



## A word from Chief Executive David Meates

I would like to acknowledge the on-going assistance and support extended by West Coast DHB staff to Canterbury DHB in the wake of the recent horrific terrorist attack in Christchurch. Your care for and support of Canterbury staff means a great deal to everyone.

Times like this bring home the importance of taking care of yourself and your families/whānau. We encourage you all to look after yourselves, practice self-care, check in with those around you and access the free support services available.

Right now it's a good time for us to connect, share our thoughts and experiences, and help each other process what has happened. Spend time with people you love and talk about how you're feeling. Consider taking a digital detox and take a break from social media. Instead, focus on an activity you love or on the people around you.

It's important to remember that we all cope in different ways. If you are concerned about a colleague, the best thing you can do if your support as a colleague isn't enough, is to let your

manager or leader know so the right support can be arranged.

If you want to talk to a trained counsellor, you can phone or text 1737 to be put through to a counsellor any time of the day or night. This is a free service for everyone.

### West Coast Health System audit

Thank you for all your work over the past few months preparing our West Coast Health System for the recent audit. Every three years, all DHBs are independently audited to ensure that our health care systems meet the necessary practicing standards – it's our warrant of fitness.

The audit team from Technical Advisory Services (TAS) – <https://tas.health.nz/> were impressed with the standard of care, the commitment of our team and a positive environment that was evident to them. They saw improvements across a number of areas since our last audit, which is a real testament to the hard work and commitment by everyone to ensure that we continue to provide the best care to our communities.

There are some areas for improvement, which is helpful because we should always be looking for these as we continue to improve our services to the community. Everyone should be very proud as your combined efforts are reflected in a good audit outcome. Thank you again.

### West Coast health facilities update

The new Grey health facility, Te Nikau Grey Hospital and Health Centre continues to take shape with a number of areas now close to completion. The facility will provide the community with a quality health centre for both primary and secondary care.



David Meates, CEO

The 8500 square metre facility includes 56 inpatient beds, three operating theatres, radiology, laboratory services and an integrated family health centre to provide primary care and outpatient services. Other clinical services include urgent care, a 24/7 emergency department, a critical care unit, paediatric and maternity services as well as planned and acute medical and surgical services and older persons' health including assessment, treatment and rehabilitation services.

Turn to pages 12 and 13 for a photographic update of Te Nikau Grey Hospital and Health Centre.

For Buller, West Coast DHB will shortly begin the next planning phase of the Buller Health facility project. On 19 November, the Minister of Health visited the existing facility in Buller and announced the joint Minister's approval of \$20M for the Buller Health facility. Following this announcement, the project management of the Buller Health facility was transferred back to the West Coast DHB in December.

This process included the transfer of consultant contracts from the Ministry of Health back to the West Coast DHB. The

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**NEED TO TALK?**

**1737**

**free call or text  
any time**



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project consultant design team will be responsible for the ongoing design and delivery of the Buller Health project. The team includes:

- **Warren and Mahoney** – architecture services
- **Calibre Consulting** – structural and civil engineering
- **AECOM** – mechanical and electrical engineering
- **WT Partnership** – quantity surveying

Now that our consultants are on board and as we move from preliminary, to the

developed and detailed design phase, we will be re-engaging with user groups. The purpose of the engagement with our clinical and support service teams will be to progress the detail of the plan and review how clinical spaces will look and interact with each other. The Buller District Mayor, as the council-appointed representative for the design phase, will participate in this process.

The next round of user group engagement is scheduled for early May with the West Coast DHB facilities re-development team and the project architects from Warren and Mahoney.

## Advance Care Planning

How do you want to be cared for at the end of your life?

Dying is something none of us really want to think about, but, when the time comes, having our loved ones and health care teams know about the treatment and care we want near the end of our life is very important.

This is where Advance Care Planning (ACP) comes in – thinking about and sharing our future health care and end-of-life care. It's about identifying what matters to you and making sure it happens.

For those who work in health care, knowing a patient's values and what

is important to them, can make their treatment approach clearer and easier to follow, ensuring we maintain their integrity and mana.

And it's vital in helping people take control of their own health, particularly if they are no longer able to speak for themselves.

To encourage people around the whole of New Zealand to plan for their future health care, a new campaign 'Kia korero/Let's talk' has been launched featuring the personal stories of six New Zealanders at different stages of life and wellness. These stories are available online – [HERE](#).

The campaign is part of the ACP programme managed by the Health Quality & Safety Commission and supported by district health boards.

Friday, 5 April marked Advance Care Planning day which focused on encouraging people to start making an Advance Care Plan. You can do your advance care plan online at [www.myacp.org.nz](http://www.myacp.org.nz). Read on for West Coast local, David Anderson's ACP story.

