

Our Values: Integrity | Collaboration | Accountability | Respect | Excellence

QUALITY:
Staff Engagement
Survey Key Findings



NEWS:
Health Targets Q2
2016/2017 Results



EMERGENCY:
Being Prepared...
At Work and At Home



NOTICEBOARD:
Interprofessional
Development Day



THANK
YOU



Navigating Our Future

SCDHB Strategic Direction

Every moment matters is not only our vision, it is our commitment to our patients, our staff and our community.

It acknowledges the individual health journey while highlighting our responsibility to ensure the safe, sustainable and smart delivery of services for our community.

Health care in New Zealand is on the cusp of change. We cannot deliver our health service tomorrow the same way we do today.

We are seeing increasing social-economic disparity in our community and our ethnic diversity is growing. We need to review our local health needs to ensure we are providing equitable access for all.

Community expectation of health care is also evolving and we need to embrace this by placing tools and

knowledge into the hands of individuals, making them an equal partner in their health, wellbeing and care.

Our community is more engaged with health than ever before, providing us with a real opportunity to shift focus from illness to health and wellbeing. By taking a life course approach we can ensure we are providing interventions at opportune moments across a person's life and support people to live their lives in a way that makes every moment matter.

For our aging community life expectancy is growing faster than health expectancy. This means we need to maximise the years we spend in good health, while being clear about what matters when we aren't.

The Board is not afraid of change. We are ready to make bold decisions and prioritise our efforts to make the most of these health and wellbeing opportunities for our community. However we can't do this alone – we need to engage with our community and partners to work collectively on reducing the social determinants of health.

As an integrated and nimble DHB, we are uniquely placed to foster innovation, embrace technology and create change that maintains our integrity and high standard of care, while reflecting the needs of our community.

Together we can ensure every moment matters.



A handwritten signature in black ink, appearing to read 'R. A. Luxton'.

Ron Luxton
CHAIRMAN
SOUTH CANTERBURY DHB

OUR VISION

Every moment matters

OUR MISSION

Enhancing the health and independence of the people of South Canterbury

from the CEO

2018 brings with it new opportunities and a desire to ensure that every moment matters for our patients, our staff and our community.

We have known for some time that the way we operate today will not be sustainable for our future. Our demographics are changing, our burden of health is changing and community expectations and behaviours are changing. But what isn't changing is our bottom line. And so we need to work smarter.

Through the management restructure in 2016 we began creating an integrated health system which links throughout the patient journey from Primary Care and beyond. Feedback in response to these changes highlighted the need for focussed attention on strategic projects.

In 2017 we began the groundwork for a High Performance High Engagement organisation in which participating unions and the DHB work in partnership on strategic projects. As an integrated and nimble DHB we have a real opportunity to pioneer and innovate new models of care and initiatives which ensure every moment matters.

In order for these strategic projects to be successful there will be a number of Directorship changes. These include:

- Dr Steve Earnshaw, previously Director Clinical Services, will be Strategic Projects part-time and remain part-time Chief Medical Officer,
- Carol Murphy is Manager Strategy and Accountability

- Jason Power, previously CEO Support Office, will be Director Corporate Services
- Lisa Blackler, Director Patient, Nursing and Midwifery Services will in addition be responsible for Outpatient Services; RMO Office; SMOs - General Surgical; Orthopaedic; ENT; Dental; Gynaecology; Anaesthetists; Ophthalmology; and associated Clinical Directors; Elective Services inclusive of Perioperative; CSU and DPS; and the Surgical Ward,
- Ruth Kibble, Director Primary Health Partnerships and Allied Health will in addition be responsible for Radiology, Pharmacy and Laboratory.

Setting up the strategic leadership for the projects is just the beginning. Over the coming months you will hear more detail around the projects and how you can get involved. To be successful we need you. So be confident that you are part of a DHB that wants to get ahead of the change, that knows it can only do so with you, and is committed that together we can make every moment matter for our patients, our staff and our community.



Nigel Trainor

CHIEF EXECUTIVE

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OUR STRATEGIC GOALS

1. Productive Partnerships
2. Integrated Person-Centred Care
3. Valuing Our People
4. Health Equity For All
5. Fit For Future

Strategic priorities

Navigating our Future is the new strategic direction document for South Canterbury DHB.

The strategy has been developed over time through consultation with staff, leaders and the Board. The consultation ensured all those who wanted to were able to contribute to our future.

From the consultation, five key goals and a number of priorities were established. These are located below.

Look out for the *Navigating our Future* document which will

be coming to a coffee table near you in February 2018.

The document takes a look at where we are now, where we want to go, how we get there, how we know when we have arrived and how we did.

