

A word from Chief Executive David Meates

Firstly, I would like to congratulate those who were successful in the recent elections. I look forward to working with you. The results are available via a link at the end of my intro.

I would also like to acknowledge the Board members who are departing at the end of November - my thanks and good wishes for your future endeavours go to: Kevin Brown after serving 12 years on the Board, Michelle Lomax who has served six years on the Board and Elinor Stratford who has served 12 years on the Board. Elinor was also a member of Coast Health Care Limited from October 1998 until 2000 and was a member of the transitional DHB Board in 2001.

Over the coming weeks we expect the Minister of Health to appoint up to four additional Board members and all newly appointed and elected Board members will take office on 9 December 2019.



WellFood now operating on the Coast

West Coast DHB took over the management of all its food services from Spotless Services on 1 October 2019. Food services operate in Grey Base Hospital, Reefton Health Centre and Buller Health and covers patient meals, Meals on Wheels, the café at Grey Hospital and staff meals.

The move follows a similar move taken by Canterbury DHB in 2017 to bring its food services under the DHB's direct management. The service took on a new name and branding, "WellFood", and the services on the Coast are using the same branding. The operation of food services on the West Coast under the previous contract was overseen by a

joint Canterbury and West Coast team for more than seven years, and this set up will continue.

The DHB's food service enjoys high levels of customer satisfaction and the same quality of food and service will continue, with plans over time to enhance the range of healthy choices and locally-sourced produce. The DHB will continue to use the same food production methods.



Joanne Iafeta, Café Assistant testing out the new coffee machine

The only visible change to the public will be the logo on the food service staff uniforms, which will change from Spotless to WellFood West Coast DHB.

The DHB offered ongoing employment to all 30 food services workers and their managers, previously employed by Spotless Services. The food service workers' new contracts have kept the same terms and conditions and they now also enjoy additional benefits as West Coast DHB employees.



David Meates, CEO

Measles

With the large number of measles cases around the country, we can expect to see some measles cases on the Coast at some stage.

Measles is a highly infectious virus that can be life threatening. Complications occur in about one in three people, and for them measles can be serious, even fatal.

What are the symptoms?

Measles symptoms are:

1. a cough or runny nose or conjunctivitis **AND**
2. a fever above 38.5°C **AND**
3. a rash.

If you're sick, stay home and call your General Practice team/family doctor for advice any time of day or night. Please do not go to your GP in person as you may spread the illness to others. Anyone with measles needs to be isolated from the time they become ill until 4 days after the rash appeared.

Who is protected from measles?

People who have had two MMR vaccinations (typically given at

continued overleaf...



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15 months and 4 years) are immune from measles. People born before 1969 will have been exposed to the measles virus and will have acquired immunity.

Those born between 1969 and 1990 are considered to have a good level of protection. This group were offered one measles vaccine which would have stimulated immunity in most but not all cases, which is why this group is eligible for a free MMR vaccination. Evidence suggests that one dose of MMR protects 95% of people from developing measles, but two are given as an added precaution.

Who is the priority group for vaccination?

In the Auckland region, particular effort is being made to vaccinate children, Pacific people, and those aged between 15 and 29 years to minimise the impact of this outbreak and the age at which the first dose of MMR is given has been moved from 15 months to 12 months.

In the rest of New Zealand, including the West Coast, there is no change at present to the National Immunisation Schedule, except for babies 12 months or older who are travelling to Auckland, who can bring their first MMR vaccination, usually given at 15 months, forward to 12 months. This may change as the national response to the Auckland outbreak evolves.

What happens if there's been a case of measles in a school or workplace?

Health authorities will be in contact with any school or workplace where there has been a confirmed case and advise accordingly.

If there is a confirmed case and a risk of transmission, health authorities advise that those who are susceptible – including those who have never been

vaccinated and those who have only had one vaccine – need to stay away until they are given the all clear.

As a general rule, a 'contact' is someone who has been in the same room as a confirmed case or who has been in a room within one hour of a confirmed case being there.

More information about measles is available at <http://www.immune.org.nz>

Wiki Haumarū Tu- roro | Health Quality and Safety Commission

Patient Safety Week is coming – 3-9 November 2019

The theme this year is: 'Understanding bias in healthcare'.

