



Warm West Coast welcome greatly appreciated

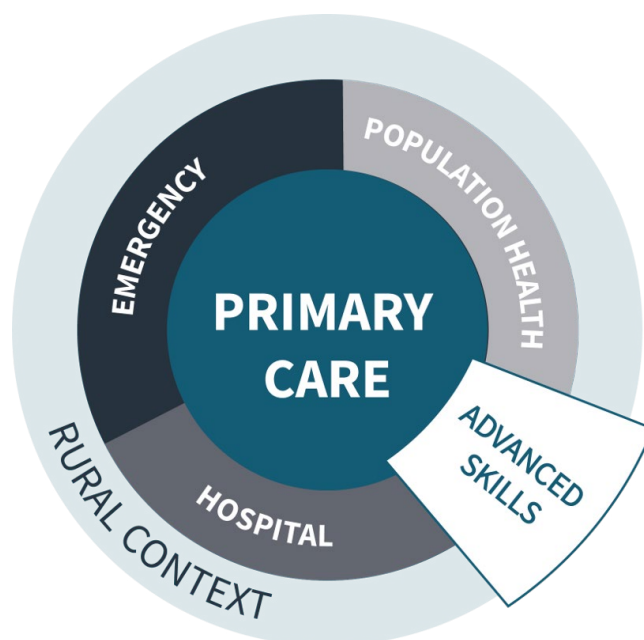
Thank you for your warm welcome to the West Coast DHB. I look forward to continuing to connect with staff and health system partners over the coming weeks. Thank you for all the work you do every day to support the Coast community.

I feel really privileged to be entrusted with the responsibility that comes with this role and will do my best to support and enable staff, and to nurture relationships across the health system. We have a lot of work to do to close the equity gaps, to strengthen access for the more vulnerable in our community, and to ensure we continue to work in an integrated way with primary and community care and all the health care providers who make up the West Coast Health System.

It's been fantastic to catch-up on the progress made towards the implementation of a Rural Generalist (RG) model – one that will ensure we utilise the workforces we have as well as help us achieve a sustainable, integrated health care system.

Information about what Rural Generalism looks like on the Coast; the benefits of this model and how we plan to continue to implement this workforce change is available on our dedicated [Rural Generalism intranet page](#). I encourage everyone to take the time to read this information.

I want to acknowledge everyone's efforts to accommodate the recent changes to the COVID-19 Alert Levels at short notice. The seamless transition between the levels is a real



testament to the hard work and tireless efforts made across the health system to ensure that we continue to keep our staff, patients and communities safe.

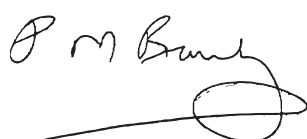
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An important step to keep COVID-19 out of New Zealand is the rollout of the COVID-19 vaccination. The West Coast DHB's COVID-19 Vaccine Readiness team is currently ensuring that we have all the necessary systems and processes in place for when the vaccine becomes available on the Coast.

In the meantime, we are making plans for our annual seasonal influenza immunisation vaccination campaign (for staff and the West Coast community) as well as increasing our coverage of the MMR (measles, mumps, rubella) catch-up campaign. In 2019 we had a significant measles outbreak and this catch-up campaign is targeting 15-30 year olds who may have missed having their MMR immunisations.

Ngā mihi nui



Peter Bramley, CE
West Coast District Health Board

Vaccination is the proven and safest way to protect populations from communicable diseases. I encourage you all to roll up your sleeves and get vaccinated when you have the chance. You'll be doing it to protect yourself, your whānau and friends – and, for clinical staff, your patients.

If you or any of your whānau or friends are concerned about immunisation, knowing the facts can help you feel more confident about getting immunised. You can always find accurate and timely information on the Immunisation Advisory Centre website – www.immune.org.nz and on the Ministry of Health website – www.health.govt.nz or on the Unite Against COVID-19 website – www.covid19.govt.nz.

The official social media channels are also updated frequently – follow [Unite Against COVID-19](#), the [NZ Ministry of Health](#) and [West Coast DHB](#) on Facebook.

If you have a story idea or want to provide feedback on *CE Update* we would love to hear from you! Please email us at wcdhbcomms@wcdhb.health.nz. If you're not a staff member and you want to subscribe to receive this newsletter please [subscribe here](#).

Diabetes Patient Management System implemented across the five South Island DHBs

The five South Island DHBs have implemented a management database as part of a quality improvement project for children with Type 1 diabetes. Supported by the South Island Alliance Child Health Service Level Alliance, the Diabetes Patient Management System (DPMS) collects patient data and provides benchmarking for Australasian quality improvement reporting.

Dr Martin de Bock, Paediatric Endocrinologist for Canterbury DHB and West Coast DHB, says the system also helps with collecting data for workforce planning. "This is really important as we think about our diabetes services and what we're likely to see in the future, so that we can plan for it appropriately. Without the data, you can't measure that. So, this is an easy, designed-for-purpose model that allows us to carry out that forecasting."