Carol Murphy

Strategic Projects
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Our vision

Every moment matters

Our mission

Enhancing the health and independence of the people of South Canterbury

Our strategic priorities



1. Productive Partnerships

- Engaging the consumer voice
- Bolstering community collaboration
- Strengthening regional relationships



2. Integrated Person-Centred Care

- Improving health literacy
- Designing sustainable models of care
- Developing a primary care strategy



3. Valuing Our People

- Enhancing the SCDHB culture
- Equipping our staff for the future
- Fostering innovation in the workplace



4. Health Equity For All

- Casting the equity lens over all that we do
- Developing a haurua Maori strategy
- Building cultural competency across the DHB



5. Fit For Future

- Progressing site redevelopment
- Developing local IT strategy
- Obtaining value for money

We are committed to:

- work as part of the community to keep all our people fit and well
- when needed, support convenient, seamless and effective healthcare solutions and experiences for whatever health problems our people have
- ensure affordable local healthcare for future generations

Hospital rebuild update

When we talk about a new hospital in South Canterbury we need to be realistic about the time frames. We aren't talking about a facility that will be here tomorrow, or even in the next five years.

Because when we talk about a new facility what we are really talking about is having a vision that moves our health system today to one that will meet the needs of our children and our children's children. And so if we look at the broader picture, a new hospital is about much more than simply bricks and mortar.

Health is on the cusp of change. There is a real shift in momentum from focussing on ill health to the promotion of health and wellbeing. This really empowers the individual to take proactive steps with regards to their own health. There are pockets where we are really good at this already. For example we have the largest percentage of over 85 year olds receiving support in their own home – making us an exemplar for Australasia. That focus on independence has always been key to us.

The other opportunity that is emerging is the desire by patients to have greater participation in their health care. We live in such an information-rich age. We need to be able to empower our patients with the knowledge and tools to develop relationships with health care providers where they participate as an equal and responsible partner.

So there is much work to be done around how, when and where our community interacts with health. This is much broader than the facility itself and is a really exciting opportunity to set the direction for the future of health care in South Canterbury.

Nigel Trainor

CHIEF EXECUTIVE

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Q&A

What point has the DHB reached in the process around this project?

The DHB is working on preparing the Strategic Assessment which is the first stage of the process.

What is the timeline going forward with this project, and what are likely to be the key milestone dates in the rebuild process? Timing is dependent on approval at each stage of the process. The four stage approach for a capital investment of this value is:

1. Strategic Assessment – the case for change
2. Indicative Business Case – describes the potential options and a recommended way forward
3. Detailed Business Case – details the approach and costings for the preferred option
4. Implementation Business Case – sets out the contractual arrangements and details the management arrangements for successful delivery.

What are the key areas the DHB has to cover, show and prove at each stage of the business case? The Strategic Assessment currently being worked on describes the current environment and context for the proposed investment, describes the challenges and the need to invest in change and seeks the DHB Board and Ministry of Health approval to prepare an Indicative Business Case.

What form will a public consultation process for the rebuild take, when will it start and begin, and what is the DHB looking to establish through the consultation process? A Stakeholder Engagement Plan will be developed as part of the Indicative Business Case. But it is never too soon to begin thinking about what drivers will influence the way people want to receive health care in the future.

Will the drive for how the decision making process works come from the board level, from public consultation, or will there be a collaborative approach between the two to establishing what the new hospital should look like and what services it should provide?

There is a Site Redevelopment Steering Group who are overseeing this process and report to the Board. A key piece of work for the Indicative Business Case will be the Model of Care design work which will occur in parallel to the site redevelopment. The consumer voice will be extremely important in ensuring the models of care reflect our key drivers of empowering the health and independence of the people of South Canterbury.

Has the DHB identified any key priorities for the rebuild of Timaru Hospital, the main improvements the DHB is looking to incorporate from the current building and model of care? See opening comments - Other priorities include meeting the needs of our ageing population, fostering technological innovation and supporting contemporary models of care.

Could the new facility require more staff than currently, or is it that something that will be established during the process? It's not really a question of whether the bricks and mortar require more staff, but rather the opportunity we now face to look at how we as a community want to receive health care in the future.

NOTE: Questions courtesy of the Timaru Herald.



Employee Assistance Programme

No one can be expected to go through life without needing support every now and then.

It can be difficult to know where to turn, especially when problems arise in the workplace. The SCDHB EAP service provides staff with confidential counselling in times of need, no matter what the issue is.

It does not have to be connected to workplace issues - staff can access EAP counselling for any type of issue. Such issues can include:

- Stress and pressure – personal or work
- Career development
- Health and wellbeing
- Depression and anxiety
- Workplace issues and changes
- Bullying and harassment support
- Anger and conflict issues
- Relationship and family matters
- Grief and loss
- Life transition and personal development
- Budgeting and financial assistance

It is important to feel comfortable with whoever you see for EAP counselling. A counsellor is required to meet

standards of training, ongoing professional development and accountability to ensure they offer a safe, confidential, respectful and effective service.

It's normal to feel somewhat uncomfortable at first while you're getting to know your counsellor. However most people say they feel relieved to have started the process and to be able to talk freely with someone neutral and non-judgemental. If you don't feel you are making progress after the first few sessions talk to your counsellor about this.

Christine Macfarlane

REGISTERED WITH
NZ ASSOCIATION OF COUNSELLOR

To be connected to the EPA simply talk to your friendly HR representative or contact Ross Yarrall on:

✉ email: ryarrall@scdhb.health.nz

☎ phone: 03 687 2388 or extension 8388

Safety 1st tips, tricks and updates

Safety 1st continues to be reviewed and updated from feedback from front line submitters and managers. As it is a regional system we don't always quite get what we want but we have the benefit of using other people's ideas and suggestions to improve the usability of the system.

