CECUPIDIDE CONTRACTOR CONTRACTOR

It's been a huge few weeks for the Māori Health team and I want to acknowledge the work that has been going on.



David Meates, CEO

Former politician Dame Tariana Turia visited Greymouth to speak at the graduation of the West Coast's first Tipu Ora National Certificate in Hauora Māori – 16 graduates involved in health or social services graduated. Our Māori health team was very involved in providing support for this course to happen, and as a result, we now have another 16 people who live on the Coast and have a greater understanding of what it is to be Māori, the challenges and how to empower our Coast Māori to help themselves.

The second major event was the first Takarangi Framework hui, at the Bruce Bay marae, for around 40 Coasters involved in health. General Manager Māori Health Gary Coghlan pushed hard for this cultural competency training to be available on the Coast, and by all accounts, the introductory two days in South Westland were incredibly useful.

I know Gary and the team have had their own challenges, and it's a tribute to their work that they are able to support this increased understanding of health issues for Māori on the West Coast, alongside their regular work.

You'll be aware our staff and the community in Buller have been pulling no punches in reminding us, and the Ministry-appointed Hospital Redevelopment Partnership Group, of the importance of communication and engagement on a local level.

For the past 18 months there has been no engagement about the new Buller Integrated Family Health Centre, and Buller locals are left wondering and filling in the void with speculation about what's really going on.

While our hands have largely been tied, we are now pushing hard for more transparency and engagement, and I hope that we will be able to help deliver this in a proper sense of partnership with the Crown and the community. I know it's something that the West Coast District Health Board feels very strongly about.

Congratulations to Philip Wheble on his appointment as General Manager West Coast DHB. I understand Phil has already led his first staff forum in the new role and I know he has all sorts of plans for empowering everyone to do what they need to in order to improve health outcomes for Coasters.

I want to echo the sentiments shared in this newsletter by Board Chair Jenny Black. Our staff are fantastic – they go out of their way daily to make things better. If you have creative ideas about improving our health system and outcomes, make sure you get in touch with Phil, askphil@wcdhb.health.nz.

Take care.

David Meates CEO

Greening up our new health facilities!

The Kowhai Project is a West Coast collaborative of community organisations and people who are working to create green spaces around the new Grey Health facilities in Greymouth.

Research shows that when patients are able to connect with nature in hospital settings they recover up to 50% faster, requiring less pain relief and earlier discharge.

The Kowhai Project aims to raise funds to plant predominantly native plants around the open spaces of Grey Health, including an inner courtyard.

If you have ideas about fundraising, contact Kowhai Project Chair Elinor Stratford, elinor.stratford@gmail.com,



phone 03 768 6464 or secretary Trish Roney, trishroney55@gmail.com.

If you're interested in donating, visit givealittle.co.nz/kowhaiproject, or donate at Westpac, use the reference Kowhai, account number 03 1700 0303533-03.

MAIA HEALTH FOUNDATION

The funding will be received and receipted by the Maia Health Foundation, which was established to raise funds for enhancement projects in the Canterbury and West Coast health system. Maia provides charitable ways for people to contribute to the health system to take our services from good to great.



Cultural competency taught on Coast

An expectation that people involved with health and social sectors would want training in cultural competency provided the incentive for the West Coast DHB's Māori Health team to push for the first West Coast Tipu Ora National Certificate in Hauora Māori course.

DHB General Manager Māori Health Gary Coghlan says latest figures show around 3900 of the Coast's total population of 33,000 people are Māori and it's increasing.

With that background, and being aware that training in terms of Māori health in the South Island is hard to come by, the private training provider Tipu Ora was convinced to set up the first West Coast course, from which 16 trainees graduated recently.

"Māori morbidity and mortality is still a really big concern, there's a big gap between Māori and the general population. Everyone is trying to do something about that. It's complex and is wider than just a health issue," Mr Coghlan says.

He believed graduates from a variety of West Coast organisations would have a better understanding of what it is like to work with people of other cultures, and would help their work practices become "more mature".

Guests at the recent graduation included former politician Dame Tariana Turia, who has long been involved with the Tipu Ora training provider.

"My main goal is to inspire them to understand what they're really here for. It's not to care to and for people, they're here to inspire people to do things for themselves," she said.

