

CONNECTIONS

A quarterly magazine for staff of the Nelson Marlborough District Health Board

Summer 2016

THE NEW LOOK ISSUE

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GOOD ON YOU



My procedure was carried out with great care by lovely staff and I felt it was a bonus to be given a copy of the report, no waiting for results. (Nelson)

Thank you for all your care and support ...also for your cheerful and comforting approach which made my time there less daunting. (ED Wairau)

My surgeon was professional, caring and never minded answering my whacky questions. What an absolute wonder woman. Nelson Hospital I hope you know how truly lucky you are to have such wonderful, powerful people working for you. (Nelson)

Doctors and nurses were just so attentive and calmly professional and warmly reassuring where appropriate. (Wairau)

I was provided amazing support from the home base team. (Nelson)

It has been a long time since I have seen anyone that happy and full of joy doing their job. It made my appointment fun! (Nelson)

CE UPDATE

Welcome to 2016 and the new-look Connections magazine.

The first issue of Connections, our quarterly staff magazine, came out in February 2007. The name was chosen to reflect the purpose of the magazine – to help ‘connect’ the 2500 staff members working across the region. Nine years later, not surprisingly, it was time to give Connections a new look and feel. The bolder, expanded magazine continues to tell our stories and showcase some of the great work going on across the organisation.

For staff who were able to take leave during the holiday break, I hope you recharged and enjoyed time with family and friends. However, I would also like to acknowledge those of you who worked through the break to care for our patients.

2016 brings a new series of challenges and opportunities. We will start to plan for the Nelson Hospital redevelopment, the Learning & Development Centre and the redevelopment of the Arthur Wicks building in Wairau.

We will continue our focus on important health initiatives as outlined in our Health Services Plan last year – community water fluoridation, the removal of artificially sweetened beverages, sugar-added juices, smoothies and flavoured water from our hospital cafes and our continued commitment to reducing the impact smoking and alcohol has on our population’s health.

Last year our staff engagement survey identified four areas of concern that we will prioritise this year as part of our work towards making NMDHB a better workplace for all. Over the coming weeks the staff engagement group will ask you for information or feedback and I encourage you to take the opportunity.



"WE WILL START TO PLAN FOR THE NELSON HOSPITAL REDEVELOPMENT, THE LEARNING & DEVELOPMENT CENTRE AND THE REDEVELOPMENT OF THE ARTHUR WICKS BUILDING IN WAIRAU."

Also on the cards for 2016, a new public website will be launched in mid-March that will offer our communities a streamlined, consumer-focussed user-experience. Alongside this project is the refresh of our NMDHB intranet that, with increased functionality, will better enable you to find the information and tools you need.

We undertake these projects under fiscal constraint but I am confident we can continue to deliver another year of excellent achievement across the organisation.

Chris Fleming,
Chief Executive



Nikau House Wellness Nurse
Nicky Davis and Support Worker
Paul Sullivan set out an afternoon
tea of healthy options.



SUGAR FREE AND LOVING IT!

Weight loss, more energy and motivation, less anxiety and better sleep are some of the benefits Nikau House clients have noticed since the service went 'sugar free'.

Wellness Nurse Nicky Davis and Support Worker Paul Sullivan, with support from the Nikau House team, have removed the sugar bowl and stopped serving any sugary drinks at house events or activities.

Nicky says their clients know there are benefits to reducing the amount of processed sugar they have but often lacked the drive to do something about it.

"We've made it easier by taking the sugar, Milo and juice away and offering healthier alternatives," says Nicky. "Many of our regular clients would drink up to 14 hot drinks a day and put up to three teaspoons of sugar in each drink. That adds up to an enormous amount of sugar, which

is often combined with poor choices made outside our service over the day."

Paul and Nicky made the changes in partnership with the clients and held 'sweet alternative' education sessions. They were both pleasantly surprised with the positive response and general acceptance towards their initiative.

"Not one client objected to the sugar free initiative," says Paul, "and we are also role-modelling to staff and changing the way we view 'treat' foods."

Staff morning teas or lunches now feature healthy options and instead of giving a box of chocolates as gifts, supporters of the service received a box of cherries at Christmas.