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

### David Meates

Chief Executive  
West Coast District Health Board



# HealthOne

Shared knowledge - better, safer care

## HealthOne Newsletter 11th edition 2018

To read the newsletter, visit the [South Island Alliance website](#).



## Advance Care Planning – an important part of health care

**David and Penny Anderson recently celebrated 58 years of marriage and although their 60th anniversary is still a couple of years away they have started talking about how to celebrate this momentous milestone.**

They made a commitment to enjoy life to its fullest and to have fun doing it after finding out that David, who has end stage coronary disease along with emphysema, doesn't have a lot of time left due to his illness.

"I had my first heart attack when I was 44 years old and since then I have undergone regular treatment to manage my heart condition which has included having a pacemaker inserted earlier this year. Finding out your condition is terminal is really scary – it's definitely not a nice thing to learn and so we made a decision to live life and to laugh," says David.

"My family has been helping me with my adventures – I have been kayaking around Nelson harbour, opal mining in Australia and been a passenger in a stunt plane. I am hoping that I might even get the opportunity to fly in a Tiger Moth."

For David and his family, the palliative care process has been an eye-opener especially as there have been lots of things to consider. This is where an Advance Care Plan (ACP) comes in, as it provides an opportunity to think about and share your future health care and end-of-life care wishes with your family and clinical team. It's about identifying what matters to you and making sure it happens.

"None of us really think about the end as we can't set a date for it, and until I was given an ACP booklet by a member of my health care team, I had never heard of an ACP – it was a new thing. I had the booklet for several months before Penny and I sat down with our daughter, Shelly and looked at it. It was a really difficult day as not only was it raining; we had leaks and carpenters – our house was like grand central station and in amongst it we were preparing my ACP plan."



David and Penny enjoying time together at home

"Completing an ACP is about deciding on what type of care you would like towards the end of your life, and where you want to be cared for if you can no longer look after or decide for yourself. You indicate what types of treatment you don't want to receive and put an enduring power of attorney in place. It also is an opportunity to share memories – mine are definitely about family and V8 supercars," says David.

Shelly candidly says, "We actually made a plan that I would travel down from Nelson and we would do it together. I didn't realise how emotional I was going to feel until I started the process with my parents. It delves quite deeply into your personal life, thoughts and feelings. Dad was shaking when we were completing it and Mum was at times teary-eyed. I put on a very brave front and acted quite impartial to it all to keep them going but internally it was confronting to be talking about my Dad's final wishes."

"Dad really struggled to accept the 'no resuscitation' part and because that was in the plan it was almost like a barrier to him filling it in. Mum, on the other hand,

kept bringing it up because I think she needed certainty and clarity around what was going to happen when the inevitable happened. So it sat around for a while and was on both of their minds. I heard them mention it a few times before I really clicked that they needed support to fill it in."

"By the time we had finished, there had been some reminiscing and storytelling from my parents, a few laughs and a few tears. Once we got through it I was pleased we had done it but I wouldn't say that it was an easy thing to do. Looking back, I think that I have been privileged to be part of that experience with my parents and wish that my siblings had been a part of it as well because it was significant," says Shelly.

Reflecting on the process, David says that planning for the end of your life evokes a lot of emotion "but in the end, we were pleased we did it and that our family were able to be part of the process. Everyone now knows what my wishes are and we can get on with living. I am definitely looking forward to a surprise flight in a Tiger Moth!"



## Lifestyle changes improve health and wellbeing

**Margaret Manuel decided it was time to focus on her health and wellbeing when she retired three years ago. Margaret made a doctor's appointment for a complete physical only to discover that the results weren't great.**

"As well as sitting in the high risk range for developing diabetes I was diagnosed with chronic obstructive pulmonary disease. These results looked horrible and I really wanted to turn them around," says Margaret.

"Poutini Waiora staff came and visited me at home to talk about what needed to happen. It was clear that I needed to focus on making some good lifestyle changes so I decided to set small achievable goals."

"I started by changing my diet which included introducing more fruit and vegetables and reducing the size of my meals. I have a vegetable garden at home - raw kumara, new carrots - there is nothing quite like eating home-grown food. Better still is using these ingredients in simple easy recipes that don't take ages to make - what a great result," Margaret says.

Margaret's doctor referred her to the West Coast's Primary Health Organisation's 'Melon' programme. Melon is a 16 week personalised digital health programme where participants set their own goals and also get one-on-one support from a personal health coach aimed at helping people make positive lifestyle changes.

"One of the advantages of this programme was contact with my coach didn't need to be in person. I could email, phone or text her when I need support or to talk about a particular issue. This flexibility meant that I didn't need to make appointments in advance or fit appointments around other activities," says Margaret.

"The best thing about my coach was that she never told me I was doing something wrong instead she encouraged me and



Margaret exercising at one of the weekly 'sit and get fit' class held at Poutini Waiora in Greymouth

provided me with useful information and advice. This suited me especially as I work on the principle that if you think something can change then it can and I was determined to make changes."