Greymouth woman Jordayn Parkin-Rae (18), was one of the graduates. She undertook the certificate as a precursor to looking at entering the police force or becoming a teacher, after her mother Gemma Parkin did the course last year and recommended it.





"I got a lot more confidence in being able to talk to people, the people skills will be very helpful in my future career, especially how to listen to people," Jordayn says.



Endoscopy Coordinator role set up

In anticipation of a free national bowel screening service being introduced throughout New Zealand, the West Coast District Health Board has set up a new endoscopy coordinator role.

Maria Petrovics-Edens has been working in Barclay ward and day surgery for about 18 years. She's just started in the new role, in anticipation of the rollout of the new service for people aged 60 to 75 years who have no obvious signs of bowel cancer, expected in 2019/2020.

At that stage, the entire endoscopy team will need to be accredited for the service.

Endoscopy entails any procedures looking into the gastro-intestinal region of the body – everything from the oesophagus down to the stomach, (gastroscopy or upper endoscopies); or from the large colon including rectum through to caecum (large bowel) for colonoscopies.

The role is about coordinating the service from referral through to procedures and follow-ups.

Helping to set up the role, Nurse Manager Clinical Services Rosalie Waghorn says it will be a team effort.

"It's about better outcomes for the patients. We'll be making sure surgeons have all the right information to hand. For some patients, they will receive an x-ray or CT scan first to check whether they actually need to have an invasive procedure," Rosalie says.

Maria will offer a one-stop endoscopy shop – starting with phoning patients about their appointments, checking patients have the right information about preparing for their endoscopy procedure, answering questions and organising any tests required.

"New Zealand has one of the highest rates of bowel cancer in the world. If people are diagnosed early, 90% have a long-term chance of survival," Maria says.

Theatre Nurse Manager Wendy Stuart says scientists are still unsure about

what causes bowel cancer: "It might be genetic, an environmental disposition, lifestyle, or just bad luck."

To reduce chances of bowel cancer:

- Eat a healthy diet high in fruit, vegetables and fibre
- Exercise regularly
- Don't smoke.

Symptoms of bowel cancer are:

- A change to your normal pattern of going to the toilet that continues for several weeks, and
- Blood in your bowel motion.

Conditions that might be diagnosed as well as bowel cancer include Crohn's Disease, irritable bowel syndrome, ulcerative colitis and diverticular disease.

"It's best to check with your general practice if you have some of these symptoms. It may or may not be bowel cancer; however you may need to be referred for an x-ray, CT scan or endoscopy procedure in order to



Endoscopy Coordinator Maria Petrovics-Edens

rule it out. I can help with advice and information and navigating the system once we have received a referral from your GP," Maria says.



The Health Quality & Safety Commission was established under the New Zealand Public Health & Disability Amendment Act 2010 to ensure all New Zealanders receive the best health and disability care within our available resources.

PLEASE **CLICK HERE** TO READ THEIR LATEST NEWSLETTER.



South Island Alliance has new GM

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

Bringing an in-depth expertise to the role, Mark Leggett describes his career so far as 'eclectic'. "My background means that I can bring a new perspective to the mix," he says. "We all come to work to make a difference – I want to add value to not only the South Island Alliance, but to the South Island health sector as a whole."

Starting as a Registered Nurse and Midwife, Mark worked his way up to senior executive level and has managed a wide range of health services, for both small and large private and public organisations, commercial and noncommercial. He was the Child and Adolescent Health Service Manager for Taranaki Area Health Board, before moving to Christchurch with his wife – also a Registered Nurse – to pursue a broader range of opportunities in the health sector.

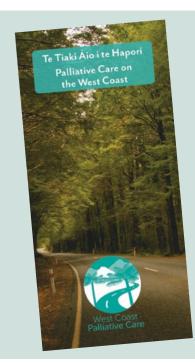
Other management roles include Healthlink South and The Fertility Centre, before becoming General Manager of Medical and Surgical Services for Canterbury DHB, from 2006 to 2009. This role was followed by Vice President of International Services for HHL Group (Healthcare New Zealand) from 2009 till 2016,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

The father of two was most recently Senior Consultant for Francis Health, where he completed a review of the services supported by the Ministry of Health's funding of Living Donor Renal Transplants in New Zealand and participated in the current Perioperative Improvement Programme at Bay of Plenty DHB. Mark says he feels privileged to lead the South Island Alliance Programme Office team. "This is a great opportunity to be part of



South Island Alliance General Manager Mark Leggett

a South Island-wide initiative, working collaboratively with all the DHBs to deliver better health services to all of the South Island. I have seen the significant progress made in the past five years since the Alliance was established, and given my experience, I know many of the various key players in the industry – I couldn't not apply for this role. It provides the chance for me to apply everything I have learnt over the years in a wider context, to help improve health outcomes for the entire South Island population."