With a five-year national roll-out plan, the long-term goal is to ensure equitable care for all New Zealanders with type 1 diabetes, he says. "Wherever you live in the country, we want to make sure you can access timely, equitable care and still get the outcomes and support you deserve, no matter which DHB you belong to."

Ben Wheeler, Chair of the paediatric type 1 diabetes working group, says benchmarking allows both staff and patients at each DHB to advocate for areas where there may be needed. "After asthma, type 1 diabetes is the most common chronic illness in childhood, so it's an important illness to focus on, as most units haven't had a diabetes database that has allowed the opportunity for benchmarking before. This will allow us to see how we're doing, celebrate any successes, and begin standardising activities across DHBs, so that we're all working towards the same goal – we're really pleased with the progress we've made so far."

Stephanie Read, Child Health Regional Programme Facilitator, South Island Alliance, says it took a dedicated working group, support from each of the South Island DHB IT teams and engagement from all the clinicians involved to get the database up and running in each DHB. "Ultimately, this will support the provision of consistent services to children with type one diabetes and their families across the South Island."

Measles catch-up campaign underway

If you haven't already, you're likely to 'spot' a lot more promotion of West Coast's measles catch-up programme, especially if you're in the target group.

Part of a national immunisation programme, the campaign aims to reach 15 to 30 year olds because they are more likely to have missed their childhood MMR (measles, mumps, rubella) immunisation. This means they're more at risk of catching and spreading measles. This group is urged to get immunised now to ensure our community is protected against future measles outbreaks.

Only recently, in 2019, there was a measles outbreak in New Zealand. More than 2,000 people got sick and more than 700 of them were hospitalised. Māori and Pasifika peoples were particularly affected.

Even with this number of cases we didn't need to go to Alert Level 3 or 4 to stop the spread of measles the way we have done for COVID-19. That's because most people have been immunised against measles. But the 2019 outbreak showed that a lot of New Zealanders between the ages of 15 and 30 hadn't been fully immunised. Now is the time to fix that.

There are about 1,800 Coasters in this age group whose MMR immunisation status is not known so it's a significant number of people to try and reach. You can help promote the measles immunisation programme by talking about it at your school or sports clubs, church group or iwi, or on social media. Help spread the word!

Where to go for your MMR

Getting the measles jab is completely free and can be done by General Practice teams, participating pharmacies, authorised workplace vaccinators and at dedicated community clinics. Here at the DHB, you can get your MMR as part of our general staff vaccination clinics.

Help promote the measles catch-up campaign

Share the below material to help promote the campaign:

- › [Be a Guardian of the Future poster](#)
- › [Protect the West Coast against measles Facebook cover pic](#)
- › [Protect against measles fact sheet – in English](#) (also available in several other [languages](#))
- › [Be a Guardian of the Future email signature](#)

If you'd like to find out what other resources are available, please email [West Coast DHB Comms](#).



Your conversations at home, work and play will be supported by a multi-channel national advertising campaign, including television ads, as well as local and regional promotion featuring print ads, street posters, radio ads and social media messages to ensure our target groups know where to go for their MMR immunisation.

While COVID-19 is our most immediate concern when it comes to immunisation, we have a good window of opportunity throughout the remainder of March, and before our COVID-19 vaccination programme begins, to protect Coasters against measles.

Keep reading the rest of the CE Update to 'spot' more facts about measles and to learn more about the catch-up campaign, check out the [West Coast website here](#).

Measles fast facts

- › Measles is a serious disease that can make you very sick. It's even more contagious than COVID-19 so it spreads fast!
- › Measles can cause complications like pneumonia, seizures and swelling of the brain. It can also be fatal.
- › The measles immunisation is called MMR. It helps protect you against three serious diseases: measles, mumps and rubella.
- › If you're not sure if you've had your MMR, it's safer to get the MMR vaccine again to protect yourself.
- › Unlike seasonal vaccinations like the flu, which change each year, once you've had two MMRs you have lifetime immunity.



Bouquets

General Ward

To all the wonderful nurses. You do such an incredible job of caring for your patients. Your kindness, patience and knowledge are invaluable, especially when at times patients can be grumpy, unhappy and frustrated. We really want to thank you so very much for the dedicated care you took of my husband for his two visits – we appreciated everything you did. This is an awesome hospital, but it is the team of doctors and nurses that really make it the best!

General Ward

Please accept an expression of my gratitude for your skilled expertise, communication and professionalism given to me in my recent stay at Te Nīkau Hospital. Your inclusive consultation team approach enabled me to feel heard and secure in your hands. Thank you all for being there for me when I was most in need.

