology.

"To put these numbers in perspective, the World Health Organisation's (WHO) target for leprosy elimination is one case per 10, 000 inhabitants in endemic areas."

The combined population of the villages that we visited is around 11,000 people, so 15 cases represents a significant departure from the WHO's target, which was set to be achieved by the year 2000.

"The relative high number of cases highlights that this treatable disease remains a public health concern in Kiribati and warrants attention and efforts for elimination and ultimately eradication," she says.

This year's clinic was held in village maneabas over a three day period. A maneaba is a large open air thatched meeting house which is the cornerstone of village life.

"In 30-degree heat it was a relief to be within the shade of the maneaba but with no air conditioning the conditions were definitely stifling."

There were no hand washing facilities, however buckets of water and a quick dry hand-sanitiser proved to be adequate.

Over three days more than 700 patients were seen, with local doctors and nurses acting as translators.

"This afforded an excellent opportunity for teaching about leprosy and general skin conditions as well as strengthening relationships with the locals who are at the coalface of delivering the programme year round," Emma says.

PLF is planning to repeat the skin clinic again next year. It is hoped that Canterbury DHB can continue to form a partnership with the Kiribati Leprosy Unit, working together towards the shared goal of the eradication of leprosy.



The Kiribati team. From left, Steve Chambers. Third from left, Emma Trowbridge, fifth from left, Jude Baker



Emma Trowbridge treating a patient

Career marked by decades of dedicated service

A farewell morning tea was held at Te Awakura last Thursday to mark the retirement of Bev Peck, Registered Nurse, East Inpatient Unit, Hillmorton Hospital, after a nursing career spanning 56 years.

Bev's colleagues, her daughter, grand-daughters and an old school friend attended.

Bev started her nursing career in 1961 at Seacliff Hospital, north of Dunedin, graduating as a Psychiatric Nurse in 1965. Bev's varied career included being a Charge Nurse at Ashburn Hall for 12 years, training in psychodrama, and being selected for a three-month exchange programme between Ashburn Hall and Cassell Hospital in London.

Tanya Ewart, Charge Nurse Manager at the East Inpatient Unit, spoke of Bev sharing many of her happy, rewarding and career-defining memories with colleagues and consumers.

"These stories show Bev's remarkable passion for nursing, willingness to give of herself, professionalism, generosity and wicked sense of humour," said Tanya.

Acting Nursing Director, Patrick McAllister, and Nurse Consultant, Anne-Marie Wijnveld, also spoke of their appreciation and admiration for Bev both in terms of her time at Te Awakura and of her long career.

Bev was presented with a Canterbury DHB token of retirement and a gift and card from her colleagues on the ward.

Congratulations Bev on your retirement, and thank you for your years of dedicated service. We wish you health and happiness as you enjoy your retirement.



From left, Bev Peck at her retirement morning tea at Te Awakura. Nurse Consultant, Anne-Marie Wijnveld and Acting Nursing Director, Patrick McAllister



Colleagues, family and friends of Bev Peck who gathered to mark her retirement last week. It was Bev's idea to stand and hold hands as a gesture of unity and togetherness

Contact your authorised vaccinator to get a flu shot

There are no flu clinics scheduled for this week so if you haven't had your flu shot yet please contact your authorised vaccinator. If you're not sure who your authorised vaccinator is ask your Clinical Nurse Manager or [read the list of authorised vaccinators on the intranet](#)).

If there are groups of staff who would like the vaccination please let Stella Howard (stella.howard@cdhb.health.nz) know or contact your authorised vaccinator.

Had your flu shot somewhere else?

If you had your flu vaccine at your general practice team or at a pharmacy, please let us know by [clicking on the button on the flu intranet page](#).

INFLUENZA FACTS

- ❑ Influenza isn't just a bad cold – it can be serious and can kill
- ❑ Over a million kiwis get influenza immunisation yearly
- ❑ Immunisation prepares your immune system to fight influenza
- ❑ You cannot get influenza from the vaccine
- ❑ Influenza immunisation is FREE for those most at risk

Mailroom clerk selected for Indoor Cricket World Cup

Christchurch Hospital Mail Room Clerk Katie Morris has been selected for the New Zealand 21 and Under Indoor Cricket team to play at the prestigious World Cup 2017 in Dubai.

The United Arab Emirates (UAE), in partnership with Cricket Australia, has the hosting rights for the 2017 World Indoor Cricket Federation (WICF) World Cup.