Bouquets

Hello,

Because people always write when something to complain about, I like to write, when something is well done!!

I have a weird habit – I always go to a loo (even when not needed) at world famous locations (I say I am going to write a book about it). I have been to the loo at Buck House, Windsor Castle, top of the Eiffel Tower, Sistene Chapel, Great Wall of China, Hawaii... I never use public loos. But the one at your tin shed (RAGP) is THE most amazingly clean one I have ever seen!

So congratulations, the loo looked brand new!

Name withheld.

Palliative Care on the West Coast

Our palliative care team has been slaving over a hot computer to cook up this new brochure outlining what options are available for people requiring palliative care on the West Coast. The brochure will be available through general practices, DHB facilities, pharmacies etc around the Coast.



Mike Dyne and the Health System

By the time he retired recently, mental health nurse Mike Dyne had spent nearly 52 years working in the health system.

Visiting Mike and wife Ellen at their beautifully landscaped Kaniere home is like stepping into the pages of House and Garden. Mike built the house around the time patients from Seaview Hospital were first allowed "out".

"I still remember a young chap incarcerated in the male ward up there. He came to me and asked me could I take him out to work on the house with me on my days off because he knew I was building it.

"Of course after some months that was stopped because it was viewed as exploiting patient labour. When I told him, he started crying. The reality was, he didn't do much, it was about him having a day out."

About 12 years later, that man turned up with his wife and children to offer his thanks for the opportunity Mike had given him.

"That was quite emotional – he thought enough of me to let me know he had survived his time and gone on to have a completely normal life."

"There was another Māori chap, short, squat and immensely powerful – everyone was a bit frightened of him. He used to come and help around the place and sit with our little kids on his knee. No-one ever suggested that I was exploiting him. He was a helluva nice bloke actually."

It's obvious that the people at the heart of Mike's care really matter to him.

He got into nursing after nearly getting killed in a flash flood while working in forestry in South Westland. Ellen was working at Seaview at the time, and suggested he sign up.



Retired mental health nurse Mike Dyne.

Mike became a student nurse, and was able to stay the course with both his career and his relationship. The pressures of the job, along with a strong culture of drinking, meant a lot of marriages did not survive.

"I wasn't interested in all that around drinking. The shift work was tough enough, two days on, one day off. You would do one long day of 12 hours, then a short day of eight hours, then a day off. It meant you couldn't go anywhere, which was tough on families. But gradually that changed to better rosters."

He recalls initially the system's focus was very custodial.

"There was very little in the way of rehab. That was the thinking of the day. It was the tail end of an era, then the winds of change blew, and it was more than just a gentle breeze."



... continued from overleaf

Mike was there when people started to have their own money and their own clothes.

"The best I could liken it to was going to the pictures on a Saturday afternoon, sitting in the dark, and the coming out into the light blinking."

Around the same time, wards went from male and female to integrated, and patients were given curtained off areas.

And staff stopped standing vigilant against walls while every knife, fork and spoon was monitored during patient dinners.

Shortly after that, student nurses started coming through to train in intakes, instead of one person at a time being hired when someone left.

While generally it took years for male staff to get advancement opportunities, Mike had a good mentor in Chief Nurse Shirley Mary Watts who encouraged him to undertake advanced nursing studies.

In the 1980s Mike became a nursing supervisor.

He has particular views on institutional life, and believes closing Seaview was very difficult for patients, who lost their homes and often the only friends they had.

"They had a home and jobs. There are those who would benefit from some sort of sheltered residence. Some of these are the loneliest souls in the world. Every person needs at least 16 support people – an uncle, the bloke up the road you say gidday to, family members. A lot of these people don't have anyone. Society cuts them off because of the stigma. In hospital, they at least had us."