Theatre, General Ward, Allied Health and Wellfood teams

I found my whole experience at Te Nīkau Hospital & Health Centre nothing short of amazing with supportive care provided by a wonderful team. I stayed in a nice room in the General Ward with one other person and was served a good meal at tea time plus an adequate breakfast. I was provided with good advice by a physiotherapist and the wonderful surgeon provided detailed post-surgery information including what to do in the event of an emergency. Thank you!

PROTECT
THE WEST COAST
AGAINST MEASLES

**Are you aged
15–30 years?**

Get your FREE measles
immunisation now from GPs
and participating pharmacies

**For more info, visit
wcdhb.health.nz/MMR**

Working as a Rural Generalist provides a flexible working environment

Sally Peet has worked as a Rural Generalist for the West Coast DHB since January 2020, initially as a locum and then in October she became the newest, permanent member of the team. Sally rotates between Te Nīkau Hospital's Emergency Department (ED) in Greymouth and Buller Health's Foote Ward in Westport.

Sally, who grew up in Brighton, England, always thought she would be a nurse as this was her father's profession. However, following work experience in a hospital at high school, a passion for becoming a doctor developed, and Sally moved to London to study medicine at Guy's, King's & St Thomas' School of Medical Education, completing her studies in 2007.

"After medical school, I worked in a hospital in Somerset for two years. One evening while on night shift I decided, along with another colleague, that living and working in New Zealand would be a great adventure, so I applied for a position in Christchurch Hospital. On arriving here, I fell in love with the country, with working in the Emergency Department and with a Kiwi named Ben – definitely in that order," jokes Sally.

"Three years ago, Ben and I welcomed Jack into our lives, but sadly when I was on maternity leave my father was diagnosed with terminal cancer. We all went back to England to be with him in his last months. It was a very tough time, but my father's death highlighted the importance of a healthy work/life balance, so when we came back to New Zealand I decided not to go back to the big city ED, but work as a locum in rural hospitals, which is how I found myself working in the old Grey Base Hospital's ED.

Although working as a locum provided me with greater flexibility around how I spent my time, it also meant that I was often away from my family who were based in Canterbury. The COVID-19 pandemic was really challenging, and I had to spend long periods away from home during 'lockdown.' The goal then was to find a great job, in a wonderful place so that we could all be together, all the time. The West Coast ticked all the boxes and we have just loved making the move here and starting a new life."

"I am currently undertaking study towards a Post-graduate Diploma in Rural and Provincial Hospital Practice through Otago University. This course of study is an advanced, nationally recognised qualification for medical professionals who work in rural and provincial hospitals. It has been pivotal in helping to broaden my skills and



As a child, Sally Peet often dressed up as a nurse

experience, enabling me to be well placed to deliver care that meets the needs of Coasters," says Sally.

"I really enjoy working as an ED specialist in Greymouth as it's a stimulating environment where I get to meet people from all walks of life as well as continually gain experience and confidence across a number of areas, for example, paediatrics. However, one of the biggest challenges is the intensity of the work which does increase the risk of 'burn out.' For me, being able to rotate between Greymouth and Westport has been a good way to overcome this. Although the work in Westport is still intense (arguably more so at times), the variation provides a great balance. As they say, a change is as good as a rest – oh and the commute along the Coast Road is just stunning and a real highlight of my working week!"

"When I am working in Buller Health's Foote Ward, I provide unplanned (emergent and urgent) care to the Buller community. What's great about working regularly in Westport is that it sets the pathway to establishing continuity of care with patients especially those I see on an ongoing basis as they don't need to retell their story again. I've had patients that I've seen at both sites (Buller and Te Nīkau) and that is a lovely side of providing care. It's often daunting for patients to travel away from home, especially when unwell, so to be able to see a familiar face is a great comfort," says Sally.

"It's also provided a great opportunity to standardise processes and systems, for example, Foote Ward's stabilisation room is set up as a smaller version of Te Nīkau Hospital's ED. This includes laying out equipment trolleys as well as labelling containers in the same way. These simple changes mean that clinical staff can work comfortably in both locations which in turn results in a better flow of care. We're also rolling out a new educational programme in Te Nīkau for doctors and nurses with a 'theme of the month' including presentations and simulations – and, thanks to video conferencing, the programme is accessible to everyone in Buller."

"The best part about working as a Rural Generalist is the people. I am especially fortunate to work in a fantastic team comprising a diverse range of people who all bring a wealth of knowledge, skills and experience to the West Coast Health System," says Sally.



Rural Generalist Sally Peet in Buller Health's Foote Ward stabilisation room

Extending the Rural Generalism model across the Coast

This article (abridged), written by former Acting Chief Executive Dr Andrew Brant and Chief Medical Officer Dr Graham Roper, was originally published as an opinion piece in the Greymouth Star in December 2020.

Over the past year, the West Coast District Health Board (WCDHB) has taken several steps towards implementing a Rural Generalist (RG) model, an internationally proven way of working that is designed to create a more integrated and sustainable workforce in remote rural health systems like ours here on the Coast.