"WE'VE MADE IT EASIER BY TAKING THE SUGAR, MILO AND JUICE AWAY AND OFFERING HEALTHIER ALTERNATIVES"

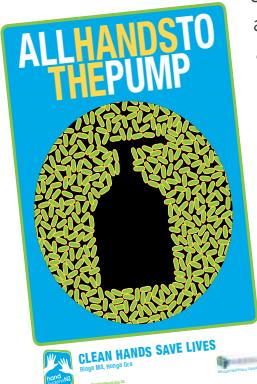
TOP HAND HYGIENE SCORE GOES TO AT&R

The message is simple: Clean hands save lives.

When you do it right, hand hygiene reduces microorganisms on our hands. In turn, this reduces the risk of spreading infections to patients from healthcare workers.

The five moments when hand hygiene should occur are: before touching a patient; before a procedure; after a procedure or body fluid exposure risk; after touching

a patient and after touching a patient's surroundings. The national benchmark for the 'five moments' of hand hygiene compliance is 80 percent.



Some of the AT&R team with their reward cake for hand hygiene compliance.

How are we doing?

In the National Hand Hygiene Performance Report (1 July 2015 to 31 October 2015) NMDHB overall achieved 81 percent. The top performer for October was Assessment, Treatment and Rehabilitation unit (AT&R) at Nelson Hospital (they achieved a whopping 90 percent), with the Wairau Inpatient AT&R, Nelson Medical Unit, Nelson Ward 10 and Nelson Intensive Care following closely. Nursing staff lead allied health and medical staff in hand hygiene compliance.

HIGH VISIBILITY FOR THE PRIME TEAM IN MURCHISON

There will be no mistaking the Murchison PRIME (Primary Response in Medical Emergency) team in their new hi-vis fire retardant overalls, safety goggles and helmets.

Emergency Management Manager, Peter Kara says their new kit is all part of emergency management preparedness.

"The uniforms will keep our staff safe and identify who they are," he says. "The uniforms are bright, won't burn and the helmets are like fire fighter and paramedic helmets and great for doing extrications from cars."



Christine Horner, Charge Nurse Manager at Murchison Hospital & Health Centre (left) with Stephanie Morgan from the PRIME team Murchison



IN MEMORIAM: DEBBIE HILL 5.12.2015

Friends and colleagues of Debbie Hill joined together at a remembrance service for Debbie held in December last year.

Debbie passed away on 5 December 2015 as a result of injuries received from an accident at her home.

Prior to her role as pre-admissions coordinator based in Surgical Outpatients, Debbie was ward receptionist for Day Stay Unit for ten years. Debbie worked alongside a great number of staff across Nelson Hospital and is sadly missed.

A tribute from Lynne Mercer, Charge Nurse Manager, Day Stay Unit.

Debbie's traits as a woman with determination, positivity, belief in herself and 'can do' attitude shone through. During her 12 years in the Day Stay Unit, there was constant change and challenges, as is the norm in health. Debbie moved and adapted with the changes and more often than not embraced them positively, providing suggestions and having input to the outcomes.

Debbie was dedicated, efficient and well organised. She constantly gave the best of herself to her work – conscientiously, diligently and she maintained the high standards she expected of others.

Staff Engagement:

Working together

TELL
US

In order to offer our consumers the best possible service, we need to do the best we can to ensure you are engaged and satisfied in your work.

Mid-2015 we asked all staff to complete a Staff Satisfaction Survey. Thanks to all who participated – the response rate was good and your information has informed new organisational priorities.

After the survey a Staff Engagement – Working Together group, including union representatives, was established to focus on the new priorities. More information about this group, and the survey results, is available on the Staff Engagement group intranet page.

The group is now asking you the following question:

What can be done to make you feel appreciated for the contribution you make?

Have your say. We welcome your thoughts on what we can do to make things better at work.

Email staffengagement@nmdhb.govt.nz

Submit a comment anonymously through the intranet: [nnintranet/staff-engagement](#)
Closes 29 February

Talk to your manager

Contact the Staff Engagement – Working Together Group – members' names are listed on the Staff Engagement group intranet page.



CONGRATULATIONS JANET – NURSE OF THE YEAR!

Rheumatology Nurse Janet Evans was named Nurse of the Year at the 2015 AbbVie conference in Auckland.

Specialist nurses treating inflammatory diseases in dermatology, rheumatology and gastroenterology around the country are invited to the conference and Janet was 'stunned and amazed' to find her manager had put her name forward for the award.