Learning modules

The Health Quality and Safety Commission (HQSC) has partnered with ACC and PHARMAC to produce three free video modules on understanding bias in health care, which will be made available to staff on the West Coast intranet on Monday 4 November:

- Module one: Understanding and addressing implicit bias
- Module two: Te Tiriti o Waitangi, colonisation and racism
- Module three: Experiences of bias.

The videos are for health professionals in primary and secondary care, medical colleges and associations, district health boards, public health organisations, nongovernmental organisations, Allied Health, and anyone in health care who interacts with consumers. They aim to encourage health professionals to examine their own biases, how they affect the health care they provide and their interactions with consumers. There is a particular focus on implicit bias.

The modules will go live on 3 November and will be available on [Learn Online](#) and the [Commission's website](#), but if you can't wait, you can watch a trailer which talks about how bias affects the health outcomes for Māori specifically by following the link at the end of this article.

Guest blogs

If you, a colleague or friend have a story to share about bias in health care, HQSC would love to hear about it. Perhaps you identified your own biases and would like to share how you changed your practice as a result, or you may have your own experience of bias because of weight, gender, sexual orientation, race, and so on.

Why not share your experiences in a series of guest blogs throughout the week – email PatientSafetyWeek@hqsc.govt.nz if you would like to contribute.

Social media posts

The HQSC will be sharing snippets of the video modules via social media and will prepare and share social media posts with district health boards communications teams in the coming weeks.

Further Patient Safety Week 2019 updates will be provided in upcoming editions of the Weekly Global and on the intranet. More information is also available on the [HQSC website](#).

Now, here's that [HQSC trailer on bias](#).

West Coast District Health Board election results

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

David Meates

Chief Executive
West Coast District Health Board

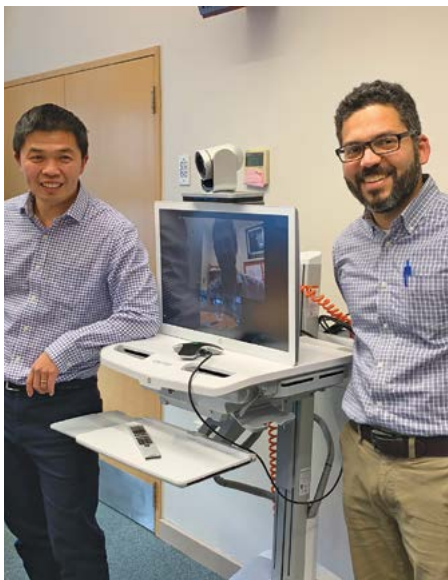
Faster treatment for South Island stroke patients

The South Island's new telestroke service has been launched between the West Coast and Christchurch, giving more people faster access to potentially life-saving acute stroke treatment.

Using dedicated video-conferencing and CT image technology, the telestroke service enables neurologists and stroke specialists to provide advice and support via video link to doctors treating stroke patients in smaller centres and after hours.

Dr Teddy Wu, one of six neurologists at Christchurch Hospital, says the service has transformed stroke care. "This is real-time care – it's like watching a movie and giving instructions. While we can't touch the patient, we can ask the doctor to examine them on our behalf. Potentially, one of the key aspects is deciding whether we need to fly them to Christchurch Hospital for a clot removal procedure. What this means is, more people who experience paralysis from a major stroke will be able to walk out of hospital within a few days."

Following the successful 2016 telestroke pilot between Wellington and four smaller centres, including Nelson and Wairau in the South Island, the Ministry of Health



Left to right: Dr Teddy Wu of Canterbury DHB, and Stroke Physician Dr Daniel Salazar, West Coast DHB

provided funding for the equipment and implementation costs for a similar service across the South Island.

Through the South Island Alliance, the five South Island DHBs developed a

hub-and-spoke model, comprising six 'spoke' hospitals (Grey Base, Timaru, Oamaru, Dunedin, Dunstan and Southland) supported by a 'hub' hospital (Christchurch). If a person presents to a 'spoke' hospital emergency department (ED) with a suspected stroke, the local ED team can notify an on-call neurologist or stroke specialist at Christchurch Hospital, who can then read the patient's CT scan, provide advice and make a diagnosis.