Our approach is to maintain and retain services on the Coast where it is safe and appropriate to do so. This is not a sudden introduction of a 'new model'; this is building on and improving our current person-focused ways of delivering health care and the way we work in order to achieve this. There has been significant progress over the past ten years. Patient safety and the retention of health care services for whānau and Coast communities is at the heart of everything we do.

Benefits of a Rural Generalist Model



The model fosters a long-term rural workforce that's trained and credentialed



Offers as many advanced and procedural skilled services in the local context as is safely possible



Local access to a core, more sustainable workforce, delivering better care, closer to home.



Internationally accepted, proven strategy



Greater continuity of care for health consumers than current model allows



Rural Generalists are experienced clinicians with specialist and general skills who can work flexibly across the rural health system. They offer a wide range of experience working in primary/community care as well as providing hospital-level care. Depending on their specialist skills and additional scopes of practice, this could mean they work in obstetrics, the emergency department, unplanned care clinic, hospital inpatient wards and in general practice.

Having a workforce of generalists who offer a wide range of skills and who undergo additional training, so they can

provide high quality care in a variety of settings is the logical solution for the Coast and we acknowledge the important role they play in our health system. Hospital-based specialty clinicians (specialist Senior Medical Officers), working alongside Rural Generalists, will provide a supportive and collegial framework that promotes a sustainable and robust clinical service.

Over time we envisage that the Rural Generalist way of working will reduce the use of locum GPs and locum specialist Senior Medical Officers. As our Rural Generalist workforce grows, we will have more senior doctors based on the Coast working in general practice and community areas, which will strengthen continuity of care throughout the whole of the West Coast.

Developing a core workforce of Rural Generalists will not only provide continuity of care for our population, it will also improve the long-term sustainability of services and support a more integrated model of care. By improving service access, it will help us support people to stay well, reduce health inequities and improve health outcomes – all key goals for our health system. It also means more people will be able to receive the care they need closer to home.

Importantly, we aren't completely moving away from a specialist model. We are moving to a mixed model which involves all professions – medical, nursing, midwifery and allied health – working to the full extent of their scope of practice as members of a multi-disciplinary team and supporting each other to maintain high standards. One that includes both speciality specific Senior Medical Officers and Rural Generalist / Rural Hospital Medicine Specialists. Our maternity team of Midwives, Obstetricians and obstetric Rural Generalists will continue to provide birthing and emergency care for women on the Coast, working as a team that support one another.

The international evidence from decades of safety data from both Australia and Canada demonstrates that clinical outcomes under this model are as safe as a traditional urban speciality-specific model. Rural Generalism also addresses our current challenge in primary care of being reliant on locums and it will mean Coasters gain good access to primary care provided by permanent GPs, which is paramount to improving patient care and outcomes.

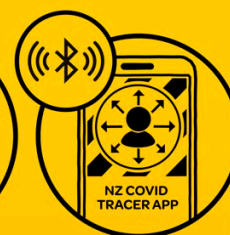
Primary care / general practice sits at the heart of the Rural Generalist skill set and model and the majority of Rural Generalist Senior Medical Officers are skilled in primary care. The Rural Generalist role has flexibility in that these same practitioners can work in both primary care settings (including rural general practices) and other hospital environments, like the emergency department.

A Rural Generalist doctor, for example, may be qualified to work in both general practice and hospital settings with a speciality in obstetrics or general practice. They would also be supported by local and Christchurch-based specialists, enhancing the capacity, capability and resilience of our health system.

With a population of 33,000 people, the reality is that West Coast DHB will always need to refer people to larger centres for highly specialised care, such as neurosurgery, some cardiac care, cancer treatments, specialised burns treatments and neonatal intensive care. These services will continue as they always have.

Coasters can be reassured that our Rural Generalist model supports our goal of ensuring that Coast communities receive the right care in the right place, from the right people, at the right time.

**MAKE
SUMMER
UNSTOPPABLE**



Unite
against
COVID-19

New Zealand Government

Physiotherapy team extending their reach across the Buller community

Clinical Lead Physiotherapist Marie Ryan has worked for the West Coast DHB as part of Buller Health's Physiotherapy team for 17 years. Marie trained in Ireland and after graduating worked at St James's Hospital's Intensive Care Unit in Dublin for 16 years before immigrating to New Zealand.

As Clinical Lead Physiotherapist, Marie provides leadership to the Northern region's Physiotherapy team, which currently comprises two Physiotherapists (one rotational) and three Kaiawhina Allied Health Assistants. She also provides clinical support across the Coast to all Physiotherapy staff, which involves travelling to Greymouth on a weekly basis.

"Recruitment and retention of staff can be challenging for regions like the Coast so it's fantastic when we have a full complement within the team.