Since starting Margaret has kept a food diary and is focused on achieving small weight loss goals. She has joined a weekly exercise group called 'sit and be fit' which is attended by kaumātua with disabilities ranging from loss of limbs, diabetes, respiratory issues and arthritis.

Poutini Waiora Whānau Ora Nurse Angela Orr says the 'sit and be fit' exercises are designed to be done in a chair and

are focused on building different muscle group strength. Falls prevention exercises are incorporated into the routine to work on balance and prevent falls.

"At the end of each session, guest speakers join the group for a cuppa and a scone to talk about various health topics. The opportunity to catch up and socialise is not only a great way to learn about healthy living but also gives people a chance to get to know each other," says Angela.

"Since I started making changes I have lost weight and I am no longer in the high risk diabetes range. I have learnt that I need to continue to set goals that suit me. For me, it's important that my goals are achievable, that the right people are around to support me and more importantly that I have fun achieving them," says Margaret.

More information:

**West Coast PHO**

<http://www.westcoastpho.org.nz/>

**Poutini Waiora**

<http://www.poutiniwaiora.co.nz/>



**The latest news from the South Island Programme office is now available online. [CLICK HERE](#)**

## On-the-job training leads to Cardiac Physiology Technician qualification

**Sandra Dymond started working as a Medical Technician in Grey Base Hospital about three and a half years ago. Sandra decided to accept the role even though she didn't have a medical technical background or experience in the health sector.**

"I had been working in hospitality cooking in various kitchens for 25 years when I heard about the job. I decided to apply as I was ready for a career change. What attracted me the most was it was not only a Coast-based job but on-the-job training was provided," says Sandra.

"When I first started I often felt out of my depth especially as there was so much to learn and I wanted to get it right. Luckily, I work with a great team who as well as providing me with training are very supportive."

A typical day for Sandra can include anything from undertaking an electrocardiogram (ECG) or an Exercise Tolerance Test (ETT), applying a plaster cast, assisting in Ear Nose and Throat clinics (ENT) or working with patients who need to use a monitor, for example, a Holter monitor which records ECG heart activity for at least 24 to 48 hours as part of their treatment plan.

"I really enjoy working in an environment where each day is different. The variety of services I can now provide makes for a challenging but rewarding job. Last year, I undertook external studies towards a Certificate in Physiological Measurement as part of my ongoing learning," says Sandra.

"I needed to have at least one year of full-time work experience and be technically capable to be eligible to enrol. I also needed to be very committed to achieving the desired outcome as the course content was extensive. For example, I learnt about respiratory anatomy, non-invasive monitoring,



**Sandra in the Medical Technician team's office where patient assessments are completed**

exercise stress testing, cardiac diseases and ECG techniques."

"Every month I went to Christchurch for four days to undertake clinical experience where I completed ECGs, ETTs and fitted Holter monitors under supervision. At times I found this challenging especially as I was working in different teams that I didn't know well," says Sandra.

"My studies also included workbook assessments every two weeks, preparation for exams and a block-training weekend in Auckland focused on assessing cardiac conditions. Completing this study has been invaluable as it complements the on-the-job training I have received plus I now have a new profession as a Cardiac Physiology Technician."



## What happens when your GP refers you for an ECG?

**An electrocardiograph (ECG) records the electrical activity of your heart. An ECG is done for many reasons:**

- To help find the causes of chest pain, dizziness, shortness of breath or fainting
- To check how your medications are working and their effect on your heart
- If you have a pacemaker, they can check how well the device is working
- As part of a routine check, for example, before an operation.

If you need to have an ECG, your GP will send your referral to the Medical Technician team at Grey Base Hospital. Once we have received it, we will contact you to make an appointment. We are located in the ECG Room, Outpatient Department which is just down the corridor from the Accident & Emergency reception.

An ECG doesn't take long to do, between five to ten minutes and it's a painless process. To perform an ECG, we will ask you to lie down on the bed then we will place electrodes on your



chest, arms and legs which are the best places on your body to record the electrical activity of your heart.

Cables are then connected to the electrodes from the ECG machine. The machine detects the electrical signals (through the electrodes) that start each heartbeat and records them onto paper. This shows us the rate and rhythm your heart is beating.

During the test you must lie still and relaxed as movement will affect the quality of your recording. After the procedure the electrodes are removed and discarded.

We print two copies of your results, one is sent directly to your GP or Medical Centre and the other to a physician at Grey Base Hospital. The physician will view your results and send a report to your GP or Medical Centre.