"Her submission described my role in setting up the community-based rheumatology service in Nelson," Janet says. "When I won I felt very proud on behalf of our clinic."

Janet's prize is a \$4000 travel grant which she intends to use in June attending a prestigious rheumatology conference in London.

AbbVie is a global biopharmaceutical company.

USEFUL RESOURCES ON OUR NMDHB STAFF INTRANET:

- Our confidential Employee Assistance Programme that provides free, short-term, problem-solving counselling for NMDHB staff and their partners and children.
- Workplace bullying and harassment policies, guidelines and assistance
- Health, safety and wellbeing information
- Workplace wellbeing initiatives (gym, yoga, massage, bicycle loans and more)
- Career development/ progression information



REGISTERED NURSE MAURA FOLEY HAS FIRST PLAY WITH THE MAXVILLE WOODEN ACTIVITY CUBES BOUGHT FOR CHILDREN VISITING THE SURGICAL OUTPATIENTS DEPARTMENT WITH FUNDS DONATED FROM THE HOSPITAL SHOP.

DECK THE HALLS WITH...

There were plenty of sparkles, spangles, tinsel and trees all over the organisation in December.

The winners of the 2015 Christmas decorating competition in Nelson were Child, Adolescent Mental Health Services (CAMHS) Day programme for their 'Halloweentown' display and the Paediatric Department. Board Chair, Jenny Black gave special mentions to HR and Ward 9 for their efforts.





WHEN IS IT OK TO TAKE A PHOTO OR RECORD A VIDEO IN HOSPITAL? *WHEN EVERYONE AGREES.*

Recording and sharing significant moments is commonplace but is it appropriate in a hospital setting?

Where will the images end up? Is the filming distracting the surgeon? What about the privacy of others caught in the images?

The Clinical Governance team has drafted a DHB position on digital recordings in clinical settings and is keen to receive your feedback on it.

Currently it states that no digital recording, audio or video, is allowed unless prior consent is gained from every identifiable person in the recording. Any consent also needs to include the ultimate destination of the recording.

Dr Nick Baker Chief Medical Officer says there are occasions

recordings are made, including patients recording appointments with a specialist so they can refer back to it later or for training purposes, which have real benefits.

However, the DHB has concerns around how images and recordings

might be shared in ways that endanger patient and staff privacy. He says it is about having respectful relationships between all the groups involved.

"We don't want to restrict traditional moments, like a family photo following the birth of a baby, but recording is not an automatic right and people need to consent," he says. "I am sure people want their clinician or surgeon to be totally focussed on what they are doing and

not distracted by someone filming or distressing a baby with a camera flash."

Dr Baker says some DHBs have banned all digital recordings but the NMDHB Clinical Governance Group recommends developing a policy on recordings in clinical settings in consultation with staff and consumers. He says the policy also needs to document a consent process including how information is to be used. The group also has concerns about recordings in public parts of the hospital which may cause embarrassment or distress to people.

Share your feedback on this by emailing comms@nmdhb.govt.nz



The Type 1 diabetes multi disciplinary team (sitting from left): Dr Pamela Hale – physician, Susanne Neal – dietitian. Standing from left: Diabetes nurses – Pauline Tout, Frances Horner, Paulette Guile, Jill Julian and Helen Tippler.

INNOVATIVE INSULIN CHARTS IMPRESS DIABETES TEAMS NATIONWIDE

Individualised insulin charts, developed by the Nelson diabetes team, have caught the eye of diabetes specialists around the country.

Managing Type 1 diabetes is complicated and Nelson physician Dr Pamela Hale says the idea for the charts came from the realisation that most people can't manage to achieve accurate insulin dosing on a long-term basis.

"We find that no matter how much education we do, often a person with Type 1 diabetes will just do what is easiest for them – consequently they often don't manage their condition as well as they could," she says.

Based on food diary information, the individualised insulin chart calculates the appropriate insulin dose for a patient's glucose level.

Dr Hale says the individualised charts have been very popular with patients with Type 1 diabetes as it reduces the stress of trying to do the maths around the right dose of insulin.

"As long as they are eating pretty much the same amount of carbohydrates each meal, they just need to test their glucose levels and then check the chart to see how many units of insulin they need to take before their meal," she says.