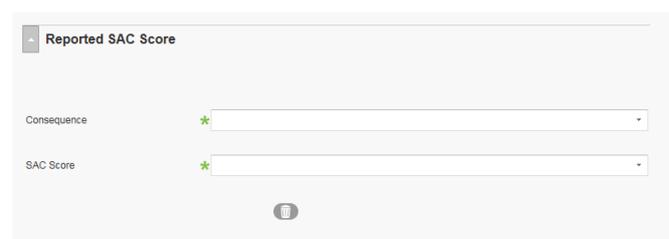
In the last quarter of 2017 the major changes that occurred were:

1. Upgraded employee form. This upgrade significantly shortened the submitters section of the form and added some new features to the managers section to help identify the cause of an event.
2. The feedback module was reviewed and forms updated to better meet the needs of users. There will be more coming out around feedback (compliments and suggestions) in the coming months.

In July 2017 the National Reportable Events policy was reviewed by the Health Quality & Safety Commission (HQSC). Part of this review was the revision of the National SAC scoring tool. The new SAC score matrix will exclude the "Likelihood" field and make it easier for submitters and managers to rate SAC scores based on the event consequence.

Penny Dewar

NURSE COORDINATOR QUALITY & RISK
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The screenshot shows a form titled "Reported SAC Score". It contains two dropdown menus: "Consequence" and "SAC Score". Both dropdown menus have a green asterisk icon to their left, indicating they are required fields. Below the dropdown menus is a small circular icon with a plus sign.

They have also introduced a list of 'always report and review events'. These events are to be reported to HQSC even if there is no harm to the patient. The list includes

- Wrong blood
- Wrong site
- Wrong implant/prosthesis
- Retained foreign object post procedure
- Wrong consumer/patient
- Child/infant abduction or discharge to wrong family/whanau

Currently the Regional system administrators are reviewing all the forms to significantly shorten the specific event types and contributing factors for each form. We do not have a time-frame for this but are hoping it will be in the first half of 2018.

GALA

South Canterbury Health Awards

26 May 2018

SAVE-THE-DATE

Caroline Bay Hall, Timaru

6 pm till late, 26 May 2018

Celebrating Success in Health

The start of the New Year signals the start of planning for the South Canterbury Health Care Awards GALA.

To refresh your memories, the GALA is an opportunity to celebrate the unsung heroes in our health system. There are seven categories and individuals are nominated by their colleagues. The final award is the Chairman's award.

Last year was a sell out with 400 tickets sold!

Chairperson's Award

The Chairperson's Award is one designed to allow us to recognise an extraordinary contribution to our health system taken from all the nominations we received.

WINNER: Margaret Brown, Friend of the Emergency Department

Extra Mile Award

This category highlights that person/group/service that goes above and beyond the norm. They can also be known as the star performer; future leader; the up and comer; or just amazing.

WINNER: Rachel Mills, Charge Nurse Manager - ED

Integration Award

This category highlights the extraordinary results that can be achieved when individuals, teams and organisations work collaboratively with other parts of our system to improve health systems or health outcomes.

WINNER: Christine Horne, Volunteer Ambulance Officer

Efficiency Award

This category showcases efficiency within an organisation or system that creates value in terms of time or money.

WINNER: Wood Street Surgery

Business Culture Award

This category highlights innovations and activities that improve workplace culture. This may be within a team or across an organisation.

WINNER: Michael Parker, Presbyterian Support South Canterbury

Making a Difference Award

This category highlights projects, programmes or ideas that provide benefits to the health of our population; either individually or collectively.

WINNER: Sonya Veale, Physiotherapist

Applied Technology Award

This award acknowledges that through the use of technology (not limited to IT), efficiencies are gained or outcomes improved.

WINNER: Andy Wylie, Registered Nurse

Returning the Learning Award

This category highlights individuals whom are undertaking or have completed additional learning, then go on to return the knowledge benefits to the health system.

WINNER: Peter Doran, Anaesthetist



Oh what a year!

There is nothing better than looking back over the year and realising just how far we have come and what we have achieved.

It is with great pride that I publicly recognise the passion and commitment of the people who make up our South Canterbury DHB.

Thank you for going the extra mile every day to make the most of every moment. From the launch of the first ever South Canterbury Health Care Awards Gala, to the Mental Health Awareness Week family fun day, and all the daily activities in between, you have demonstrated how you care.

From a leadership perspective, the introduction of the Consumer Council and refocus of the Clinical Board provide a great foundation for us into the New Year. We have also established new links with our unions which will see greater partnerships around areas that matter to us all.

This year we have said good bye to hospital level care at Talbot Park, but remain strong in our commitment to provide psycho-geriatric care while alternative services come online. We have also agreed

to change focus from a front of hospital redevelopment to a full service rebuild.

Finally, we have begun our culture reset which is seeing us shift our good intention into a high performing safety culture which encourages all staff to speak up in the moment when they have concern about safety.

We have had a busy year and come a long way. I hope you had a wonderful festive season and are ready to pick up right where we left off in 2017.



Nigel Trainor
CHIEF EXECUTIVE



CONGRADULATIONS: Friend of the Eme, Margaret Brown took away the Chairman's award at the GALA in May.