## Bouquets

### HARI HARI CLINIC

*My 15 year old child contacted whooping cough during a recent outbreak of the virus in South Westland. We were fortunate that Rose from the Hari Hari Clinic handled the situation really well.*

*She went over and above to ensure our family was well cared for as well as spending time educating the local school staff and parents. I would like Rose to receive recognition for all the good work she did to protect our family and others through what was a stressful time.*

### MORICE WARD

*I would like to thank Morice Ward staff for your kindness and care of my elderly father on his recent admission. Your patience and tolerance of the many phone calls to him from his Canterbury based family was appreciated.*

### INTENSIVE CARE UNIT

*Thank you for the care provided to me and also for arranging for the flying doctor service to take me to Christchurch so promptly. Due to the prompt care, I had a stent installed by midday and am now making steady progress towards a full recovery.*



### CATERING MANAGER

*Over the last three years I have spent considerable time in Grey Base Hospital. On each time, I have found the food to be of an extremely high standard both in taste and presentation. The last time I was there I was surprised to find a new style of food being served. What I got I can only describe as magnificent. You and your staff should be very proud of yourselves.*

## Studentship students complete hospital-based work experience

**Each year, West Coast DHB offers 20 scholarships and four studentships to West Coast students who are committed to a career in health. The focus is on encouraging and nurturing relationships with potential future employees.**

Scholarships valued at \$500 are offered to students pursuing undergraduate health related careers at a New Zealand university or polytechnic and are earmarked for expenses like fees, books or software.

Our \$5,000 studentships are available to four students so they can work on the Coast for a five week period and gain valuable experience in a clinical setting. Successful studentship applicants need to be undertaking tertiary education in a clinical speciality that is needed on the Coast.

Our most recent studentship recipients were Devon Kilkelly (nursing), Maggi Johnson (sports science and dietetics), Sophie Monk (nursing) and Michelle Morris (physiotherapy) who spent a busy five weeks at the end of last year working from the Grey Base Hospital.

Devon said that getting to learn about available health services on the Coast and developing an understanding of a rural nurse specialist role was invaluable. This view is shared by the other recipients who reiterated that learning how a hospital runs as well as making connections was rewarding.

"We were able to spend time in areas of individual interest including intensive care, allied health and even in theatre. The staff were amazing! Even when they were really busy they took the time to explain everything so that we could learn from the experience," says Maggie.

During their five weeks on the Coast, they completed a number of projects and activities including:



**Left to right: Studentship students, Michelle Morris, Devon Kilkelly, Maggi Johnson and Sophie Monk with their 'Health Related Studentship' awards**

- designing a slideshow, brochure, poster and word document outlining their vision for the 'Big Brush' to be held on Oral Health Day (Wednesday, 20 March 2019)
- creating an online Social Worker satisfaction survey designed to ask West Coast DHB social workers for feedback on recent changes to service delivery
- developing a community services directory which includes information on available West Coast services for parents and children of parents with addiction or mental illness
- completing emergency trolleys audits
- undertaking various hospital audits including audits on hand hygiene standards, name badges and IDs, early warning scores, fluid balance charts, falls prevention and privacy
- creating quizzes to test Coast health professionals on their knowledge of various policies such as falls prevention, restraint minimisation and safe practice and patient consent in time for the West Coast DHB's biannual certification audit in February
- promoting the 'Big Shout Out' to staff at Reefton Health, Buller Health and the Grey Base Hospital.

"Undertaking the studentship provided me with a great learning environment and opened my eyes to the wide range of career pathways available to me as a nurse. Working in a rural environment means that nursing roles offer flexibility and provide a greater opportunity to expand your skill set. You don't just focus on one specific area of health



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which is often the case in city hospitals," says Sophie.

As a mature-aged student, Michelle was pleasantly surprised to receive a studentship which provided her with a paid learning experience and a chance to spend time with her Coast-based family.

"To anyone considering applying for a studentship, it is a really good way to learn how the DHB operates across the Coast and provides a chance to consider potential employment pathways. After completing my clinical placement I plan to return to the Coast to work," says Michelle.

If you are interested in applying for one of our scholarships or studentships application forms for this year's round will be available on our website mid-year – <https://www.wcdhb.health.nz/>



Left to right: Studentship students, Devon Kilkelly, Maggi Johnson and Sophie Monk undertaking an emergency trolley audit

## West Coast DHB introduces Patientrack across the Coast

**West Coast District Health Board (West Coast DHB) has started implementing Patientrack, a new digital patient observation and alert response system, aimed at helping clinicians identify deteriorating patients earlier. This system will enable clinicians to apply clinical judgement and to take appropriate, potentially life-saving action sooner.**

Patientrack introduced in mid-February is designed to capture patient observations electronically and make them available to a patient's care team anywhere they have access to the network.

Quality and Patient Safety Manager, Rosalie Waghorn, said Patientrack records a patient's vital signs to calculate the early warning score (EWS) which is used to predict the risk of deterioration for the patient and acts as a prompt to clinicians to provide follow-up treatment if the results are abnormal.