Diabetes specialists also love the charts because it increases the level of testing and reduces the chance of hypoglycaemia (low blood sugar).

Since the charts were introduced in Nelson Dr Hale says there has been a significant improvement in how well Type 1 diabetes is being controlled.

Dr Hale acknowledges the team effort that goes into making the charts a success and especially the input from the dietitian, Susanne Neal.

"We haven't had a single patient with Type 1 diabetes on dialysis and no-one has gone blind from diabetes under our watch in many years – not many districts can say that – it is something we should be very proud of."

SINCE THE CHARTS WERE INTRODUCED IN NELSON DR HALE SAYS THERE HAS BEEN A SIGNIFICANT IMPROVEMENT IN HOW WELL TYPE 1 DIABETES IS BEING CONTROLLED.



FREE PUBLIC WI-FI AVAILABLE

Anybody can now use free public wi-fi at both Nelson and Wairau Hospitals.

The service started in December and will be reviewed in early 2016 but the DHB intend to keep it going.

No password is needed to connect to the DHB Public Wi-Fi network. Click the accept button on the front page and you are ready to start surfing. The DHB Public wi-fi network is Internet only – there is no access to internal DHB network resources.

PLANNING TO RUN THROUGH THE VINEYARDS?

If you have entered the 2016 St Clair Half Marathon Run or Walk for the first time, send your entry receipt to Nicoline de Veer at Health, Safety and Wellbeing. Following the event one lucky person will have their \$90 registration fee reimbursed. Tickets for 2016 event are now sold out.





Participants in the 'crash course on crashing' get hands-on experience.

EDUCATION SYMPOSIUM WELL RECEIVED

A five-day Education Symposium held in November provided around 700 hours of professional development for staff.

Symposium coordinator Nurse Educator Jennifer Hassloch said everything ran smoothly and the feedback was excellent.

"It was encouraging to see a diverse range of participants from within the hospital and the wider community," she said. "I heard one comment from a nurse who felt 'reinvigorated in her nursing' following the symposium and others commented on the high calibre of presenters and the number of experts we have within the organisation."

Jennifer is exploring the options of running another symposium this year.



WAIRAU HOSPITAL BUILDING REFURBISHMENT UNDERWAY

Earthquake strengthening work on the Arthur Wicks building at Wairau Hospital is underway.

The project involves internal and external seismic strengthening work and an office fit-out on the upper floor. Patrick

Ng, NMDHB General Manager – IT and Infrastructure, says while the effect on the public during construction will be minimal, there will be some disruption for staff working in the Emergency and High Dependency Units.

He says a disruption management plan has been put together by a DHB user group, which includes representatives from affected staff, together with Scotts Construction, who are the chosen contractor for the work.

"...WE ARE TAKING THE OPPORTUNITY TO COMPLETELY RE-FIT THE FIRST FLOOR OF THE BUILDING AS A COMFORTABLE, MODERN AND OPEN-PLAN WORKING SPACE FOR OUR STAFF."

"There will be additional traffic noise and possibly short delays as construction vehicles move in and out of the site," he says. "As well as the strengthening work, we are taking the opportunity to completely re-fit the first floor of the building as a comfortable, modern and open-plan working space for our staff."

Once the work is completed the building will be at 100 percent of the national building standard. The work is expected to continue for ten months.



WHO WAS ARTHUR WICKS?

Arthur Wicks was born in Blenheim, graduated Master of Law from Victoria University in 1935 and became deputy mayor of Blenheim in 1945.

The Arthur Wicks building was officially opened in 1976 and cost around \$1.9 million.

WE HAVE A LOT HAPPENING IN CANCER SERVICES

A lot of hard work, and some lobbying, have resulted in significant changes and developments in the delivery of Cancer Services at the NMDHB.

These are: the relocation of the Chemotherapy Suite, the launch of the Head and Neck Cancer Mapping project with our partners from Canterbury DHB, the Maori Cancer

treatment Project, the new Cancer Steering Group, a new oncologist and a psychologist and social worker for the Oncology Service.

Service Manager Rosey Wilson says it's not just the Oncology Service behind the changes. Many people, both within and external to the organisation, have helped along the way.

"Cancer does not fall into a discreet unit – there are so many elements involved," she says, "but by giving cancer services a platform it can influence all the services under it."