FIGHTING THE GOOD FIGHT: Jo Hawkey (Radiology) ran the Queenstown Half Marathon for the GRACI foundation to raise money for Gynaecological research. Jo was celebrating making five years after being diagnosed with Stage 4 endometrial cancer in November 2012.



LIFEKEEPER AWARDS: Mental Health Manager Kathryn Robinson and CD Cecilia Smith-Hamel recognise SC Paul Hampton and Christine Macfarlane for their unsung efforts in suicide prevention. Darrell Evans, CNM Alcohol and Other Drug Service, also received the national award.



RMO ROADSHOW: Samuel Fussey and Andrew Riddell were on the road meeting with medical students due to apply for positions at DHBs commencing in November.



FLOWERS OF APPRECIATION: RN Jax Grigsby and Charge Nurse Manager Shelley McLean receive flowers from a patient.



NEW SMOKEFREE TEAM: Koriana Waller at the Waimate Shears helping punters enter a prize draw for 'Smokefree' gear.



MENTAL HEALTH AWARENESS WEEK: Jimmy enjoying the sunshine at the first ever MHAW celebration which provided free activities for families.



HQ&S AWARD: Commission Board deputy chair Shelly Frost presented the unique glass-blown award to Olivia Pearson at the Clinical Board meeting.



CONSUMER COUNCIL: Co-chairs Anne-Marie McRae and Mark Rogers are passionate about raising the voice of the consumer in health here at SCDHB.



SPEAKING UP FOR SAFETY TRAINERS: L-R Phillipa McGregor, Dr Peter Doran, Natasha Hoskins, Mark Page, Charmine Liza, Meron Bowman, Robbie Moginie, Andy Wylie, Dave Moore, Gayle Borman, Dr Juno Pyun, Debbie Hayes.



CELEBRATIONS: Some of the team at NASC getting into the Christmas spirit. L-R Kate Lea, Jane Wagner, Sue Morrow, Renee Parker, Denise Parker, Donna Hendry, Aileen Burns.



CHRISTMAS: Santa made a special visit to the hospital on Christmas day, standing here with Neil Rawlins and Donna Russell-Reihana.



SPREADING CHEER: Over 60 people attended the carols evening at the Hospital Chapel.



ST PATRICK'S DAY: The team at Talbot Park know how to celebrate in style. R-L Anne Mackay, Teresa Ellis, Angela Kerr, Trish Nailor, Chris Robb, Lorraine Rawstorn.



PATIENT SAFETY WEEK The Pharmacy team celebrating patient safety week in November.



DONATION: Funding from St Vianney's Trust enables software upgrade and patient support aid.



CELEBRATING TOGETHER: The Occupational Therapy team sharing morning tea to celebrate OT Week.



APRIL FALLS: The Falls Prevention Working Group ready for April Falls promotion.



TEAM WORK: Heart Foundation working with our cardiac team.



FAMOUS: FED Margaret Brown being filmed for TV1's Good Sorts programme.



HIGH FIVE: The lovely hand hygiene auditors working to keep us safe.



PASS2PUB: Deb Foster, Lyn Blakie, Jacky Jackson, and Natasha van Leeuwen, completed the P2P in March.



RELAY FOR LIFE: In March DPS Sunshine Girls (& Boys) took part in Relay For Life.



GALA: The Mental Health and Addictions service were finalists for the Efficiency award at the South Canterbury Health Care GALA.



FUNDRAISING: Barbara Gilchrist and Chris Eccleston fundraising for the Health Care Awards GALA.

AOTEAROA BIKE CHALLENGE

RIDE A BIKE AND WIN



LOVE TO RIDE



Learning Hub

Inspiring Meaningful Learning

Ka whakamanawatia te akoraka whai tikaka

Orientation - a new way

A new concept for our staff orientation was trialled on Monday 15 January.

As part of the new direction for the Learning Hub, orientation has been reformatted into a speed dating type format, with each presenter having a "station" which is visited by two – three participants at a time.

After 10 minutes (at the sound of a bell), they move on to the next station. Presenters were able to give a brief introduction to their services and provide information about their roles.

Providing new staff with all the relevant orientation information can be tricky in one day; this way was a fun, timely, interactive experience that enables new staff to quickly gain an insight and knowledge into the people, roles and resources that they can access to enable them to fulfil their roles while being actively supported by the DHB to provide a great working experience.

Bronwyn Fleming

LEARNING RESOURCE ADVISOR

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ORIENTATION: Krystal Munro, new grad in Paediatric Ward and Donna Power, Case Manager at Community Mental Health hear from Angie Foster, Infection Prevention and Control Nurse at Orientation.

Presenters included: Quality and Risk, Emergency Planning, Infection Control, Health, Safety & Wellbeing along with Human Resources, Advocacy Service, IT/Learning Hub & Library, Privacy, Fire and Māori Health.

Feedback was overwhelmingly positive both from presenters and attendees and we would like to say a huge thank you to all involved in rolling out our new and improved Orientation session.

2018 NETP and NESP Programme commencement

Thirteen new graduates started their first nursing position with us this January.