"Patientrack will eventually record all patient observations that are currently handwritten on charts across the West Coast health care



Registered Nurse Alana Crook using Patientrack to record patient information

system. Replacing paper-based charts with a comprehensive suite of electronic automated assessment

and communications tools will reduce errors and improve work flow, allowing clinicians to dedicate more quality time to our patients," says Rosalie.

Patientrack, which originates from the UK, is used in a number of New Zealand hospitals including Christchurch, Hillmorton and Burwood hospitals.

It has been rolled out in Foote Ward (Buller) and in Grey Base Hospital's Manaakitanga (Mental Health inpatient unit) and Medical Surgery services and will eventually be introduced to other services across the Coast.

For further information please visit [www.patientrack.com](http://www.patientrack.com) or follow @Patientrack on Twitter.

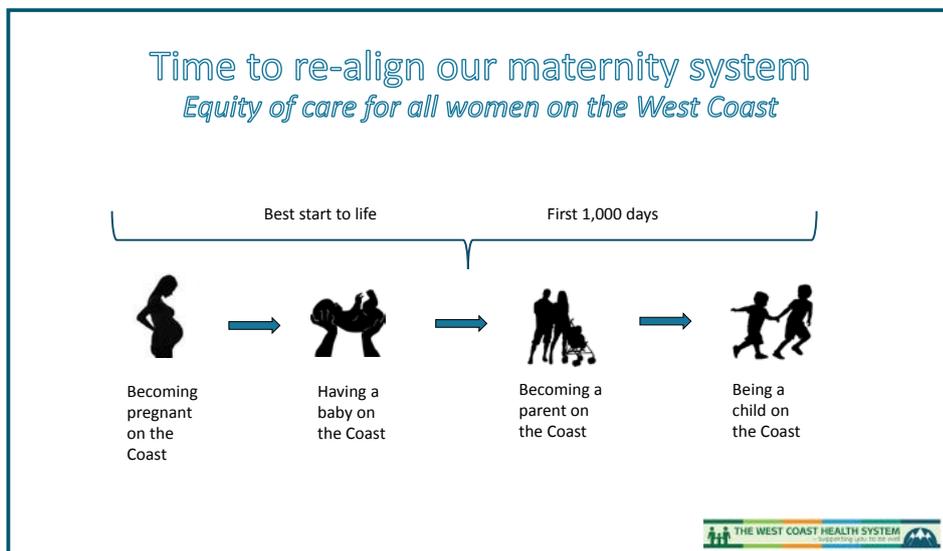


## Maternity Hui - 22 February 2019

West Coast DHB recently hosted a maternity hui focused on long-term planning for high quality and sustainable maternity services across the Coast. The day brought together clinicians from across the health sector, social support sector, education sector, iwi, consumers and whānau.

The hui provided an opportunity to discuss a number of questions including:

- What type of support is available for people planning for pregnancy?
- What ante-natal care is available?
- What birthing options are available?
- What happens after maternity service care ends?



The outcomes from the day will form an integral part in the development of a West Coast Maternity Strategy. The key components of the strategy will focus on the challenges of providing maternity services across the West Coast, the rural

nature of the workforce and the need to ensure equitable service delivery.

Consumer stories were an important aspect of the day. Read on for Annie's and Becky's stories.

## ANNIE WELLS' STORY

**Annie Wells has two beautiful children – four year old Hadlei and four month old Zeke – who mean the world to her.**

However, there was a time when she didn't feel strongly connected to her eldest child and it wasn't until after she was diagnosed with post-natal depression that this changed.

Here is Annie's story in her own words:

*"I loved my daughter but I didn't want her – she didn't sleep and regularly had*

*colic. The house felt like I was in a dark cloud and that there was no way out. As women, we are meant to be able to care for our children – to know what to do even when we don't. No one ever talked about post-natal depression and I didn't realise that I could ask for help.*

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Hadlei (four years) feeding Zeke (four months)



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*My birthing experience hadn't been great which added to my stress. When I went into labour with Hadlei, I ended up being looked after by a midwife I didn't know as my midwife was away. For me, it's really important to have a good relationship with your midwife especially as you are very vulnerable during labour. We had a birth plan but I learnt that this doesn't necessarily go to plan – my labour went over three days before I had a C-section. It would have been great to have been given a realistic idea of what to expect and to understand what could go wrong beforehand. As it was, I became very anxious as I don't like being touched by strangers and at one point, there were lots of people in the birthing suite who I didn't know. I could hear them talking about me – but no one spoke to either my mother or I directly. It would have been really good if someone had translated the medical jargon for us.*

*Breastfeeding wasn't something I found easy and eventually I ended up using formula which also had its complications. Having an information sheet on formula, for example, best type of formula for different stages of development, feeding quantities and types of bottles to use would have been really useful. I think I would have benefited from attending a parenting course but only learnt about Plunket New Zealand's Pregnancy and Parenting programme after Hadlei was born.*