The South Island telestroke service will help to ensure smaller communities can access the same 24/7 neurological expertise and care as city patients. Ideally it will also lead to more South Islanders receiving the life-saving clot retrieval procedure, which is currently available only at Christchurch Hospital.

Dr Wu anticipates the remainder of the South Island telestroke service will be linked up by the end of the year.

Coasters benefit from comfort and personal care packs

Lucina Brady, the owner of Greymouth's '2 Little Dickie Birds' op shop is passionate about supporting Coasters who are experiencing crisis and often goes the extra mile to help anyone needing support.

"The shop has been operating for nearly three years. It was established after my sister, Rachael identified that there are people in our community who need extra support over and above what is already available. We started with an idea which has taken off, and because of regular donations we are now able to help out quite a few people," says Lucina.

"The valuable input of volunteers helps keep the shop ticking over and it also means that we have time to prepare our comfort and personal care packs. Our

comfort packs are designed for children and generally include a soft toy and a cuddly rug while our care packs contain toiletry items. Both packs include a note book and pen.

"We provide the packs to a number of Coast service providers including the West Coast DHB. DHB staff have told us that the packs are a valuable resource to have on hand and are very well received. It is always great to get positive feedback as it is what inspires us to continue what we do."



Left to right: Heather O'Donnell and Lucina Brady preparing a display of comfort and personal care packs.



Cancer Nurse Coordinator connecting care across the Coast

Andrea Reilly has worked as the West Coast DHB's Cancer Nurse Coordinator since 2013. Andrea studied nursing at Christchurch Polytechnic Institute of Technology (now Ara Institute of Canterbury) as an adult learner. She started with the DHB as a new graduate in 2002 where she initially worked as a District Nurse specialising in continence and urology care before moving into her current role.

"As Cancer Nurse Coordinator, I am the first point of contact for someone who has cancer or a high suspicion of cancer. For me, it is important that we are able to support our patients through what is a challenging and stressful time. This includes explaining the DHB's processes and systems around accessing treatment inclusive of wait times; providing advocacy and support; working closely with health care teams to coordinate care as well as ensuring that patients have all the information they need to clearly understand what their treatment involves," says Andrea.

"It is a really comprehensive and varied job. As well as working with around 15-20 patients at any one time I undertake data collection; attend multi-disciplinary meetings and represent the DHB at both national and regional cancer group meetings. I am also involved in assessing our service and systems to help identify quality improvements and initiatives."

Andrea's involvement at both regional and national level gives the DHB's cancer services a voice. It also means that she is well placed to bring any improvements and educational opportunities back to the Coast. She says that this aspect of her work provides a good opportunity to develop strong working relationships with a range of service providers including Canterbury-based cancer specialists.

"None of my work is done in isolation. I work as part of a great team locally which includes three Oncology Nurses and two Palliative Care Nurses based in Greymouth and two Oncology/Palliative Care Nurses in Buller. To help us provide the best care for our patients, we have access to Canterbury-



Andrea Reilly, Cancer Nurse Coordinator (right) with Megan Tahapehi, Māori Health Administrator

based cancer specialists through the DHB's TransAlpine partnership with the Canterbury DHB. This is really important as there are around three to five cancer identifications made on the Coast each week with an average of 200 new diagnoses each year," says Andrea.

When undertaking an initial assessment, Andrea considers if there are any barriers that might impact on a person's care. For example, limited access to transport to and from Canterbury for some types of treatment can be a significant barrier. She also uses the Ministry of Health's **Health Equity Assessment Tool** (HEAT) to determine if there are any health inequalities - especially for Māori - that may need to be addressed before someone receives the right level of care.

Andrea strongly believes that patients need to know their rights; to know that

they can ask questions and that they are able to access the information they need to make informed choices about their own health.

"Patients become the experts in their own care and know better than anyone what works best for them. It's important that we listen and use what we learn to help our patients make informed choices about their treatment."



To sign up for the Activity & Nutrition Aotearoa newsletter visit – ana.org.nz



Downloading the max. app!

Access your P and C service request on-the-go and from home without any tech road blocks...