This year we have positions in Surgical, ICU/CCU, Operating Theatre, Day Patient Services, Medical ward, Assessment, Treatment and Rehabilitation, Emergency Department, Paediatrics, District Nursing, two primary care positions and one aged care position.

We are really excited to have increased our NETP numbers and in having positions in both primary and aged care. The two NESP graduates commenced their mental health positions on Monday 22 January.

Megan Stark

LEARNING HUB ADVISOR

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WELCOME NETP AND NESP GRADUATES: 1. L-R Nicole McLeod, Karen Lemm, Shelley McLean, Tracey Boyle- Harvey (new graduate), Bethany Bennison (new graduate). 2. L-R Sue More, Jenny Cooper, Abigail Dennison (new graduate), 3. L-R Eilidh McKay-Stewart (new graduate), Teena Brough, Olivia Pearson, Rosie Rogers (new graduate), 4. L-R Belinda Dore, Michelle Turner, Angeline Kemp, Melissa Davis (new graduate).





Learning Hub

Inspiring Meaningful Learning

Ka whakamanawatia te akoraka whai tikaka

National Safe Sleep Day - Te Rā Mokopuna



CELEBRATING SAFE SLEEP DAY: Helping our mothers to keep their babies safe and well are Teresa Back, Katie Forman, Hayley Rowe Jones, Paulette Nunns, Ruth Garvin, Nicki Youngson, Wendy Mitchell, Fiona Hickson; *Back row from left:* Gabby Enright, Lisa Wang.

The aim of National Safe Sleep Day - Te Rā Mokopuna is to raise awareness about Sudden Unexpected Death in Infants (SUDI), with the vision of reducing the rate in which it occurs in our New Zealand families and communities.

SUDI is preventable and the risk factors for our babies can be significantly reduced should the right steps be implemented. Director Māori Health, Ruth Garvin, opened the session with a karakia and then followed a great discussion facilitated by Kate Foreman and Wendy Mitchell, two of SCDHB "Safe Sleep" champions. All health professionals caring for parents are encouraged to do online learning at "change for our children" <http://ww2.changeforourchildren.co.nz/>. The aim is to ensure the same messages are being shared in the hospital and community with the care givers of babies so we can reduce SUDI even further. The main messages from the MOH are:

- making sure that a baby has their own bed for every sleep,
- making sure that a baby is on their back for every sleep,
- having a smokefree home and car,
- breastfeeding babies,
- immunising on time.

Hayley Rowe-Jones

MIDWIFERY EDUCATOR

mideducator@scdhb.health.nz

Maternity Re-Orientation to Theatre Morning Tea

Do you attend births in theatre?

Midwives, Obstetricians, all theatre staff, Anaesthetists, Paediatricians and Nurses from children's ward are all invited to this re-orientation launch morning tea and introduction to changes to roles and responsibilities in theatre.

WHEN: Friday 9 February 2018

WHERE: Education Centre Room 1

TIME: 10.30 am - 11.30 am

RSVP: Hayley Rowe-Jones mideducator@scdhb.health.nz or Jane Procter jprocter@scdhb.health.nz

This is a wonderful interface opportunity to discuss the woman-centred care we are providing.

Professional Development and Recognition (PDRP)

PDRP has had more enquiries over the Christmas Period. For 2018 we already have 36 proposed new applicants and 24 resubmissions due.

We also have the PDRP Champion Staff Training Day to be held Monday 12th February 0900-1600. If your area has a staff member wishing to be a champion please get in touch with me. We

are on our way to meeting our 50% target of nursing staff having PDRP by November 2018.

Tracey Foster

LEARNING HUB ADVISOR

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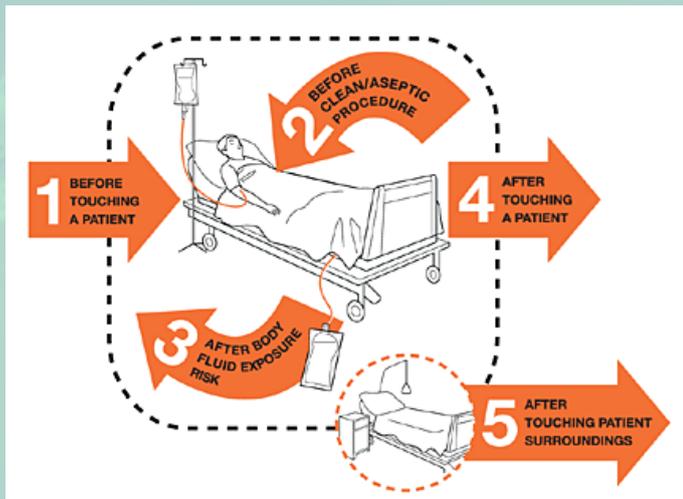


five moments

Here are 5 moments relating to infection prevention and control to consider and discuss with each other.

Hand Hygiene- When we think of hand hygiene, we usually think of cleaning. However, Hand Hygiene NZ recommends that you also moisturise your hands 2-3 times a shift to prevent dry cracked skin. Products work differently for all people, so if the current HH products are not great for your skin let me or your line manager know and we can find what works for you. Most bugs are spread from our hands, so make sure to clean them with a wash or alcohol based rub before and after the 5 moments of hand hygiene (pic below) to protect yourself and patients.