*Hadlei was three and a half months old when I was diagnosed with post-natal depression. I went to my doctor as I didn't like how I was feeling especially as I didn't think I could look after my baby safely. My doctor referred me to the local mental health services who arranged for someone to visit me at home. I cleaned the house and presented myself nice and tidily for this visit as I thought that my baby would be taken from me if I didn't.*

*I eventually got the support I needed which included being hospitalised in the Mothers and Babies unit at The Princess Margaret Hospital in Christchurch for six weeks. While I was there I saw a psychologist and received help with Hadlei focused on feeding, sleeping and bonding. I was also encouraged to go for a walk each day which is something I continue to do along with seeing a psychiatrist and taking anti-depressant medication.*

*It was a relief to learn that what was happening to me was because I had post-natal depression and even though at times I felt isolated and alone there was support out there. I have learnt that it's important to be honest even when this feels difficult. My experience has meant that I have been able to support a friend in a similar position.*

*My advice is that if you are concerned about a friend's mental health just ask them directly – don't beat about the bush!"*

## BECKY PUGH'S STORY

**For Becky Pugh and her partner, Stephen, finding out they were expecting their first child was the best possible news.**

They had been trying to fall pregnant for some time but due to Becky having polycystic ovary syndrome (PCOS), a medical condition which can make it difficult to conceive, it took them longer than expected.

Becky says:

*"We went to a couple of gynaecologists before I found one that I really liked, she was excellent! She provided us with the support and information we needed to understand what our options were. As it was we ended up conceiving naturally.*



**George attending the maternity hui with his mum, Becky**

*When I found out I was pregnant I wasn't sure how to go about finding a midwife. It wasn't until a friend told me about the [find your midwife](#) website that I learnt that a referral from my doctor wasn't necessary. Using this website I found a midwife who I liked. She was brilliant and I was comfortable asking her lots of questions.*

*I had an easy pregnancy which meant I was able to enjoy being pregnant. I attended [Plunket New Zealand](#) education sessions where I learnt about being pregnant, about the birthing process, including what the body goes through and about life with a newborn baby. Best of all was meeting other mums. We formed a Facebook page which we use to share stories and to arrange catch-ups over coffee.*

*There was plenty of opportunity to ask questions. These were either answered at the time or if the facilitator didn't know the answer she would seek it out and provide it to us at a later date. More information about breastfeeding, like how hard it can be to get your baby to breastfeed, and tips around how to manage this, would have been invaluable.*

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Stephen and I are share-milkers on a dairy farm and I was hand-feeding calves right up until the day George was born. George's birth was pretty quick. I woke early with contractions which became regular by 10am. I was admitted to hospital at 2pm where I started off in the birthing pool with plans to get out part way through.

George had other ideas, he was born in the water around 6pm without pain relief and two weeks earlier than his due date.

With George's arrival I found myself feeling 'bombarded' with information about breastfeeding. I think that if I hadn't been able to breastfeed I would have found it really hard. I was eventually able to establish a feeding routine but not until I had been given a number of different opinions by hospital nursing staff about the best method.

Once we went home it was brilliant having my midwife come to visit during the first six weeks. She provided breastfeeding support, answered questions and weighed George. If I needed extra support over and above her planned visits she was readily available. Before my last midwife appointment we had a home visit from the Plunket nurse which meant that my support was not interrupted. I was especially lucky as my mum took seven weeks off work to help us out at home. We were really spoilt!"



West Coast District Health Board representatives accept the \$40,000 cheque kindly donated by Greymouth Countdown staff

## Greymouth Countdown donates to Grey Base Hospital paediatric and maternity wards

**Nationally, the 2018 Countdown Kids Hospital Appeal raised \$1.2 million for much-needed items such as medical equipment or upgrading of patient facilities. All Countdown stores get involved in the annual appeal, with the Greymouth Countdown staff raising \$40,000 for Grey Base Hospital paediatric and maternity wards.**

The money will be used to purchase a jaundice meter, an emergency cart and other essential equipment.

Countdown's Kids Hospital Appeal first launched in 2007 has raised a total of \$12.8 million for sick New

Zealand children and young people. For Grey Base Hospital, the donations received are greatly welcomed as they help purchase equipment used to provide care to Coast children.