A flow on benefit of the COVID-19 pandemic has been that new graduates haven't been able to head off overseas so are staying longer. Across the Coast, we have four rotational Physiotherapists who spend four months in each locality – Westport, Greymouth and Hokitika – which aside from helping to develop good networks is a great way to keep their skills and experience up-to-date," says Marie.

"Locally, we have good working relationships with the various community teams which is beneficial when we need to refer patients into other services. We also work closely with our Canterbury DHB colleagues who we can access for advice regarding speciality areas like paediatrics, and we also arrange joint collaborative telehealth appointments between us, our Canterbury colleagues and our patients.

"As Rural Generalists, we need to have a diverse range of skills so that we can provide care to all ages across a range of conditions. For example, we work with prenatal mums, children with mobility issues, post-surgical patients and people with arthritis or musculoskeletal issues. We visit people at home to complete assessments as part of



Buller Health's Physiotherapy team Kaiawhina Allied Health Assistant (AHA) Julie McDonald, Occupational Therapist Clare Chester, Kaiawhina AHA Samantha Anderson, Kaiawhina AHA Wendy Meaclem, Clinical Lead Physiotherapist Marie Ryan; (front: left to right) Rotational Physiotherapist Jin Yoo and Falls Prevention & Early Supported Discharge Celia Smith

our stroke/falls prevention programme as well as provide support to patients with personalised exercise programmes. We also run several classes each aimed at specific areas like maintaining balance, supporting patients post-knee surgery or providing pulmonary rehabilitation in conjunction with our Clinical Nurse Specialist colleagues for people experiencing breathing issues like asthma," says Marie.

"It's really important that we take the time to establish good relationships with our patients. It's the best way for us to learn about any barriers someone might have, like unemployment that could be having a negative impact on their health and wellbeing. Knowing this information helps us to adapt a person's treatment programme to fit their lifestyle and, where suitable, link them to other health care and support services."

"The most rewarding aspect of the job is when people come back and tell us how we have helped them change their lifestyle for the better. It's this sort of feedback that inspires us and gives us the added incentive to continue providing the best care we can to the Buller community," says Marie.

Persistence and dedication to studies leads to well-deserved qualification

Kaiawhina Allied Health Assistant Kay Wilson was recently awarded her Careerforce New Zealand Certificate in Health and Wellbeing (Level 3) Health Assistance. Kay earned her well-deserved qualification over an extended period that was interspersed with several challenges.

Director of Allied Health, Scientific & Technical Jane George says, "that with all the staff shortages, the COVID-19 pandemic and facilities activity, we know this has been a real journey for Kay and are very proud of her achievement."

Kay says: "I started working as an Occupational Therapy Assistant for the West Coast DHB's Allied Health Department in April 2017, and now hold the position of Kaiawhina Allied Health Assistant. Prior to joining the Allied Health team, I worked as an Orderly for three years on afternoon/nightshifts for Industrial Site Services (ISS) who contracted to the DHB, before taking up a variety of simultaneous casual positions, including Health Care Assistant, Laundry Worker and Logistics & Scanning (Stores).

"My role is really varied as I work across both hospital and community with various Allied Health clinicians. Depending on what support is needed, I can find myself assisting a Speech Language Therapist with a patient; supporting the Dietitians by taking weekly fluid orders or helping a Physiotherapist or Occupational Therapist with equipment management. The latter includes ordering through service accreditation Enable NZ long-term equipment for clients as well as arranging delivery and collection for anyone who needs assistance to enable them to remain living at home safely.



Kaiawhina Allied Health Assistant Kay Wilson (centre) is presented her certificate by Director of Allied Health, Scientific & Technical (AHST) Jane George (left), and Associate Director of AHST Margot van Mulligen (right)

"The Kaiawhina Allied Health Assistant role is like the butter in the sandwich, helping to knit together the services provided by the Allied Health team. We are the link between each Allied Health speciality and our patients so it's important that we maintain rapport with both our colleagues and patients. Fortunately, because of my job as an Orderly, I know many of the nurses on the General Ward and have good connections across the health system.

"I jumped at the chance to study as it provided me with the opportunity to develop my knowledge and skills. Staff shortages and the COVID-19 pandemic presented some interesting challenges, however being awarded my certificate proves that persistence really does pay off!"

Talk to a
counsellor,
any time.

NEED TO TALK?

1737

free call or text
any time

Highlighting the importance of early childhood immunisation and health checks



(left to right) Population Health Tamariki Administrator Melanie Bain and B4 School Check Coordinator Kate Devine stand alongside the B4 School Check car

West Coast DHB's Population Health team plays an important role in connecting Coast children and their whānau into publicly funded health care services. Services include General Practice, Dental, National Immunisation Register (NIR), Breastfeeding Support Services, Well Child/Tamariki Ora Provider, Hearing + Vision, Public Health Nurses, Cervical Screening, B4 School Checks and the Outreach Immunisations Service (OIS).