I challenge you to do the healthLearn "5 moments of hand hygiene" module. It's highly recommended! Even better, if you'd like to become a gold hand hygiene auditor, which can really beef up your portfolio, listen out for when the next course will be available- possibly March.



Wipes are in! - You may have noticed most clinical areas have Reynards detergent and detergent/disinfectant wipes available. Staff have been raving about the ease of use and convenience of these hard surface wipes. Remember the green ones (detergent) should be used to clean surfaces between patients. The blue (detergent/disinfectant) should only be used only for cleaning blood and body fluids and potentially infectious surfaces (ie isolation rooms).

Blood Culture Education - Last month Suzanne from BD gave inservices to staff on blood cultures. Great stuff was learnt and we have already seen an improvement in the contamination rates. It's also important to remember to add current clinical information on any specimen form, not just blood cultures. If you missed this inservice, the next one's in 6 months. More info on dates to come from the learning hub. Quick BC guides will be going out to clinical areas soon.

Needlestick Injuries - Many factors contribute to needlestick injuries but the biggies are- recapping, rushing/fatigue, full sharps containers, and sharps not being disposed of properly.

We have seen a slight decrease in actual needlestick injuries and an increase in near misses. This is great because a near miss gives us an opportunity to fix a problem before it happens - keep them coming! Cannula trays are also now in most of the clinical areas, which provide a sharps container at the bedside when cannulating.

FLU Program- Seeking Vaccinators - If you are looking to increase your skills/portfolio and want to help out this year with the staff flu vaccination program, train to become an authorised vaccinator.

Check out the courses available in the link below and apply soon: <http://www.immune.org.nz/health-professionals/education-training>

If you are already an authorised vaccinator and would like to be a part of this very worthwhile staff programme, please contact me asap to get your name on the list.

Angie Foster
INFECTION PREVENTION
AND CONTROL NURSE

Was there a bad strain of flu not covered by the national vaccine in 2017?

This is a popular rumour. There was a higher incidence of an A/H3N2 virus doing the rounds last year and it accounted for a lot of the hospital admissions. This virus strain was covered by our vaccine.

However, it appears the Northern Hemisphere vaccine has not been as effective against A/H3N2 this winter, so it looks like there has been a mismatch there.

You'll note the A/H3N2 strain in the Southern Hemisphere vaccine has been changed for 2018. So, we would expect it to be more effective this year.

We have received the ESR report on vaccine effectiveness for 2017 and it appears the vaccine was similar to previous years in preventing hospital admissions.

We have a growing and ageing population and we're going to see more hospitalisations among that group if A/H3N2 is dominant as that's what's happened in previous seasons.

It wasn't some kind of 'super virus' as some media would have it - it was just doing its regular thing. As we keep saying, influenza is a serious disease.

Moreover, there are a number of other viruses other than influenza, such as RSV and colds, that circulate in winter and people sometimes confuse these with flu as they have some similar symptoms.

- Dr Nikki Turner, IMAC Clinical Director

12 Days of Christmas

Mental Health and Addictions Teams

The challenge this Christmas was how we do we bring people from the different teams to connect together, as well as strengthening the relationships within the team.

A small group of staff came together to brainstorm and bounce ideas off one another and the idea of the 12 Days of Christmas came into being.

Each day there was a clue for a treasure hunt item. Rather than collecting the items the teams or individuals had to take a photo.

At the end of the day the treasure was added to the 12 days of Christmas tree. At the end of the 12 days there was an afternoon tea arranged to celebrate the collaboration and team efforts in working through the challenges.

There were also some other challenges that took place within the 12 Days.

1. A photo booth was set up with plenty of props.
2. A pass the parcel was set up that went across the 12 days. You had to find the person who was revealed under each layer and pass the parcel on. Each layer also gave a small gift.
3. A box of recyclable materials was given to each team to produce a Christmas tree. The teams were able to add to the materials given but the rule was that everything had to be something found in the team areas (and not in current use/recyclable).

4. A box of Roses chocolates was given to each team and the team had to use them to bring something edible to the afternoon tea – there were some very imaginative creations.

“The treasure hunt and challenges gave the opportunity for connection, fun, laughter, creativity, competition and definitely gave us something to talk about at the afternoon tea.”

After the customary speeches that were well received there was a slide show of all the photos that had been sent in and prizes awarded. It was clear from the photos, the laughter and the chatter that the aim of bringing the team together had been successful and there was a definitive buzz of staff coming together during the month of December.

Kathryn Robinson
MENTAL HEALTH
MANAGER

Lisa Crisp
CNM COMMUNITY
MENTAL HEALTH

SELFIE TIME: Staff in the Mental Health and Addictions team having fun with the 12 Days of Christmas challenge. They followed a treasure hunt and took a selfie when they found the answer. At the end of the 12 days there was an afternoon tea and slideshow of all of the photos.





Arowhenua Whanau Services

Nā tō rourou, nā taku rourou ka ora ai te iwi
With your food basket and my food basket the people will thrive

Wendy and Trent, with the mentoring of Donna, have spent the last few months working side by side, preparing soil, planting seeds, nurturing seedlings and plenty of watering. We have watched our garden flourishing with lettuces, bok choy, radish, carrots, courgettes, beans, tomatoes, corn and potatoes. Our kai is given back to the people in our community via a free 'help yourself to what you need' trolley in our waiting room.