Download the ServiceNow app on iTunes [Apple] or Google Play [Android]



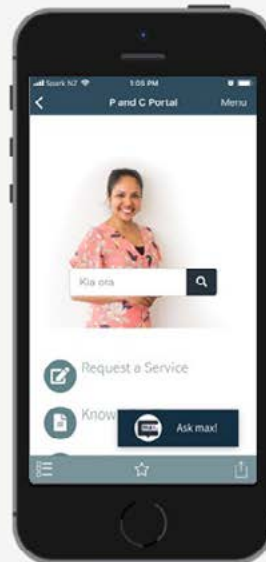
Open the app and enter pldc.service-now.com



Login with your work computer details [the app will remember you so you won't need to login again!]



Click on the max. portal tile



Done!

It's great for mileage and expense claims, or making sure your personal details, such as your ethnicity are correct [or for updating them as soon as they change]

Download the max. app on your smart device to access all your People and Capability needs on the go.

max. keeps growing – have you seen all the updates?!

Kia ora koutou,

A busy year for your online HR self-service portal, **max.**, continues with new services and updates designed for you, and based on your feedback.

Some of the highlights have included:

- Launching **max.chat**, a chat bot which can help you apply for leave, update your profile and emergency contact, and make a general enquiry – and connect you to live chat with a **max.pert**
- A new **Update My Visa** service to keep us in the loop about work status
- West Coasters can now **claim their mileage** through **max.**

- **Reorganised To-Dos and Open | Closed Cases** now help you see and search your **max.** cases
- You can **change your taxcode for KiwiSaver**
- **Manager notes can be deleted** from the Leave Calendar
- A new **Leave Without Pay** service was added
- A new **Cash Up Leave** service was added for West Coasters wanting to cash in their owed leave

My team are always working on new services and updates to help make your work, work better. So if you have any suggestions, please contact them via

Send a Question and we'd be happy to look into your request.

You can also always **request one-on-one or group training** from my **max.perts**, too – they tell me these sessions are really helpful for them, too, as they use your valuable feedback to keep improving the **max.** platform.

And don't forget, you can download the **max.** app to access all your People and Capability needs on the go. Just follow the instructions in the image accompanying this article.

Thanks for your time, I hope you enjoyed learning more about **max.**

Ngā mihi, **max.**



Robyn Larking (front row, third on the left) celebrating 40 years of service with her colleagues

Nurse calls it a day after 40 years

Article (abridged) provided courtesy of Paul McBride of the Greymouth Star.

After 40 years at Grey Base Hospital, staff nurse Robyn Larking has called it a day. Her long career there began on March 13, 1978.

"I was 17 years old and moved straight into the nurses' home. Back then you had to live in, but the odd one could live with their parents," Ms Larking said.

"In my first week as a junior nurse I fainted after learning and watching bed sponging!"

For general training, trainee nurses spent time rotating around the various hospital wards.

"I worked on all the wards and did two months at a time on each one from Barclay, Seddon, McBrearty, Parfitt, Morice, Victoria and Hannan wards, so it gave you a general grounding."

It was a full-time three-year course, with exams throughout.

"We had to sit exams at the hospital and if you passed, you could then sit the New

Zealand State exam. When I sat my finals I became a staff nurse. Shirley Watts was the matron and in charge back then. Miss Watts was very innovative when it came to the nurses' uniforms, she brought in nice smocks and we no longer had the starched uniforms, but we still had the starched hats."

Ms Larking was proud of the current hospital, which was built by her uncles, the Barrow brothers.

"They built the hospital, and working in it I used to feel safe. I used to like the airiness of the old hospital, but the new one is obviously going to be smaller. Most nurses haven't seen the new hospital yet but they are kept informed."

"When I first started there were eight people in the office and basically running the whole hospital. There is a bigger administration staff today, and IT staff."

She has seen many changes in her 40 years on the job.

"Technology has come a long way. Reports used to be written up but now it is all computers. I saw the arrival of the polytechnic nurses - they had the paper but didn't have the practical experience, initially."

"Patients are still the same and illness hasn't changed, but the treatment has. With heart attacks, now stenting straight away rather than bed rest. People still go nursing because they want to care for people. I believe nursing is a vital part of the hospital, and patient care is paramount."



The latest edition of the eCALD newsletter includes information on the launch of the new "Working with Communicable Disease with CALD Clients" face-to-face course; understanding death by suicide in the Asian population of Aotearoa New Zealand and suicide prevention resources for Korean people.