Cancer Nurse Coordinator Shelley Shea, Linda Grant and Katrina Richardson in the new Chemotherapy Suite.

NEW CHEMOTHERAPY SUITE WORKING WELL FOR PATIENTS AND STAFF —

Staff and patients have settled in well to the new Chemotherapy Suite on level 5 of the Percy Brunette building.

Chemotherapy was previously administered in the Day Stay Unit but in consideration of patient privacy and health and safety risks the new suite was created.

Cancer Nurse Coordinator Shelley Shea says the suite offers a safe space dedicated to patients receiving chemotherapy. The Oncology Nursing office has moved from offices in Waimea Road and is now co-located with the Chemotherapy Suite.

NEW ONCOLOGY STEERING GROUP UNDERWAY —

A new Oncology Steering group will provide strong governance for the region's Cancer Services.

The steering group had its first meeting in January and aims to make cancer treatment faster and achieve better outcomes for patients.

HEAD AND NECK CANCER MAPPING PROJECT SMOOTHES CANCER TREATMENT PATHWAY —

The visibility and prominence of head and neck cancers can significantly affect patients.

In 2013 the Head and Neck Cancer Mapping Project identified

both strengths and opportunities for improvement in the services offered for these patients. Working with our partners in Canterbury, the 2015-2017 phase of the project provides an opportunity to ensure all parts of the service are better aligned. We will design a more patient-centred, user-friendly process and resources to improve the patient experience.

EDUCATOR TO JOIN THE MAORI CANCER TREATMENT PROJECT —

The NMDHB was the only DHB in the South Island to receive funding for a Maori Cancer treatment project or He Puku Mate Huarahi cancer pathway to address the gap between Maori and non-Maori cancer treatment rates.

The funding is going towards a fulltime Maori cancer pathway nurse educator who will work with Maori families affected by cancer and alongside oncologists, general practitioners and specialist nurses in the Nelson Marlborough region.

SUPPORT POSITIONS ADDED TO SERVICE —

Under the Cancer Psychological and Social Support programme the NMDHB has secured two new positions.

Clinical psychologist for Oncology, Gerry Dowse joins the service along with a social worker for oncology who is yet to be appointed.

The new team members will work closely with existing Cancer Services staff as part of the wider interdisciplinary care team.

NEW ONCOLOGIST —

Welcome to our third oncologist, Anna Wojtacha.

Anna joins us from Auckland and has been appointed to help in the face of an increasing cancer workload and to improve the access to medical oncology for patients.



Hemaima Hughes in her presidential kōrowai at the ceremony in 2013 when she was awarded the National Award for Service to Nursing and Midwifery.

EXCELLENT ROLE MODEL FAREWELLED

HOSPITALS TO BECOME PAPER-LITE

In the next five years NMDHB plans to reduce its reliance on paper.

Patrick Ng, NMDHB General Manager – IT and Infrastructure, says currently many of the hospitals' processes are heavily dependent on paper and to become paper-lite these processes will move to electronic systems.

Patrick says the benefits are numerous: "As well as improvements to operational planning which will allow us to provide a better service more efficiently, important information relating to patient care can be accessed more easily during care when digital systems are used."

Transferring from paper to digital systems can't happen overnight but Ng says the investment in digital is a high priority, given the improvement opportunities it provides.

Chief Executive Chris Fleming says the paper-lite strategy is part of a broader plan to progressively move the hospitals and local health system towards a digital future.

"As overseas examples are demonstrating, the early adoption of proven technology can make a significant difference towards improved healthcare, and we're currently looking at ways we can accelerate this process," he says.

A farewell poroporoaki for Hemaima Hughes was held in November.

Hemaima resigned after 28 years of service with the DHB, during which she supported the organisation clinically, culturally and educationally in a variety of roles. In 2013 Hemaima became President of Te Kaunihera o Ngā Neehi Māori o Aotearoa National Council of Māori Nurses (NCMN). She was an excellent role model to nurses, student nurses and health workers who identified as Maori: "Waerea te ara ki te ora tātou ngā iwi – clearing the way toward total health and wellbeing for all our people is exciting," she said.

We welcome your stories, news, photos, feedback and ideas. Contact the communications team on comms@nmdhb.govt.nz