The event will attract about 400 players and officials and will be held over seven days of competition from 16-23 September in Dubai's newly renovated Insportz Club.

Countries taking part include New Zealand, Australia, South Africa, England, Sri Lanka, India, Singapore, Malaysia and the UAE.

Katie, who has been playing indoor cricket for five years and outdoor cricket for around 13 years, says her selection is "pretty exciting". It is the first time the event has been held in Dubai. "I am really looking forward to it; a bit nervous and excited at the same time," she says.

Her usual five hours a week of practice will increase a lot in the lead up to the World Cup event, including some training camps.

Indoor cricket is an extreme version of the traditional game of cricket. It was created in the early 1980s in Australia and

arrived in New Zealand soon afterwards. The game has two 35-minute halves and is described as fast and furious. Players are involved in all aspects of the game.

Katie's manager, Mailroom Supervisor Raji Shamy, says it's a big achievement and shows a lot of determination, discipline and a good work ethic.

"We are all very happy for her."

Katie leaves for Dubai on September 10.



Katie Morris

Get your ticket for a sweet free adventure

Gap Filler and *All Right?* have teamed up to create a parking meter with a difference in Cathedral Square.

Last week the Open City parking meter began issuing tickets displaying inner-city adventures that celebrate the undervalued, sweet, free things to do in Christchurch.

Adventures like a perfect branch to swing on in the Botanic Gardens, checking out a quirky bit of street art, or playing a giant arcade game.

These little secrets and over 50 more have so far been [suggested by locals and visitors on the Open City website](#).

As well as being a great, free family activity for the holidays, Open City is also perfect lunch time activity for people working in the city. Each Open City adventure aligns with one of the [Five Ways to Wellbeing](#) - connect, take notice, give, be active and keep learning - actions scientifically-proven to improve wellbeing.

To add your favourite free thing to do in Christchurch to the meter go to www.opencity.org.nz.



A refurbished parking meter is giving out tickets of a different kind

Valuing the patient's time in complex cancer: head and neck

In 2015, Nelson Marlborough DHB and Canterbury DHB received funding from the Ministry of Health for a collaboration project "Valuing the Patient's Time in Complex Cancer: Head and Neck".

Treatment for head and neck cancer patients can be complex and difficult, involving many specialities, multiple visits for assessment and treatment, and often long periods away from home. The aim of the project is to focus on the quality, visibility and flow for patients on this pathway and identify areas where improvements could be made to timeliness and the patient's experience.

Interviews and surveys are being carried out to identify what patients thought of their treatment: both the things we did well and where we could do better, says Radiation Oncologist Dr Iain Ward, who is the clinical lead for Canterbury DHB.

"I have a lot of admiration for how the people we treat cope with all the appointments, tests and travel even before they start treatment for their cancers. Reading the stories they have told us has reinforced for me how disruptive these things are,

although they seem routine for us in the Cancer Service. It's great working with Nelson Marlborough DHB colleagues and patients, with their different perspectives, to see how we can improve the experience of people with head and neck cancer."

The survey responses so far have been overwhelmingly positive but they will be analysed carefully to see what patients would like us to focus on in terms of service improvements.



Immobilisation device for radiation therapy for head and neck cancer

Canterbury Grand Round

When: Friday, 14 July 2017 – 12.15pm to 1.15pm

with lunch from 11.45am

Venue: Rolleston Lecture Theatre

Speaker 1: Stephen Mark, Urology

"NZ Prostate Cancer Registry: A quality improvement initiative"

I am the clinical lead for the NZ Prostate Cancer Registry, a Movember-funded national project, which aims to identify all new prostate cases, document treatment and outcomes for clinician feedback and improve access to care and quality of care with an estimate that this may improve outcomes up to 25 percent.

Speaker 2: Bronwen Larsen, Public Health

"Development of the Canterbury health system Alcohol Strategy: the importance of clinicians' participation"

A wide range of activities to reduce alcohol-related harm occurs across the health system, from preventative measures such as alcohol licensing, health promotion, and advocating for policy and legislative change to clinical services, such as identification and treatment across a number of clinical and community settings for alcohol-related injuries and disease. Development of the Alcohol Strategy brings together

representatives from across the Canterbury health system to link all of these activities with an overarching vision, a set of focus areas and specific objectives. This presentation addresses the importance of clinician participation in the ongoing development and implementation of the Strategy.