[CLICK HERE](#) to read more.



West Coast DHB's Kia Ora Hauora rangatahi visit

West Coast DHB's Hauora Māori team in collaboration with Kia Ora Hauora recently hosted a rangatahi (young person) work placement. The rangatahi were year 11 and 12 students from West Coast high schools who have all expressed an interest in working in the health sector. This is the fifth year that the DHB has successfully run this programme with the students participating in a three day schedule where they learn about general nursing, theatre, emergency department and maternity services. They also visited some of our local health providers like Poutini Waiora, Primary Health Organisation and St John.



Grey Base Hospital case study: Resilient, multi-use design in one of the most challenging locations on earth.

This case study presents the challenges and innovative solutions for providing a new secondary hospital and co-located integrated family health centre (IFHC) – Te Nikau Grey Hospital and Health Centre – for the community of Greymouth and wider West Coast region in New Zealand.

It is available online – [Te Nikau Grey Hospital and Health Centre](#)



West Coast Careers Expo 2019

West Coast DHB staff recently attended this year's West Coast Careers Expo at the Tai Poutini Polytechnic Greymouth campus. This event provided a great opportunity to showcase the variety of employment opportunities available in the health sector.

The heavy rain didn't put everyone off and our stand was visited by a small group of students as well as members of the public. Since the expo, one student has made contact with our Nurse Educator - Mental Health and Addiction Services, Cassie Sim to discuss a career in mental health. There were also a number of people interested in completing the Enrolled Nursing Diploma or training to become Health Care Assistants with the DHB.



Left to right: Sharron Shields – Theatre Technician, Tayla Cadigan – Pharmacy Intern, Jack Toulson – Anaesthetic Technician, Rachael De Ruyter – Registered Nurse, Theatre, Kim Baker – Nurse Manager Kahurangi

Celebrating 40 years with the West Coast DHB

On Tuesday, 10 September, Buller Health staff helped Marilyn Wearing to celebrate her 40th year in the employ of the West Coast DHB by hosting a morning tea. Congratulations and thank you Marilyn for your contribution over the years.



Left to right: Buller Health staff - Deborah Wright, Manager IFHS - Northern; Marilyn Wearing, Outpatients Receptionist; Karen Gallagher, Buller Medical Records; Hellen Walker, Personal Assistant to Manager IFHS - Northern; Mary Forsyth, Administrator and Silvie Saskova, Administration Manager



Gargi Sharma-Thapaliya

Quality Facilitator, Quality & Patient Safety

What does your job involve?

My job involves facilitating patient safety and improvement activity in line with the organisation's quality and patient safety strategy. In collaboration with service leaders (clinical and non-clinical), I have to build capability for the on-going development, improvement and implementation of the quality and risk management framework which ensures effective structures and processes are in place to deliver safe, high-quality care.

Why did you choose to work in this field?

I choose this field because when you work in the health sector you will never get bored, every day is different and you will get the chance to meet different people with different stories.

What do you like about it?

To analyse the problem from a different point of view.

What are the challenging bits?

To change people's belief and practice.

Who inspires you?

Stephen William Hawking.



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

Home and Identity in Late Life: International Perspectives by Graham D. Rowles, PhD and Habib Chaudhury, PhD.

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

In the village of Phalante in Nepal's Kavrepalanchok District which is where my grandmother lives.

What do you do in typical Sunday?

Go for walking with my hubby.

My favourite meal is...

Momo (one of the Nepali dishes).

My favourite music is...

Classical-type music.

Have you ever won a prize/medal/competition?

Yes, first prize in national speech competition when I was a nursing student.

If you would like to take part in this column or would like to nominate someone please contact global@westcoastdhb.health.nz.

Language Assistance Services Programme

A new telephone interpreting service replaced Language Line on 1 October 2019. The new service provides access to telephone interpreters 24 hours a day, seven days a week, who are trained to speak numerous languages.

District health boards, government departments, crown entities, local government authorities, and all other agencies generally entitled to purchase services under collaborative contracts are eligible to join the new syndicated contract.

MBIE has contacted eligible agencies currently using Language Line to request information to speed up the sign up process with the new provider. Please complete the form you received and return it to the contact indicated in the email as soon as possible if you haven't done so yet.