After 25 years up at Seaview, Mike took an opportunity to manage a rest home in Hokitika. He had completed a three year post-graduate diploma in health administration through Massey University while still at Seaview. He spent 12 years working there and then decided to return to work with the DHB.

Things changed three years ago when Mike suffered a heart attack.

"I learned more about the health system then – how wonderful people were."

He describes his quadruple bypass as a "pretty thorough going over".

"It was like someone refiled everything in my head. I had no idea of the severity of the problem. Fortunately, it all came back. What it does to your emotions is amazing."

While he was eventually cleared to return to work, Mike then had a further setback when he broke a wrist and that took some time to sort out.

"When it was finally fixed and I was cleared to go back to work, I decided to hand in my notice. The last of my Seaview contemporaries had gone, most had died."

His advice after most of his life spent working in mental health?

"Make sure you have another life as well!"

For Mike, that has included focusing on life with his wife Ellen who works in Morice Ward, two daughters and a son, grandchildren, fabulous gardens and grounds around their Kaniere house, travel, and several other activities when he was younger.

Now Mike is assistant custodian at the Hokitika Carnegie Building, working parttime for three or four days a week.

"There's up to 70 people through when I'm there. I like to engage and talk to them – people from around the world/all walks of life. It's something to keep busy with."

FREE BLOOD PRESSURE TESTS AND INFORMATION ON STROKES

Come to Mitre 10 Greymouth on Saturday 26 August from 10am – 2pm for a free blood pressure test and information about strokes, and remember, act **FAST**:



Acting **FAST** and calling 111 can significantly increase the chance of recovery.





New gear for medical technicians

The old treadmill has been removed and a new treadmill, ECG machine and CASE PC-based exercise ECG diagnostic system has been installed at Grey Base Hospital.

The new equipment is managed by the hospital's Medical Technicians, who were recently given an introduction to the gear by a team from GE New Zealand and a GE application specialist in diagnostic cardiology from Brisbane.

Medical Technician Garry Chapman says the previous equipment was outdated and the new gear was a more integrated system.

Caption: GE New Zealand education specialist Nicci Stoneman is monitored on the new treadmill by West Coast DHB Medical Technician Garry Chapman and GE field engineer Andy Lloyd.



Stop Smoking service offers flexibility

Being able to be flexible to suit clients' timeframes is proving helpful for Buller folk using the services of Stop Smoking Practitioner Kerri-Ann Rakena.

The Buller woman is employed by Community and Public Health to deliver the Oranga Ha Tai Poutini programme, which provides one to one support and access to nicotine replacement therapy.

For an initial period of eight weeks, and then a four week follow-up, clients are given guidance and support about things that might be helpful to get them to avoid taking a single puff.

The most common reason for people wanting to quit is for their health, and their bank balances.

"It's important for them to take charge, and they need to be ready to quit, but we've had some real success with people," Kerri-Ann says about the programme.

She is quite prepared to explain to people the science behind addiction, if they're interested.



Stop Smoking Practitioner Kerri-Ann Rakena

Most people refer themselves to the service, sometimes after prompting from family and friends.

"The fact that they've taken it upon themselves to come in shows they are wanting to make a change. And I try and work my hours around when a client might have time to see me, to give them the best chance of success."

The programme was introduced about a year ago and is prioritising increased access for Māori, Pacific and pregnant women.

"In time we are looking at setting up group sessions. People are really open to the idea of doing the programme with a buddy, that way they can both support each other and it almost becomes a competition. Whatever works!"

For referrals and more information, please contact 0800 456 121.



FAST survivor thanks nurse

Stroke survivor Errol Richards called in to Grey Base Hospital recently to thank some of the nursing team who helped save his life.

Errol (60) had noticed something wrong with his eyesight, and had a severe eye ache the night before the stroke. The Greymouth man was very lucky when his former partner decided something was a bit amiss when she heard strange sounds, saw his face was drooping and he couldn't move his arms. She recognised the symptoms and called an ambulance.

Errol was raced to hospital and given thrombolysis, a treatment which can potentially dissolve the clot causing the stroke, if the individual arrives at hospital quickly enough.

He was discharged on day seven, after five days of inpatient rehab following thrombolysis on admission. Based on his type of stroke and disabilities on admission pre-thrombolysis, his average length of stay having not received thrombolysis would have been 48 days, Stroke Nurse Specialist Kelly Smith says.