Chair: Sue Nightingale

Video Conference set up in:

- » Burwood Meeting Rooms 2.3b
- » Wakanui Room, Ashburton
- » Administration Building, Hillmorton
- » The Princess Margaret Hospital, Riley Lounge
- » Pegasus, 401 Madras Street, Christchurch 8013, Room 1.02

All staff and students welcome.

This talk will be uploaded to the [staff intranet](#) within approximately two weeks.

Next is – Friday, 21 July 2017 (Rolleston Lecture Theatre)

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

Donation of recliner chairs to Ward 20

Burn Support Group Charitable Trust has given two recliner chairs to Ward 20 to provide some extra comfort to patients and their families going through intensive treatment and rehabilitation from burn injuries.

Ward 20 is the Regional Burn Unit for the South Island, except for patients at Nelson Marlborough DHB.

Trust Administrator, Michele Henry, says last year she was fortunate to meet with a contact from Harvey Norman, which led to six recliner chairs being given to the charity.

Four had already been donated to other hospitals.

"It was decided that Christchurch Hospital would be the next recipient."

Ward 20 was chosen as most burn injuries will be assisted and cared for in this sector of the hospital.

"I am very pleased the charity has been able to donate two wonderful recliner chairs, which will be a great asset for patients and their families," she says.

Ward 20 Charge Nurse Manager, Sharon Minchington, says Ward 20 would like to thank the Burn Support Group, along with Harvey Norman, for the generous gift.

"Our burn patients understandably welcome any comfortable seating that they can use in between what can be a very intensive rehabilitation journey for them.

"I am sure our patients will get a lot of use from these chairs, and the recliner and raised leg rest function of these chairs will be beneficial and most welcomed."

ABOUT THE BURN SUPPORT GROUP

The Burn Support Group is a non-profit charitable organisation founded in 1987 by Delwyn Tait, whose eight-year-old son had three years earlier sustained burns to 40 per cent of his body.

Burns are traumatic injuries both for patients and their families, Michele says.

"They can be faced with many losses - their physical appearance, sometimes their home, income, or perhaps grieving the loss of a family member or colleague involved in a fire."

The trust aims to support people with burn injuries by visiting them in hospital; funding equipment to help burn patients, fostering the sharing of information between burn survivors, their families, health professionals and other interested parties; and offering to accompany and support children who have burn injuries when they return to school.

They provide opportunities for mutual support for burn survivors, such as workshops and the annual Burn Support Children's Camp for 7-17 year olds. The camp provides an ideal opportunity for children to safely share their experiences and learn how to cope with taunting, staring and teasing.

The trust also provides a Women's Burn Survivor Retreat Weekend and educates people about burn prevention by holding educational seminars and providing free resources.

For more information visit www.burns.org.nz or contact the office on 09 270 0640.



Rear, from left, Ward 20 Charge Nurse Manager, Sharon Minchington, Harvey Norman Furniture Proprietor, Mike Morgan, and Burns Support Group Charitable Trust Administrator, Michele Henry. Front, from left, sitting on the donated chairs, registered nurses, Nicole Watts and Hannah Thiele

One minute with... Bridget Frame, Coordinator, North Canterbury Rural Support Trust



What does your job involve?

The North Canterbury Rural Support Trust is a Charitable Trust and was set up 30 years ago in the 80s when farming was going through tough economic times. The trust was formed as a support network for farmers and their families to help them through difficult financial and personal struggles and in adverse events such as major snow storms, fire, floods and earthquakes. We have 24 volunteers within our Trust, living in rural areas. Most are currently farming, retired farmers and have skills and knowledge of rural life. The area we cover is from the Rakaia River in the south to just north of Kaikoura. There are now 14 Rural Support Trusts covering the whole of rural New Zealand – seven in the South Island and seven in the North Island.

My coordinator role is varied, including general administration, working alongside our chairman, secretary and trustees, communicating with and keeping our team of volunteers updated, organising and supporting community events, responding to 0800 calls and basically helping run the Trust as efficiently as possible. We also have a website and Facebook page which I update.

Another part of my role within the Trust is Wellness Coordinator, as part of the Rural Mental Wellness Initiative. This initiative was set up when government funding through the Ministry of Primary Industries was made available for mental wellbeing in the rural communities, and to be implemented through each Rural Support Trust. This involves raising an awareness of mental wellness within the farming community, rural professionals, rural contractors and our team, which includes educating through various training workshops. Raising the profile of the Trust is important, linking in with other agencies and connecting with our Rural Canterbury Public Health Organisation team. Putting on community social gatherings and events for the community is also a big part of promoting mental wellbeing, getting farmers off the farm, socialising and connecting with people. Farming can be a very isolating job because they often work alone as well as living in isolated areas, so it's important to keep them connecting with others.