Visit [MBIE's website](#) for more information. Please click here to find out more about the [new provider](#).



E-DIGEST ISSUE 107

In the latest issue of the Health Quality & Safety Commission's E-digest you can read about the co-design case study: youth admissions to hospital for self-harm; Camp Unity connecting families and whānau impacted by traumatic brain injury and making mental health a priority during Mental Health Awareness Week.

READ MORE [HERE](#).



Lastest Quitline campaign: Quit for your pets...

We're a nation of pet lovers (with over 4.6 million pets!). And... while we all know that smoking is bad for humans, what people may not know is that second-hand and third-hand smoke can have some really nasty consequences for animals. Quitline is highlighting the risks to pets if someone smokes tobacco around them and encouraging animal-loving smokers to think about quitting... not just for themselves but for their pet too.

Dogs and cats are twice as likely to get cancer if their owners smoke around them, and other animals are also susceptible to a range of health issues. Third-hand smoke is the residual chemicals and nicotine left on surfaces – it sticks to clothes, furniture, curtains, walls, carpets, dust and other surfaces and can be harmful long after smoking has stopped. That third-hand smoke can cling to animal fur and feathers and can be ingested when pets are cleaning themselves.

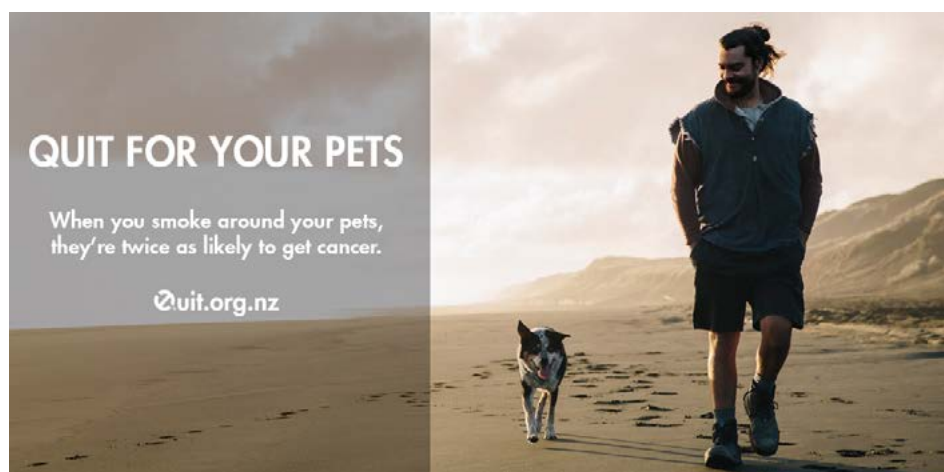
Quitline, with the great support of the SPCA, has produced a short video that tells the universal story of the love of an owner for their pet, and after showing the path that smokers are leading their pets down, reminds them it's never too late to change direction – and to quit smoking. And getting support from Quitline to do

that, increases the chances of quitting and staying quit.

WILL YOU HELP?

Would you help get the word out by sharing the video on your social media

channels? It'd be great if you would and we can nudge more smokers to think about quitting – [here's the link to the video](#), or share Quitline's Facebook post [here](#).



Bouquets



GENERAL

- The only thing that beats the food is the staff – and the food was pretty good.
- I want to put on record my huge thanks and admiration for all of your staff from ED, X-Ray, Barclay and Morice Wards, the lab, pharmacy and Allied Health – in fact everyone else in any way associated with my care – even the cleaners and the staff delivering meals.

COMPLEX CLINICAL CARE NETWORK (CCCN)

Just to say, a very special thank you to Alison Stevenson, CCCN Clinical Assessor from all my family. We couldn't have achieved moving Dad to rest home care without you! A huge relief - the move went well and Dad has a lovely home where he will be cared for and close to family.

It's been such a privilege working with you and your team. You have such a gift to put people at ease, so client focused and always delivering care to the highest standard.

We will always be so grateful for your kindness and support. Dad said thank you so many times.



BARCLAY WARD

To all the fantastic staff in Barclay Ward – thank you very much for all the kind help and hard work.

MORICE WARD

To all the Doctors and Nursing staff working in Morice Ward - thank you so much for the care and kindness you showed our Mum.