### E-UPDATE

Your fortnightly update from the Health Quality & Safety Commission



**In the latest issue of the Health Quality & Safety Commission's E-digest you can read about Keri Kaa's advance care plan story; the Commission's acknowledgement of the skills and dedication of health professionals responding to terror attack; the new national maternity early warning system's aim to reduce maternal morbidity and recommended evidence-based resources for reducing harm from falls.**

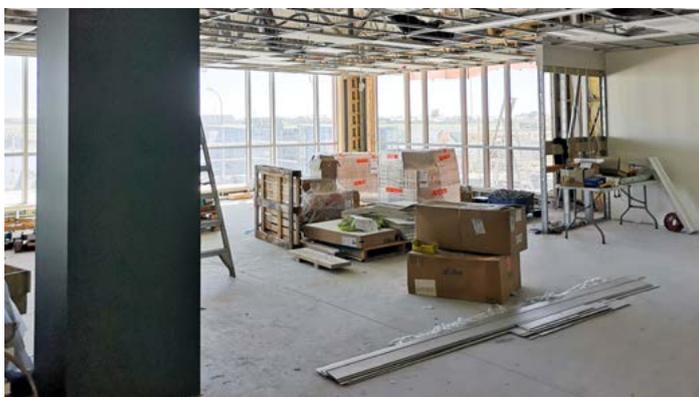
READ MORE [HERE](#).



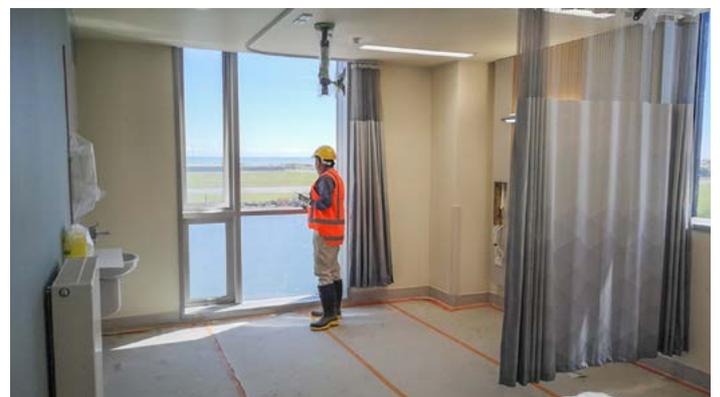
## Photographic update of Te Nikau Grey Hospital and Health Centre



Outside view



Medical records



Room with a view

# CEUpdate

9 April 2019



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

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Window onto staff station from bedroom



Transfusion room



Staff station in general surgery



Double bedroom showing night-lights



Staff station in general surgery



Kitchen in palliative care room



9 April 2019

## New operating table delivered to Grey Base Hospital surgical ward

Nurse Manager – Perioperative Services, Theatre Wendy Stuart says that when our staff are working in an operating theatre with several specialities, it's much easier for everyone if all their equipment is similar.

Key features of the new table include:

- A thicker more comfortable mattress for patients which is especially important if they are having a lengthy operation
- It goes lower to the ground making it is easier for shorter patients to climb onto
- It has a greater weight limit of 250kgs compared to the older tables which only held up to 150kgs.

“With good planning and maintenance we will be able to use our new table for at least 15 years,” says Wendy.



Left to right: Senior Registered Nurse Bridget Secker, Anaesthetic Technician Jack Toulson and Senior Enrolled Nurse Margie McConnaughie checking out the new operating table



**Activity & Nutrition Aotearoa**  
Kia Hono, Kia Tipu  
*Connecting people and knowledge*

**Activity & Nutrition Aotearoa – eUpdates**

[CLICK HERE](#) to sign up to the ANA newsletter.

## 2018 Quality Accounts “Focus on People” available online

“Focus on People”, our 2018 Quality Accounts publication, is now available online. This publication provides a snapshot of the quality initiatives undertaken across the Coast to improve the health outcomes of our community. The publication can be viewed online via our website and ISSUU:

West Coast DHB document library  
[2018 Quality Accounts](#)  
ISSUU  
[ISSUU 2018 Quality Accounts](#)





## National Safe Sleep Day – Te Rā Mokopuna

**Last December, Grey Base Hospital midwifery staff set up a display outside McBrearty Ward to promote National Safe Sleep Day - Te Rā Mokopuna.**

The aim of the day is to raise awareness about Sudden Unexpected Death in Infants (SUDI), with a focus on 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. Key messages are:

- Face up, put to sleep on back
- Face Clear
- Smoke Free
- Own space, carer near.

More information is available online – <http://sudinationalcoordination.co.nz/>

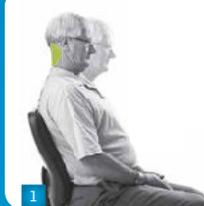
### Stretches for the office

- Your body is designed to move. Holding static postures can lead to unnecessary build up of tension.
- **At least hourly (every 15 minutes is ideal): STOP, DROP and SHAKE.** Relax your neck and shoulders; drop your arms to restore normal circulation.
- Before you start your shift follow the stretches, then regularly stop and stretch throughout your day.
- Stretches should be performed on both sides.
- Take a movement to the point of stretch and hold for 10-15 seconds.
- The green glow on the photos gives an indication of where you should feel each exercise, however this will vary from person to person.
- Should you feel pain or unexpected tension do not continue that stretch. Consult your health professional.