Why did you choose to work in this field?

I am sheep and beef farming in partnership with my husband and was brought up on a farm, and I also trained as a registered nurse but am not currently practising. Having a health and farming background, this role fitted the bill. I was so impressed with the Trust and the work they do and was lucky enough that the role came up.

What do you like about it?

I love helping people and farming is one of my passions, so the job really fits into what I'm about. I really enjoy organising events for people and seeing the enjoyment from them. I'm passionate about mental health and want to use this opportunity to hopefully reduce the stigma in our communities. It is also a very flexible job; I'm able to work my own hours from home and fit in working on the farm and also being there for my children.

What are the challenging bits?

I would have to say the recent earthquake in Hurunui and Kaikoura has brought about huge challenges. We have been involved right from the start and are still going with helping farmers through their recovery. This was challenging because of the extra workload for myself, but also frustrating at times trying to coordinate with the whole recovery agencies and different processes. It has been a huge learning curve for me and the team over these past seven months. It has been a team effort, though, and it the response of the community has been overwhelming, really looking after each other.

Who inspires you?

The Trust as a whole inspires me because there are a group of volunteers helping others in such times of need, it makes me feel humbled that we have such a caring and knowledgeable group of people working in our rural community. I would have to say my husband and children inspire me every day, with my husband's strong work ethic and love for farming and fun! My children are my inspiration to work hard and give them the best opportunities we can give them. My parents have always inspired me as they worked hard their whole life, instilled high morals and values, and have achieved so much.

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?

All of these values are relevant for my role, as I am not only communicating with our team but also with people within the community. Confidentiality is paramount as is respecting others, showing care and empathy in a non-judgemental way. These values are core Rural Support Trust values.

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

Any novel by Kate Atkinson. Her books are mysterious and gripping so are very hard to put down! John Kirwan's 'All

Blacks Don't Cry' and 'Stand by Me', on the topic of depression have been great and I'd recommend them to anyone who wants an insight into depression and anxiety in adults and adolescents.

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

Rarotonga or Fiji, relaxing on a beach in the sun.

What do you do on a typical Sunday?

Sundays are usually family days, although there is often something to do on the farm or other catch up jobs which we all help out with.

One food I really like is...

Pasta I absolutely love, and a good Indian curry!

My favourite music is...

I mostly like 70s and 80s music but I do like some new music which my daughters listen to, as I don't get much of a chance to listen to what I like!

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

Cure Kids invites applications for the 2017 Granting Round



The Canterbury DHB Research Office would like to inform you that the Cure Kids Research Grant's 2017 funding round is now open.

Cure Kids are pleased to invite applicants to submit research proposals. Cure Kids supports research that has the potential to improve the lives of New Zealand children.

The Cure Kids Granting Round supports health research projects aimed at improving the understanding, diagnosis, therapy, and prevention of paediatric health conditions.

In 2017, Cure Kids is allocating funding via four competitive funding mechanisms:

1. The Project Grant Round for projects up to \$107,000 and 1-3 years in duration.
2. The Innovation Seed Fund (ISF) for projects up to \$50,000, and no more than 12 months in duration.

3. In collaboration with the Shares in Life Foundation, a total of \$107,000 will be made available to support research aimed at improving the understanding, diagnosis, therapy, and prevention of cystic fibrosis. Projects are to be 1-3 years in duration.
4. In collaboration with Red Nose (Australia), \$200,000 NZD is available for research relating to the cause(s) and prevention of sudden and unexpected perinatal and infant death. Projects are to be 1-3 years in duration.

All applications must come via the Canterbury DHB Research Office. Please note that the Research Office internal closing date for the applications is Monday 21 August. For further information, guidelines and application forms please contact the Research Office on cdhb.researchoffice@otago.ac.nz ext 81513.

John Hamers passes away

After a very short and sudden illness we are sad to advise you that John Hamers, Transport Coordinator passed away on Friday afternoon.

John will be remembered by the many people who passed through the transport office over the years as a stalwart of the office, handy with the car keys, able to rustle up a vehicle in an emergency and always with a stash of chocolates in the bottom drawer. Never shy from giving the metaphorical shrug when a car wouldn't start (usually because we forgot to put the clutch in) he always tried to find a solution to our vehicle problems.