Gardening is good for our mental health as it connects us with nature and you become aware of the environment. You are nurturing life when you are growing and caring for your

produce. Then you reap the benefits of being able to eat your healthy produce. It also gives you a sense of achievement; it is a purposeful activity.

Karia te māra, whakatōhia ngā purapura, tiakinā ngā tipu kia hua, kia puāwai kia hua ake anō ko te māhuri e.

Prepare your garden, plant the seeds, nurture and tend to the plants, watch them prosper and flower and enjoy the turning.



GARDENING: Donna Power (RN), Wendy Joy (Support Worker) and Temuka resident Trent Page working in the sunshine out the back of AWS offices.

Kia Ora Tatou
Ko Mt Kyeburn te māunga,
Ko Taieri te awa,
Ko Frazer toku papa,
Ko Lynley toku mama,
Ko Jamie toku tane,
Nō Pleasant Point ahau,
Ko Jessica McDonald toku ingoa,
No reira,
Tena koutou, Tena koutou, Tena koutou katoa



Kia Ora my name is Jessica McDonald, I have just started in the role as Tamariki Ora and Primary Health Nurse. I studied a Bachelor of Nursing at SIT in Invercargill. I then started my new grad year on the Surgical Ward at the Timaru Hospital. Since leaving Southland, my Partner and I now live on the other side of Pleasant Point. I look forward to seeing you all.

TEMUKA WEEKLY SUMMER WALKS

Weekly walks with staff from Arowhenua Whanau Services.

Where: Meet at the skate park, Temuka Domain

When: Every Wednesday

Time: 10.30

AWS Health Clinic Opened 5 December 2017

A huge thank you to Tewera for the fantastic welcome and blessing for the new Clinic Room at Community House, Timaru.

This is a new step for Arowhenua Whanau Services (AWS) to have a new clinic available for all Māori and non-Māori living in the rohe. Situated in the middle of Timaru, opposite bus

stops and close to all amenities it is hoped that it will encourage more to attend for the free services provided by the primary health nurses and also referrals back to

the rest of the team at AWS.

I would like to thank Clinic Leader Lyndsey Hubert for all the fantastic mahi she has been doing to get this clinic up and running with support from the AWS team.

Now open on Tuesdays from 9.00 am – 4.00 pm drop in; you can also phone for an appointment at other times if needed.

03 615 5180 or e-mail **admin@aws.health.nz** or referral form on the website under contact us **www.aws.health.nz**



Mental Health Service

Building needs air conditioning so windows can remain shut for privacy. Others outside windows can hear private conversations. Thanks.

We would like to thank the hospital kitchen for their tasty meals. They are always hot and there is a great choice to be had. Food is much better than we could get at home. We would also like to thank Ward 10 for having fresh fruit available for patients to eat for healthy snacks and supporting us with other foods when we are wanting something to eat.

Ward 10 staff are caring and willing to listen, they are there when you need them and give you space when you don't.

Emergency Department

Your ED dept is working really well which is a credit to your culture and staff. It is such a change from the terrible 70s and 80s that it is like chalk and cheese. Well done Timaru Hospital.

Paediatric Ward

The staff on the paed ward are so lovely! They are kind, caring and supportive. We come in here reasonably often and we appreciate what they do.

Radiology

In the last quarter of 2017 I had two procedures done. One via the MRI machine, and one a colonoscopy. On both occasions I was most impressed with the service. I was well informed, made to feel at ease and all the staff were polite, professional and caring. I can now tell others not to worry too much if they need to go through any procedures. Thank you.

General/Internal

Please could the booking office phone be "manned" (or "womaned") during office hours. Elderly people cannot take in the phone message instructions or press the #3 option. Very frustrating when trying to get through. An efficient answering service would surely result in better organised clinics. The poor booking office staff must be run off their feet.

Choose Wisely

The Council of Medical Colleges (CMC) is encouraging older people to talk to their doctor about whether they could take fewer medicines.

The CMC coordinates the Choosing Wisely campaign, which encourages patients to ask their health professional:

- Do I really need this test or procedure?
- What are the risks?
- Are there simpler, safer options?
- What happens if I don't do anything?

In New Zealand 35 per cent of those aged over 65 are taking five or more long-term medications.

CMC chair Dr Derek Sherwood says it is important older people get their medicines reviewed regularly.

"This helps make sure you are receiving the best treatment. When a doctor or pharmacist reviews your medicines they will check things like what medicines you are taking and why, how many different medicines you are taking and any side effects you may be experiencing."

He says some medicines are more likely to cause side effects in older people.

"Benzodiazepines like diazepam and antipsychotic medicines like clozapine or risperidone are two examples of this. Side effects include feeling dizzy when standing up, feeling sick,

not thinking clearly and having blurred eye sight.

"These side effects can also make the person unsteady on their feet, increase the risk of falling and can affect driving.

"It is important that the benefits of taking such medicines outweigh the risks – that's why it's so important to review your medicines regularly with your doctor."