Catching up with registered nurse Diane Pollard, Errol recalls the nurse telling him it was going to be difficult but he would get through.

Dr Greville Wood recently replanted the garden and added hanging baskets outside the Grey Medical Centre, on the weekend before he transferred (along with other staff and patients) from the Rural Academic General Practice. The two general practices were merged in anticipation of working as one in the new Greymouth Integrated Family Health Centre when it opens next year.



Stroke survivor Errol Richards with registered nurse Diane Pollard

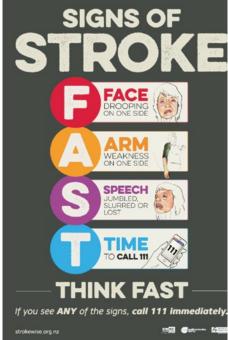
"You're looking fantastic!" Diane told him.

"He's one of my miracle stories."

While Errol has lost a bit of peripheral vision, he has been able to return to work as a welder with Gray Brothers.



"I'm quite happy that things are going all right. I'm probably back to 90% health now."





Chair admires DHB staff

After eight months and thousands of kilometres of travel, West Coast District Health Board Chair Jenny Black is full of admiration for the staff who make the system work.

Jenny lives in Nelson and is an elected board member and chairman of the Nelson Marlborough District Health Board as well as chair of the West Coast board. She agreed to the Government-appointed West Coast position because she could see the usefulness of working with the West Coast and its transalpine partner, the Canterbury DHB and how this could improve the interconnectedness of the South Island DHBs.

Coming in with an open mind about what she would find and want to achieve, Jenny has appreciated the background experience of the existing board members who have been able to provide her with a steer on West Coast matters.

"It's also been a real privilege driving up and down the Coast and meeting some of the people who make the system work. For instance the rural nurse specialists are a treasure in the system. They live and work in remote rural communities where they are valued and a major influence on the health of local people. Their patients feel like they are going to visit a friend, not just a nurse," she says.

Visiting staff in Karamea and Haast has helped Jenny realise how isolated our staff are, and how important it is that they are safe.

"They single-handedly delivering healthcare, often in the middle of the night, without cell phone coverage and so we need to consider their own personal safety."

Jenny's priorities include maintaining momentum in delivering the new facilities in Grey and Buller, to enable the models of care based on helping people to stay well in their own homes and communities. She is keen for the people of the Coast to understand that by putting more resources into the community, care can be delivered earlier and admissions to hospitals/secondary care are kept for those who need it.

Plus staying within the allocated budget.

"What we're trying to achieve on the West Coast is within a very tight funding package. To remain viable, we have to work closely with our neighbours. I'm a pragmatist. Sometimes you have to make difficult decisions to move forward. Leadership is about that – sometimes a compromise, none of which sits easily."

Telemedicine is vital for the Coast, saving huge amounts of patient time and money that would otherwise be spent travelling to appointments.

The Chair would like to attend the West Coast mayoral forum, to partner with other agencies on issues that concern everyone such as broadband and mobile coverage on the Coast.

Getting to know and steer a new board and staff can have its challenges.



West Coast District Health Board Chair Jenny Black

"The board and senior leadership team have been very accommodating. I came in asking a barrage of questions (because I'm a curious sort of person). And they've been very supportive, sharing their thoughts. On the board there are seven elected people who represent their communities. That gives rise to the robust conversations that are needed around a board table. Governance on the West Coast would be poorer without it."





Young Hokitika nurse acknowledged as emerging leader

Hokitika district nurse Jessie Gibbens has won the first West Coast DHB Open for Leadership Award.

Presenting the award in Hokitika this morning, Health Quality & Safety Commission Chief Executive Dr Janice Wilson said the awards recognise, celebrate and share the work of emerging health care leaders who have made a difference to patient care.

Jessie was nominated by her team, who described her consistent leadership skills and behaviour as inspiring both junior and senior staff alike to reflect on their clinical practice.

Her prizes include a trophy, certificate and a free place at a Health Quality & Safety Commission event of her choice.

Jessie said she was honoured to receive the award.

"I want to say a huge thank you to all of my workmates and family who continue to encourage and support me in furthering my practice.