Starting at the St Asaph St Transport Office in 1989 he drove the hospital bus, trucks and an ambulance before moving to The Princess Margaret Hospital. John was a great favourite with the clients he transported to and from the Riley Day Hospital and Mabel Howard Clinic, his kindness to those less fortunate than himself was exemplary and his presence on the patient driving team was missed when his role was adjusted to focus on the administration requirements of the Canterbury DHB vehicle fleet.

John will be missed by his many friends and colleagues and we extend our deepest sympathies to his family. His funeral service will be held at 2:30pm on Tuesday 11 July at Harewood Crematorium.



The Library

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

[“Child health: vaccinations for 11 diseases mandatory in France starting in 2018”](#) – vaccines for young children that are unanimously recommended by health authorities will become mandatory from next year in France, after a measles outbreak in Europe early this year hurt the French badly. From *Newsweek*, published online: 5 July 2017.

[“How a community-based approach to mental health is making strides in Zimbabwe”](#) – faced with a chronic shortage of mental health specialists in Zimbabwe for treating mainly depression and anxiety disorders, researchers developed a system involving lay health workers and digital platforms. From *The Conversation*, published online: 15 June 2017

[“Sugar consumption and childhood allergies – Expert Reaction”](#) – higher levels of sugar consumption in pregnancy may lead to increased risk of allergic asthma and allergies in the child, according to research from a longitudinal study published in the *European Respiratory Journal*. From Science Media Centre, published online: 6 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



Jane Nugent to speak on nurse prescribing

This is a one-off opportunity to hear Dr Jane Nugent from Australia at Canterbury DHB on Tuesday 11 July, 5.30pm to 7.30pm. Jane will be talking about prescribing and pharmacology to the Nurse Practitioner group and other nurses interested. She will happily accept questions. There is no charge to attend. Anyone interested in nurse prescribing, please feel free to contact Jill Lamb on 027 656 9796 or email jillian.lamb@cdhb.health.nz

Staff Wellbeing Programme

Finance sessions

Westpac is very proud to be a part of the Canterbury DHB Staff Wellbeing Programme and will be bringing a series of workshops to Christchurch sites over the winter months, with planning in the summer months for other Canterbury and West Coast DHB areas. Open this link to find out the sites and dates for the following:

- » July – General money management skills, saving, spending and budgeting.
- » August – Talking about ways to help first home buyers.
- » September – Discussions on retirement planning and KiwiSaver.

New Staff Wellbeing Newsletter

Welcome to [Issue 1](#) of the Staff Wellbeing monthly newsletter. You can find this on the Staff Wellbeing Intranet page. The aim is to provide articles based on the 5 Ways to Wellbeing: connect, give, keep learning, be active and take notice.

Laura Mannex, an Ara student, shares how this newsletter came about:

“I attended an interview for the Canterbury DHB Staff Wellbeing Programme. This involved me delivering a five- minute presentation on how the 5 Ways to Wellbeing could be incorporated into a Staff Wellbeing Programme. My idea included having articles relating to the 5 Ways to Wellbeing; such as nutrition, physical activity and other aspects aimed at improving the wellbeing of people employed at the Canterbury and West Coast DHB.

“My interviewers, Marilyn McLeod (Manager, Health and Safety) and Lee Tuki (Staff Wellbeing Coordinator), considered this idea to be something beneficial. This created a space and the main project for my internship. I focused on developing content for a Staff Wellbeing Newsletter.

“During my time I have developed skills in communication, creativity, time management and have enjoyed working on the project while learning a variety of skills and insights into the world of Health and Health Promotion. I hope the newsletter is beneficial and has a positive effect.”

For more information on any of the Staff Wellbeing initiatives and opportunities please contact Lee Tuki, Staff Wellbeing Coordinator, lee.tuki@cdhb.health.nz.

Staff Wellbeing Newsletter

July 2017, Issue 1



Welcome to the first edition of the Staff Wellbeing monthly newsletter. Our aim is to provide articles based on the 5 Ways to Wellbeing: connect-give-keep learning-be active-take notice.

Avoiding the 3pm slump, keep learning-be active-take notice

It is the time of day when your work day maybe nearly over and you have a decrease in energy levels. The aim of this article is to provide some tips to overcome the 3pm slump without reaching for those unhealthy or sweet treats that leave you with an energy crash.