The team's aim is to ensure all Coast families are in contact with these services when they are needed. Here, recently appointed B4 School Check Coordinator Kate Devine and Population Health Tamariki Administrator Melanie Bain promote the importance of early childhood health checks and immunisation.

B4 School Check Coordinator Kate Devine says:

The B4 School Check is the final Well Child/Tamariki Ora check before children turn five years old and head off to school, so it is important that every child gets one. It's also important to schedule vaccinations and health check-ups with the recommended ages to ensure children have the best possible start in life.

The B4 School Check team, which comprises public health nurses, rural nurse specialists and practice nurses, check for all sorts of conditions, ranging from poor hearing or vision to issues with spelling and reading. We support children (and their families) with all manner of health, developmental and behavioural issues to ensure that they are well managed before a child starts school. For example, if a child has vision issues and needs glasses, then we can assist by linking them into the right service so that they can get used to wearing their glasses before starting school.

If you are a parent, it's a good idea to book your child in for their B4 School Check soon after their fourth birthday. This not only provides us with enough time to get your child any help they might need but offers up a good opportunity for you to talk to a nurse about your child's health and ask any question.

Aside from holding regular clinics, we also do home visits and occasionally visit pre-schools. To find out about our clinics or to book in for a B4 School Check, message us through the West Coast DHB B4 School Checks [Facebook page](#).

Population Health Tamariki Administrator Melanie Bain says:

Our Outreach Immunisation Service (OIS) provides a service to children who have been identified as having missed some or all of their scheduled childhood immunisations. Our aim is to improve immunisation coverage by offering a flexible vaccination services across the Coast.

While most of our referrals come via general practice teams and Plunket Nurses, parents can also self-refer. To make the process easier, we offer home visits which fit in around people's busy lives. It's not uncommon for us to go to see one child and end up connecting with another in the same family that also needs specific vaccines.

When we visit a family for the first time, we leave our equipment in the car until we have introduced ourselves and had a chat with the family. We want parents to make informed choices and decisions about immunisation. We explain to them what vaccines are and how they work. We can also provide written information and link parents into the Ministry of Health's website.

The reality is that immunisation is one of the best ways to improve children's health and wellbeing as it helps to protect them against a range of preventable diseases, so the more who know about this, the better the outcome. Parents have the right to decline or, alternatively, if they prefer to go through their GP practice, we can help provide transport to get them to appointments.

Our team works across the Coast – from Karamea to Haast. We hold Outreach Immunisation Clinics and will juggle our schedule to fit in home visits. To find out about our clinics or to book in a home visit contact us.

Contact us

Outreach Immunisation Service

T: 027 214 4904

E: nirwestcoast@wcdhb.health.nz

More information

- › The Immunisation Advisory Centre – www.immune.org.nz
- › Ministry of Health – www.health.govt.nz
- › Medsafe – www.medsafe.govt.nz

Long serving nurse bids farewell after 47 years of nursing

The Complex Clinical Care Network (CCCN) team and other West Coast DHB staff recently bid a fond farewell to Gerontology Nurse Specialist Helen Rzepecky whose nursing career connected with many Coasters over an impressive 47 years.

Helen retired on Friday 1 January 2021.

Helen commenced her General Nursing training at the West Coast School of Nursing in March 1973. She became a Registered Staff Nurse Geriatrics/Assessment and Rehabilitation in 1976. Geriatrics/Assessment and Rehabilitation was the core focus of her nursing practice for the duration of her career. She witnessed many changes like the implementation of different patient management systems plus the introduction of primary care nursing and the current client/whānau centred restorative care model.

Helen was considered by her colleagues to be a 'wise owl' who happily shared her nursing practice knowledge inclusive of how to use the interRAI Home Care Assessment System with the CCCN team and wider DHB health teams. She was a great advocate for the Coast



Helen Rzepecky's graduation photo (supplied)



Gerontology Nurse Specialist Helen Rzepecky cuts her farewell cake while Complex Clinical Care Network Manager Diane Brockbank looks on

community, which was regularly reflected in feedback received from community members she worked with who were appreciative of her involvement in their own or a family member's care.

We wish her a warm farewell.

Growing up well on the West Coast

Hutia te rito o te harakeke,

Kei whea te korimako e kō?

Ka rere ki uta, ka rere ki tai.

Kī mai koe ki au,

he aha te mea nui i te ao?

Māku e kī atu,

He tangata, he tangata, he tangata!

If you pluck out the centre shoot of the flax,

Where will the bellbird sing?

It will fly inland, it will fly seawards.

If you ask me,

what is the most important thing in the world?

I will reply,

People, people, people!