"I really enjoy working in Hokitika with great mentors and the diversity and challenge of district nursing. I'm looking forward to continuing to grow in my nursing career, and bringing new ideas to my community and the DHB."

The Open for Leadership awards are part of the HQSC's ongoing partnership work with health providers to build capability and leadership, and share best practice.

Quality and safety capability and leadership are essential for providing seamless and safe care of consumers/ patients, and the West Coast DHB is committed to this, General Manager West Coast District Health Board Philip Wheble says.



Emerging leader Jessie Gibbens, a Hokitika district nurse, with Director of Nursing Karyn Bousfield, Jessie's dad Gavin and mum Sandra, and HQSC Chief Executive Janice Wilson, and other DHB staff in the background.

New DEXA scanner saves Coasters time and money

The Coast is about to get a new second-hand machine that measures bone density, and may well help improve patient outcomes.

The Dual Energy Xray Absorption (DEXA) scanner will predominantly be used for osteoporosis referrals, Radiology Manager Jason Lister says.

"Past the age of 45/50, people often have lower bone density. What that means is, if you fall, you can break a bone more easily. If you break your hip, particularly over 70, you end up in hospital, then rehabilitation and often aged residential care, so it can affect your independence and ultimately, your quality of life," Jason says.

Using the DEXA scanner to identify lower bone density early means patients can then undertake a range of preventative measures to improve their outcomes.

Previously, patients have had to go to Christchurch for this type of scan. A Christchurch private practice was replacing its scanner, so offered the Coast its older model, still in good condition, but at a much reduced cost compared to a new scanner.

The DEXA machine arrives in August and will be able to be accommodated in the new Grey health facility.



West Coast PHO Contraception & Sexual Health Services available through General Practices and Pharmacies

The West Coast Primary Health Organisation (WCPHO) wishes to advise the community of the contraception and sexual health services that are available through West Coast general practices and community pharmacies.

The WCPHO is also pleased to advise that it has increased the accessibility of its Contraception and Sexual Health Access Programme for young people. The access programme previously offered free contraception and sexual health services for people under 22 years of age. As of the 1 July 2017 this has been extended to under 25 years of age. This programme is open to both enrolled or casual patients who are eligible for funded healthcare services in New Zealand.

For people 25 years and over, the sexual health services available through general practices and incurring the usual practice fees, include:

- Contraception and emergency contraception services
- Sexual health services
- Repeat contraception prescriptions
- Jadelle contraceptive implant insertion or removal* (not available in Reefton)
- Intrauterine device (IUD) insertion or removal* (not available in Reefton)
- Mirena IUD insertion or removal*

 available through Buller Medical, Greymouth Medical, Westland Medical Centres



• Vasectomy services* – available through Buller Medical and Greymouth Medical Centres

For people under 25 years of age the following FREE services are available through general practices and community pharmacies:

- Contraception and emergency contraception services
- Sexual health services
- Repeat contraception prescription
- Jadelle contraceptive implant insertion / or removal with reinsertion* (enrolled patients only) (not available in Reefton)
- IUD insertion*, or removal with reinsertion (enrolled patients only) (not available in Reefton)
- Contraception prescription costs through West Coast community pharmacies
- Emergency contraception pill (ECP) through West Coast community pharmacies

*The ability to provide these services can occasionally vary, as they are subject to the availability of GPs who are able to perform these procedures.

Please contact your general practice for further information about these services, or the West Coast PHO 03 768 6182, www.westcoastpho.org.nz

Fight for Life



Claire Murphy-Klempel recently took one for the team, participating in the Fight for Life to raise funds for the Greymouth Life Education Trust.

As a shy person, she did find the hundreds of people in the audience challenging. While she sported a few bruises, including the odd black eye, Claire says she very much enjoyed the event (she won her bout) and would consider doing it again!

Spotless request

Spotless asks that DHB staff please do not enter the kitchen at Grey Base Hospital opposite the cafe. If you need to speak to our food services contractor, please go to the office.

The Spotless office door is marked to help you out.



CECUpdate West Coast District Health Board -Te Poari Hauora a Rohe o Tai Poutini

First Takarangi Competency Framework hui held at Bruce Bay

The inaugural West Coast Takarangi competency framework hui for senior staff and leaders was held at Bruce Bay's Te Tauraka Waka A Maui marae in late July.