3pm slump tips:

- ✓ Eat nutritiously, and often – aim to include a vegetable or fruit each time, and avoid meal skipping, which can promote unhealthy snacking
- ✓ Stay hydrated, drink water if you feel cravings coming on and avoid liquid kilojoules
- ✓ Go for a brisk walk to reduce your cravings, try a walking meeting!
- ✓ Prepare healthy snacks to have on hand:
 - Carrot and Peanut Butter
 - Celery and Hummus
 - Homemade bliss balls
 - Banana and unsweetened, low fat Greek yoghurt
 - Wholegrain crackers and edam cheese
 - Plain popcorn
- ✓ Understand how good it feels to eat nutritiously... is that chocolate bar really worth it?

Take this healthy cookie to work and share with your colleagues, connect-give

Ingredients

- 1 Large ripe banana, smashed
- ½ teaspoon, ground cinnamon
- 200 grams, rolled oats
- ½ cup desiccated coconut
- ½ cup dried cranberries/blueberries
- ¼ cup maple syrup or sugar free maple syrup
- ¼ cup canola oil

Instructions

1. Preheat oven to 130 degrees Celsius
2. Mix all ingredients together in a bowl
3. Use hands or a food processor to bind mixture
4. Make approximately 12 cookie sized portions and flatten
5. Bake in low heat oven for 30-35 minutes
6. Let them cool and enjoy



For More Information Contact:



Lee Tuki
 Staff Wellbeing Coordinator
 E: lee.tuki@cdhb.health.nz
 P: 027 689 0285



Strengths Workshops

For All Canterbury District Health Board Staff



In the current Christchurch environment it is more important than ever that we take time to focus on our own wellbeing.

With this in mind the CDHB Staff Wellbeing Programme and MHERC are running a series of 2.5 hour workshops focusing on '**Harnessing our Strengths**'.

On completing the workshop staff will have:

1. A theoretical understanding of the strengths based framework.
2. Tools to enable a greater understanding of themselves and others which can help improve personal wellbeing and interactions with others, both at home and in the workplace.

This workshop is designed to extend the foundation of positive mental and emotional health developed in the Wellbeing Workshops. We encourage you to attend a **Wellbeing Workshop** before attending the Strengths Workshop (although it is not a requirement to do so).

Workshop Overview:

- Increase understanding of character strengths as personal resources
- Identify and measure personal strengths
- Experience strengths-based conversations
- Engage strengths in everyday life
- Recraft tasks to increase wellbeing

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](#)

For More Information Contact:

Lee Tuki - Staff Wellbeing Coordinator

E: Lee.Tuki@cdhb.health.nz P: 027 689 0285

[Click Here to Register](#)

Canterbury
District Health Board
Te Poari Hauora o Waitaha

 **MHERC**
Mental Health Education & Resource Centre

Wellbeing Workshops

For All Canterbury District Health Board Staff



To support your wellbeing, the CDHB Staff Wellbeing Programme and MHERC are continuing to run a series of 2.5 hour wellbeing workshops.

You play a crucial role in the delivery of high quality care to the Canterbury community. It is more important than ever to take time to focus on your own wellbeing.

We are running a number of workshops in 2017 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](#)



CAMP AWHI



*A chance for
KIDS to just be
KIDS*



FOR CHILDREN 7 - 17 YEARS WHO HAVE SUSTAINED A BURN INJURY



Burn Support Group Charitable Trust CHILDREN'S CAMP

- ◆ **FREE** event held annually in January
- ◆ Confidence building Workshops and **FUN** activities

Register online at www.burns.org.nz or Email: info@burns.org.nz
Please Phone our office on 09 270 0640 for more information

Canterbury

District Health Board

Te Pōari 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



Christchurch Campus Quality & Patient Safety Team

Invitation to all staff

QUALITY & PATIENT SAFETY PRESENTATION

Come and join us for 30 minutes

TOPIC: How do you get people to change from Coke to Pepsi or wash their hands?

Rory Sutherland,
Vice-Chairman of Ogilvy and Mather Group, UK



Exceptional talks

Sharing ideas on Risk, Human Performance, Teams and Leaders

Recorded at the May 2017 Risky Business in Healthcare Conference in London

Venue: **Oncology Lecture Theatre**
Date: **Wednesday 12th July 2017**
Time: **1pm to 1.30 pm**

*An attendance record sheet will be provided.
A link to the presentation can also be provided
Please contact Shona.MacMillan@cdhb.health.nz, Quality Manager*