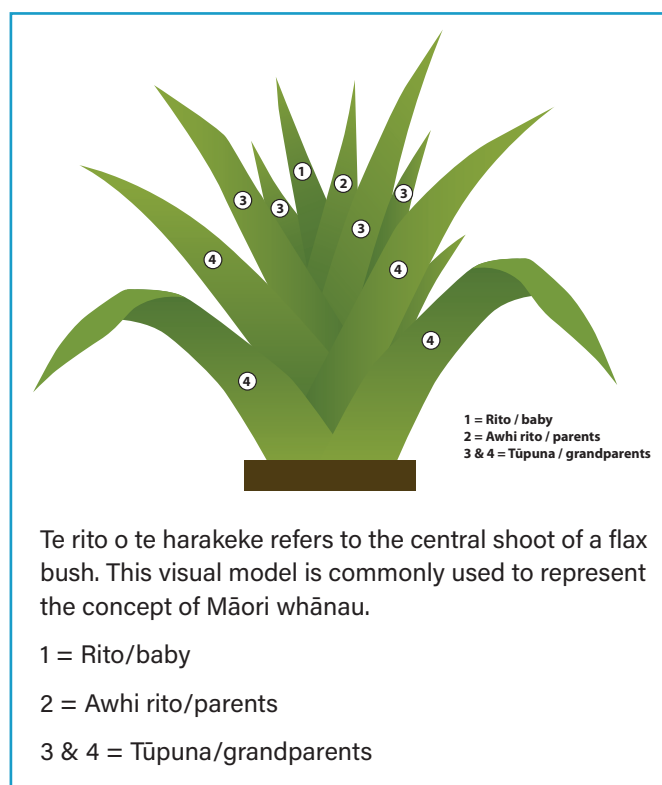
The West Coast DHB is about to start an exciting community engagement and co-design process that will inform and shape the way the DHB delivers and supports other agencies to provide health and support to newborn babies, infants, toddlers, pre-schoolers, youth and their whānau up and down the Coast.

Our facilitators will come to your community group, in your space to have these kōrero wherever you are. We will use the harakeke model to demonstrate our commitment to wrapping our services around tamariki and whānau – whatever that means to you.

There's no doubt in our mind that we will hear the good, the bad and the ugly. We want to sit with our listening ears on and our mouths off, so we can really hear what you're telling us. Feedback from the kōrero will help us co-design future service delivery in our Coast communities.

If you'd like to book a time that we can come and talk with your group, please email us on growingupwell@wcdhb.health.nz or phone (03) 768 7815.

For more information and to keep up-to-date follow us on [Facebook](#) and [Instagram](#).



2020 'whānau/family friendly' waiting room competition winners

Congratulations to the Greymouth Community Mental Health team for winning the 'DHB Adult Services' category in the 2020 'whānau/family friendly' waiting room competition, organised and judged by Werry Workforce Whāraura, the Ministry of Health and Te Pou.

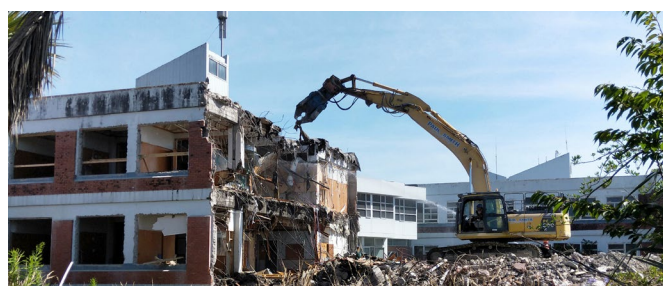
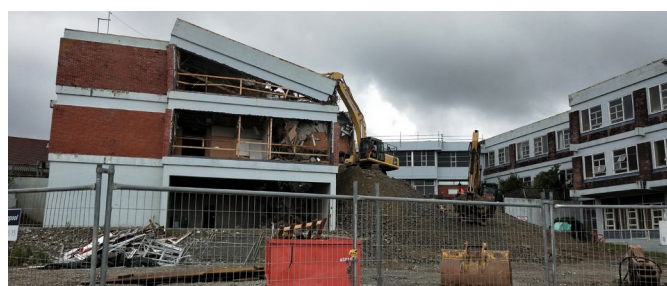
Supporting Parents Healthy Children (SPHC) Coordinator Kelly Shaw says, "We created a display of SPHC materials in the waiting space to serve as an information hub for both parents, staff and those who might want to take resources to share with friends and family members. We have books, toys, a few games and comfortable seating for all ages to emphasis our message that families/whānau are welcome. We realise it's not the nicest waiting room, but it is a significant improvement on what we had a year ago when children were not permitted to come into our Community Mental Health Service."



Greymouth Community Mental Health waiting room

You can check out the competition results and judges' comments online – [Waiting Room Competition](#).

Demolition of the old Grey Base Hospital



The staged demolition of the old Grey Base Hospital which started on Tuesday 19 January 2021 is well underway

VOICES survey of bereaved people released

The South Island Alliance Palliative Care Workstream (PCW) is pleased to release the results of its first South Island VOICES (Views of Informal Carers Evaluation of Services) pilot survey of bereaved people.

