

PreScribe

NORTHLAND DISTRICT HEALTH BOARD STAFF MAGAZINE



“Run promotes HPV vaccination programme”

Northland DHB staff teamed up with Plunket and Ministry of Health staff to take part in the ASB Kerikeri half marathon in November to promote the school-based HPV vaccination programme, which will be offered to all Year 8 girls next year.





From the CEO's Perspective



As this edition of PreScribe goes to print, most of us are starting to catch the Christmas spirit. Walking around the hospital wards, departments and other buildings, I can't help but get 'infected' by the decorations and the positive vibe and spirit of giving. Let's face it, it's one of the main reasons we go to work each day, but I've been thrilled at how everyone seems to be

embracing it this year. The positivity and optimism is so 'infectious' and energising despite another very tough and busy year with us struggling to live within our means.

We have done a great job in addressing many of the 75 recommendations from the Patient Safety and Quality Improvement Review. There is a regularly updated report on StaffCentral that outlines progress being made. Now, thanks to all of you and your hard work and commitment, I truly believe our hospitals are much safer places where I'd be happy for my family members or me to be treated.

Our Patient and Whānau Centred Care project and the work we are doing with our values and behaviours are two of the major projects to come out of the review. Our journey towards becoming a centre of excellence in patient and whānau centred care is well underway and was kicked off with the Enriching & Embedding Our Values campaign in March.

What we have learnt will continue to strengthen our organisation, our culture, and enrich and embed our values and behaviours. At the heart of our organisation are all of you – clinical, front-line and support staff, all dedicated to becoming a centre of excellence. Our organisational values and the behaviours behind them are the difference between a positive or negative experience for each and every patient and their whānau.

Establishment of the Consumer Council and our new Partners in Care Policy will create a supportive environment and ensure that patient and whānau centred care involves shared decision making with our patients and their families. This is quite different to the traditional way that healthcare is practised. Patients and families bring in fresh ideas, especially for those with chronic conditions; after all, they deliver the vast majority of their care themselves.

Good progress is being made on the locality of three Neighbourhood Healthcare Homes (NHH) where general practice networks and their multi-disciplinary teams will provide care in their communities. A number of IT tools and pathways work have been launched which will support greater connectivity and reduce variation in inappropriate care.

The Jim Carney Cancer Treatment Centre officially opened just over a year ago as a result of extensive community support and has proven to be an outstanding asset for the people of Northland.

Tohorā House opened in April and has brought together a number of separate and dispersed teams, saved us some money and provided large rooms for the wide range of learning and development programmes we offer.

Stage one of the Whangarei Hospital emergency department (ED) reconfiguration project has just been completed, with stage two on track to be finished before Christmas. ED is the first point of contact for many of our patients and this expansion will improve their care while we plan for a new ED and Acute Assessment Unit.

Early in the New Year, we can look forward to the completion and opening of Te Kotuku, our new maternity facility, which will replace the current 40-year-old maternity ward and delivery suite with a modern, family-friendly facility. With an eye to the future, Te Kotuku is being constructed with a shell floor above the unit, meaning the necessary foundation and infrastructure work will have already been carried out so additional floors can be added at a later stage.

Whangarei Hospital Site Master Plan version 10 is underway to determine what services move where and when and what other new building will occur over the next 10 years.

Meanwhile, late 2016 will see the completion of the redevelopment of Bay of Islands Hospital and the construction of the whānau wellness centre named Te Hauora O PukePuke Rau (a healthy chief/ whānau on every hill). The partnership between Northland DHB and Ngāti Hine Health Trust aims to improve access, provide a more integrated, efficient, high quality service working in close partnership to deliver the best possible care for everyone in the Mid North.

Northland DHB's revised Healthy Eating Food & Drink Policy, published in early December and being implemented at the beginning of February, is a tangible sign of our continued commitment to 'walking the talk' in reducing the prevalence of health conditions attributable to poor diet.

In the New Year I'll be working with all the other social agencies and councils to share this policy and get a common approach among some of our largest employers. We also have good buy-in and small wins with a number of initiatives to address our major lifestyle challenges of alcohol abuse, smoking and obesity – these are critical to the success of our Northland Health Services Plan in reducing the acute growth and demand on our hospitals.