Dr Sherwood says stopping a medicine can seem daunting, especially if you've been taking it for a long time.

"But for many older people, stopping a particular medicine may actually benefit their health. The more medicines you take, the more likely you are to experience side effects and interactions.

"Many older people successfully stop medicines without feeling worse. In fact, you may feel better and improve your quality of life – especially if your symptoms were being caused by your medicines."

The Choosing Wisely campaign was launched in New Zealand over a year ago. It is led by the Council of Medical Colleges, with partners the Health Quality & Safety Commission and Consumer NZ, and wide sector support.

More isn't always better when it comes to medical tests, treatments and procedures. Unnecessary interventions are stressful and potentially expose patients to harm, leading to more testing to investigate false positives.

save-the-date

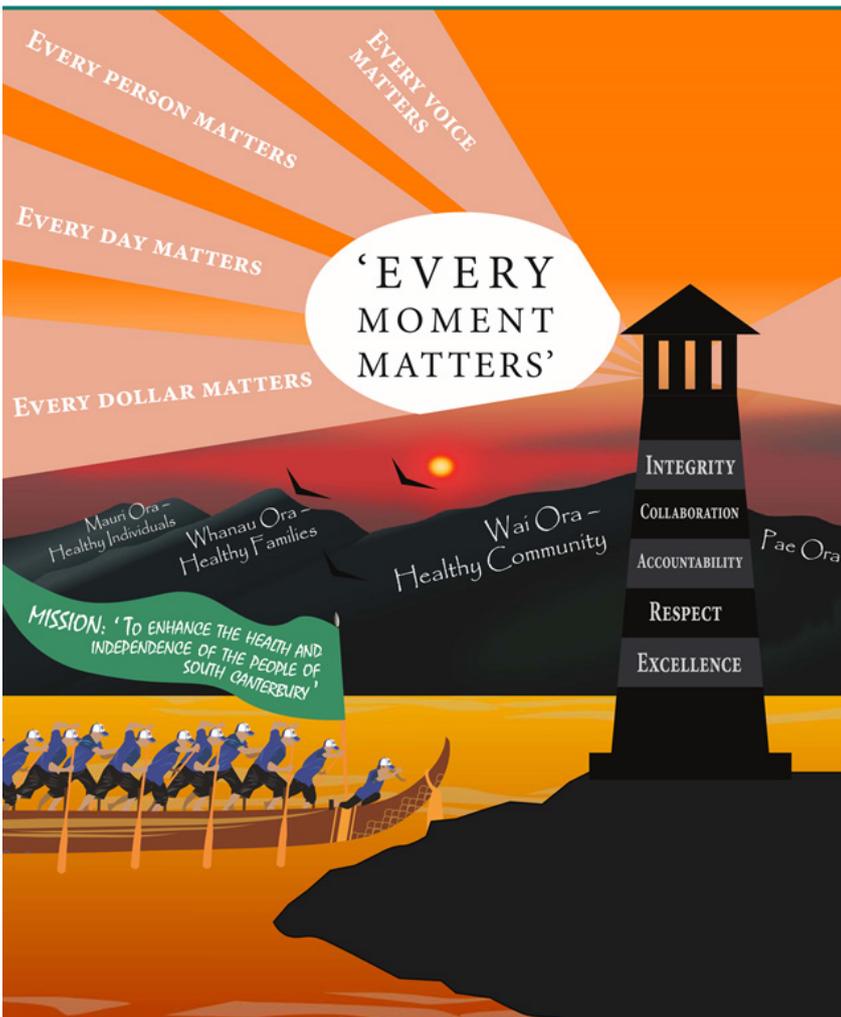
Navigating Our Future launch

Following consultation with staff, leaders and the Board we are ready to launch our strategic direction. Everyone is invited to come along and find out more about our strategic goals and priorities, and how we are preparing to get ahead of the change.

When: Wednesday 21 February

Where: Education Centre Room One

Time: 12.30 pm



come work for us

South Canterbury DHB employs between 950 and 1000 staff at any given time, including part-timers, casuals and contractors. If you know of any colleagues who may be looking for a change of scene, please feel free to pass on our contact details, or if you are contemplating a change of role then please consider the following:

Medical

- **Specialist Physician - Healthy Aging and Rehabilitation** – Full-time
- **General Physician** – Full-time
- **Emergency Physician** – Full-time

Nursing/Midwifery

- **Charge Nurse Manager Medical-Fixed Term** – Full-Time
- **Youth Alcohol and Other Drug Case Manager** – Full-time
- **Care Coordinator - Needs Assessment and Service Coordination** – Full-Time
- **Core Midwife** – Full-Time
- **Midwife - Continuity of Care** – Full-Time

Support

- **Health Care Assistant** – Part-time
- **Clinical Cardiac Physiologist / Technician** – Full-Time
- **Casual Orderly** – Rostered Shifts

contact

Human Resources

Office: 03 687 2230

Address: Private Bag 911, Timaru 7910

Enhancing the health and independence of the people of South Canterbury



pulse...

is a snapshot of activity within the hospital and wider health community. It is sent to South Canterbury DHB staff and providers including GPs, dentists, pharmacies and the health sector.

All written contributions are welcome.

send us your news:

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location: High Street, Timaru
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