For more information visit [www.habitatwork.co.nz](http://www.habitatwork.co.nz)



CHIN TUCK



- Sit tall.
- Tuck chin in (keep eyes level and relax shoulders).

NECK SIDE BEND



- Tuck chin in, look straight ahead and take ear to shoulder.
- Push opposite shoulder to the floor.

NECK ROTATIONS



- Tuck chin in, slowly turn head to look over shoulder.

SHOULDER SHRUGS



- Raise shoulders up towards ears.
- Push shoulders down, reaching fingers towards the floor.

TRUNK STRETCH



- Stand or sit, reach up, clasp wrist.
- Breathe in, as you breathe out lean sideways towards the bent arm.

CHEST STRETCH



- Interlink hands behind back.
- Draw shoulder blades down and back.
- Shift hands away from the body to stretch the chest.

BACK EXTENSION



- Sit tall, clasp hands above head.
- Stretch palms up to the ceiling and lean back into chair.

TRUNK ROTATION



- Sit tall on the edge of the chair and cross one leg over the other.
- Turn chest towards crossed leg using arms for leverage.

HAND SHAKE



- Drop arms to your side.
- Relax neck and shoulders, shake hands.

FRONT OF FOREARM STRETCH



- Relax shoulders, elbow bent, bend wrist, keep palm facing up.
- Hold hand and gently straighten elbow stretching fingers back and down.

BACK OF FOREARM STRETCH



- Relax shoulders, drop arm to side with wrist bent.
- Take arm back behind you keeping your arm straight.





## Chrysantha Pereira

### Clinical Nurse Manager Emergency Department

#### What does your job involve?

My job involves managing the Emergency Department and Outpatients Department, making sure they are functioning smoothly and resolving any issues that may hinder this. It involves liaising with other departments, making sure our patients and staff members are safe in everything we do and delivering a safe service according to evidenced based, best practice.

#### Why do you choose to work in this field?

I have always enjoyed working with people. As a nurse, I know that by taking care of my patients, I am contributing to their lives, at their most vulnerable times when they are unwell and providing assurance or health information to patients, when they are well. Knowing that I have made some difference, in their lives, makes me want to do this job everyday, be a nurse everyday.

#### What do you love about what you do?

Everything, the countless interactions I have with people day in and day out, patients, my peers and my team members.



#### What are the challenging bits?

As we are all different, I sometimes find difficult personalities, a little challenging. Although, I have come to learn, that there is nothing communication can't resolve.

#### Who inspires you?

At work- my team members in ED and OPD, they are very supportive.

#### What was the last book you read and/or movie you saw?

Last book – *A Thousand Splendid Suns*.

Last movie – *Roma*.

#### If you could be anywhere in the world, where would you be?

Home. Anywhere the family is! Or Kaiteiteri – that place is breathtaking.

#### What's your ultimate Sunday?

Sleeping in, having a lovely coconut chicken curry for lunch, watching a movie and then an afternoon siesta.

#### Favourite food?

I love cooking and eating as you can tell! My absolutely favourite food is a lentil soup/ dhal with rice and a piece of semolina coated fried fish.

#### Favourite music?

I listen to a variety of music, but my all time favourite song is the *Rain Song* by Led Zeppelin.

#### Ever won an award or medal?

Only prizes, never a medal.

If you would like to take part in this column or would like to nominate someone please contact [global@westcoastdhb.health.nz](mailto:global@westcoastdhb.health.nz).



The latest edition of the eCALD newsletter focuses on effective models for mental health care for refugees. Also included are articles on the Ministry of Health's resources with 1737 assist for those in mental distress as a result of the traumatic event in Christchurch; electroconvulsive therapy treatment (ECT) with a Chinese case presentation plus exploring metropolitan super-diversity through data visualisation.

[CLICK HERE](#) to read more.



## Choosing Wisely NZ Forum

# 2019

## CONTINUING THE CONVERSATION

Choosing Wisely supports reducing unnecessary tests, treatments and procedures in health care. This forum is an exciting opportunity for health professionals to learn more about how to develop and extend their Choosing Wisely work, and to hear from consumers.

**TIME: 9AM - 5PM**  
**DATE: MAY 10TH**

TE WHAREWAKA, WELLINGTON

**REGISTER NOW AT**  
**[WWW.CHOOSINGWISELY.CO.NZ](http://WWW.CHOOSINGWISELY.CO.NZ)**



A COUNCIL OF MEDICAL COLLEGES  
IN NEW ZEALAND CAMPAIGN  
and part of Choosing Wisely work internationally

### GUEST SPEAKERS



Dr Robyn Lindner



Associate Professor  
Sue Crengle



Professor Tammy  
Hoffman