Facilitators Moe Milne, and Wayne Blissett led the hui of 28 people from a mix of organisations including Poutini Waiora, Te Runaka o Makaawhio, Te Runaka o Ngatiwaewae, West Coast DHB, West Coast PHO and Community and Public Health.

General Manager Māori Health Gary Coghlan says the framework objectives are:

- To improve responsiveness to the needs of Māori
- To improve practice
- To increase ability to work with clients and whānau
- Understanding of how to use Māori cultural procedures and processes
- To improve confidence in delivering integrated practice

"For many participants it was their first marae experience and so that added an extra element of authenticity for them to begin their journey towards improving their cultural responsiveness to Māori," he says.

The next phase will be to develop systems and processes that will embed the framework and support those original students as they work their way through the core competencies and build their portfolios.

"We will now undertake a process of review and evaluation with those managers and clinicians who attended to gain their feedback on what support they see as necessary to progress to the next phase. We will begin planning for the second cohort to take place within the next few months. This will likely take place in November and will be either in Hokitika or Greymouth."



General Manager West Coast District Health Board Philip Wheble, General Manager Māori Health Gary Coghlan, West Coast Primary Health Organisation Counsellor Nicki Searle, Māori Health Portfolio Manager Kylie Parkin, and Takarangi Cultural Competency Framework facilitator Moe Milne.



A couple of comments from attendees:

Nicki Searle, PHO Counsellor:

This wananga felt very safe and inclusive of all of us, at all levels of understanding about Māori tikanga and te reo. We were welcomed to the marae and experienced exactly the competencies we were learning about - Powhiri, Karakia, Manaaki, Whakawhanaunga and Te Reo. I hope other staff get the opportunity to enjoy this great training.

CECUPICIDE Vest Coast - District Health Board -District Health Board -Te Poari Hauora a Rohe o Tai Poutini

... continued from overleaf

Tina Murphy, Nurse Practitioner, West Coast DHB: A few good things about Takarangi:

- A forum of a level playing field, all striving for the same end (all levels of professionals from nursing staff to general manager, but all equal, wanting to achieve the same thing from the experience
- A feeling of knowing the cultural aspects more personally instead of just the surface
- The food
- The glorious sunset and sunrise.



Leading a karakia during the Takarangi Cultural Competency Framework hui is DHB General Manager Māori Health Gary Coghlan.



Waiata being sung.





Bouquets

I would like to thank Dr Wendy Miller, who saw our six-year-old son just before Christmas in Greymouth at her paediatric clinic.

Our son has severe speech delay and for years, no one was able to offer an explanation.

I wrote to her in advance and sent her some reports from specialists.

When we arrived for the appointment at Parfitt Ward, she had cleared her diary.

She spent an hour with my son on his 6th birthday. Although she

was examining him the whole time, he loved it. She made it fun and he adored being at the centre of things.

She then told us he has dyspraxia, and ordered genetic tests.

A month later we were called back to see her, and told the tests had picked up a rare chromosome disorder, which causes the dyspraxia.

She also wrote long, detailed letters stating that our son needed assistance. After that, we were able to access occupational therapy with Sarah Haskell, which has been wonderful.

I've since joined a dyspraxia support group, and have noticed the number of people around New Zealand struggling to get a diagnosis. Many complain they cannot get anyone to listen to them.

Dr Miller listened to every word we said. We can't thank her enough.

CEUpdate West - District Health Board Te Poari Hauora a Rohe o Tai Poutini 7 August 2017 =



Bouquets



19 July 2017

The General Manager Grey Base Hospital Westcoast District Health Board GREYMOUTH

Re: HOSPITAL SERVICE

Just a short letter of thanks for the services received during my unexpected stay at Grey Base Hospital. I was admitted on Friday 14th July and discharged on Monday 17th July to enable my return to Christchurch.

I was diagnosed with Pneumonia and placed in Isolation in Morice Ward throughout my stay.

I ask that you please pass my sincere thanks on to all staff concerned with my stay at Hospital. Nurses, Cleaners and Kitchen Staff. They all did and do a wonderful job

I am aware that some patients are not appreciative of some aspects of the care and attention that they receive. and were so friendly at all times. Consultant

Well this is a true and well deserved bouquet to all staff involved in my care. It was sincerely appreciated.

Many Thanks.

Name withheld