Over 500 people from around the South Island gave their views on the quality of care provided by health services in the last three months, and the last two days, of their partner, relative or friend's life.

This is the first time a regional survey of bereaved people has been undertaken in the South Island. The results give a snapshot of peoples' experiences and perceptions and will help a wide range of health services to review and plan care for people facing end-of-life illness.

The original VOICES survey was commissioned by the Department of Health in the United Kingdom as part of a commitment made in the End-of-life Care Strategy (2008) to survey bereaved partners, relatives or friends about their perception of care provided at the end-of-life.

The VOICES questionnaire collects detailed information about the circumstances of the last three months, and the last two days of life, focusing on the nature and perceived quality of health and social care services provided. It has been shown to be acceptable to bereaved people, without causing them undue distress or harm.

The results provide reassurance that most of the important tasks in caring for the dying are being provided appropriately by health services in the South Island.

Special thanks go to those who participated in the survey, and to University of Canterbury's Palliative Care Programme Coordinator Kate Reid and the University of Canterbury for undertaking this important survey.

Copies of the South Island VOICES Statistical Bulletin and the supporting dataset are now available for download from the [South Island Alliance website here](#).

Scan, scan, scan – yes, you should even scan in when you arrive at work every day

Everyone who works in health should be modelling the behaviour we're asking the rest of the community to do, and that is to scan in everywhere you go – absolutely everywhere. Use the government's COVID-19 Tracer app and scan the QR Code on display everywhere you go. If you've had trouble downloading the app, talk to a tech-savvy colleague who may be able to help. It's free for Android and Apple phones from Google Play and the App Store.

Many staff don't think it's necessary to scan in at work, as you use a swipe to enter the building, and your attendance is recorded in rosters and on timesheets. However, if you don't scan in and have Bluetooth turned on within the app you won't get timely alerts in the event you may have been exposed to a case at work.

If you move around our facilities during the day, it's a good idea to scan in when you enter a new building or see a new QR code within the building, as more services are getting their own unique QR code posters.

Let's show the rest of New Zealand the West Coast's can-do attitude when it comes to lifting our scanning game.

Our facilities have an alternative manual sign-in system available at all main entrances. Every time you see someone enter our facilities, please encourage them to scan or sign in (if they don't have the app or aren't keeping a diary) and to practice good hand hygiene by using the hand sanitiser.



One minute with...Vicky Youngman, Integrated Nutrition Services Clinical Leader/ Southern Allied Health Team Manager

What does your job involve?

I have two roles at the West Coast DHB. My Integrated Nutrition Services Clinical Leader role involves bringing all the Dietitians and Nutritionists across the Coast together to work on common goals. And my Southern Allied Health Team Manager role involves operationally managing an amazing team of Allied Health Professionals located in Hokitika and Greymouth.



Vicki Youngman on top of Gillespie Pass on the Young/Wilkin Circuit, Aspiring National Park

Why did you choose to work in this field?

My background profession is a Dietitian which involves food and people which is the perfect combination. I decided to branch out into management to broaden my scope and provide some new challenges.

What do you like about it?

Working with a talented team of Allied Health Professionals and encouraging them to be the best they can.

What are the challenging bits?

How far apart all my team members are. From Nelson to Hokitika! It would be nice to get everyone in a room together.

Who inspires you?

My Dad was an amazing manager in the electricity industry and I hope one day I can be as amazing as him. He is also a keen outdoors man and we have been on many adventures together.

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

I enjoy reading and the last book I finished was The Memory Keeper's Daughter by Kim Edwards. Highly recommended.

Something you won't find on my LinkedIn profile?

I lived overseas for three years and worked on a salmon farm in Scotland for a year. Loved it!

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

I am happiest at a New Zealand hut in the bush beside a nice river or mountains with family or friends.

What do you do on a typical Sunday?

Head for the bush and hills. I try to go for a trail run or hill walk every weekend.

My favourite meal is...

I love Japanese cuisine, especially sushi... Oishi!

My favourite music is...

I used to play the oboe in orchestras and enjoy classical music to relax. A nice piece by Berlioz, Dvorak or Respighi does the trick.

Health Quality & Safety Commission E-digest Issue 128

In the latest issue of the Health Quality & Safety Commission's E-digest you can read about how the lack of support was a major hurdle when faced with a rare disease; about the new on-stop-shop for advance care planning information and much more. You can read it online [here](#).



eCALD newsletter

You can read the latest eCALD newsletter online [here](#).



Something For You

Something For You is the West Coast DHB's employee benefits programme. The deals offered are from the West Coast business community to say thank you for all that you do.

We also have lots of other great deals from businesses located further field, check them out [here](#)!



South Island Alliance update

The bimonthly update from the South Island Alliance Programme Office aims to educate, inform and celebrate our achievements as we work towards improving health outcomes for all South Islanders. Read it [here](#).