I want to thank you all sincerely for another amazing effort over winter when I know the hospitals were frequently swamped. For many areas, the pressure has been constant and unrelenting. I'm tempted to mention some of the hardest hit areas but I know if I do, I'll end up leaving out many other deserving areas. Thanks also to those of you who helped out in areas outside of where you normally work.

To those who are working during the holiday period, thank you for your willingness to keep our essential services running through this time. To those who have the opportunity to spend time with family and friends: safe travels and enjoy a restful break.

Regards,

Revised Healthy Eating Food and Drink Policy - what's changing



Overview

All DHBs have been required to publish their Healthy Eating Food and Drink policies in early December 2015.

The policy applies only to sales points (e.g. cafeterias and vending machines) on Northland DHB sites. It does not cover patient meals or food brought in by visitors, patients and staff.

Our food service suppliers have been included in this process, are supportive of the healthier options and have indicated they are on track to implement the changes by the required date of 1 February 2016.

These changes follow the removal of sugar-sweetened beverages from sale on Northland DHB sites in late 2014.

Why?

Every day, Northland DHB staff deal with the impact of poor diet on the community, reflected in health conditions such as obesity, Type 2 diabetes and tooth decay.

Children with obesity are more likely to have obesity in adulthood and to have abnormal cholesterol levels, diabetes and high blood pressure at a younger age.

For adults, obesity is also associated with a long list of health conditions including Type 2 diabetes, ischaemic heart disease (IHD), stroke, several common cancers, osteoarthritis, sleep apnoea and reproductive abnormalities. In the 2014 results of the NZ Health Survey, 34 percent of Northland adults and 10 percent of Northland children were obese.

Meanwhile, approximately 12,000 Northlanders (7.5 percent of the region's population) have diabetes, while others have pre-diabetes.

We have an opportunity – and an obligation, both to our community and to the Ministry of Health – to 'walk the talk' on this issue.

Timeline and process

December 2015:

Healthy Eating Food and Drink Policy required to be published.

1 January 2016:

The revised policy takes effect. However, food service suppliers have been given a one-month grace period.

1 February 2016:

All sales points on Northland DHB sites to adhere to policy.

What are the opportunities for staff feedback?

Staff feedback, questions and comments can be emailed to healthyme@northlanddhb.org.nz until the end of January.

The aim is to ensure we have good, wholesome food available at our sites. What kind of menu items would

What's staying exactly as it is now



- Patient meals.
- Food brought in by visitors, patients and staff, who can continue to bring in their own food and drinks prepared or purchased off-site for lunches, shared meals and gifts.

What's changing



At all sales points on Northland DHB sites:

- Fresh, real food: Food sold will have an increased emphasis on wholesomeness and nutritional value.

Some items are likely to be off the menu but could reappear with changes to the cooking method (e.g. oven baked rather than deep fried), or with slight changes to ingredients or portion sizes. Overall, healthier, fresher ingredients will be used across all items on the menu.

- Water is the best drink: All carbonated beverages (including diet variations) will be removed from sales points.

These drinks (even carbonated water) have little or no nutritional value and are acidic, leading to erosion of tooth enamel and eventual decay.

Clean drinking water is available at all sites throughout the Northland DHB for staff to refill bottles, and bottled still water is also available for purchase.

you like to see offered? Is it important to retain vending machines and what kind of items should be included?

Full policy

The full policy can be found on the home page of the Northland DHB website www.northlanddhb.org.nz



Two of the champions for the Healthy Eating Food and Drink Policy: Eruera Moxted, manager of the Northland DHB Dietitian Advisory Service, and Dr Nicole McGrath, physician for the Northland Diabetes Service.



Cancer treatment centre brings together new skills in first year

The Jim Carney Cancer Treatment Centre in November celebrated one year since its opening.

The centre has been the catalyst for an expanded team of medical staff with specialist cancer treatment skills to be assembled in Northland and has also virtually eliminated the waiting list for Northlanders diagnosed with cancer.

“The new staff who have been brought together since the opening of the centre have improved our ability to service the community,” says Dr Lisa Dawson, Whangarei Hospital’s head of oncology.

“We can now provide the majority of services required by cancer patients in Northland – this is a significant benefit to the community, given that demand for cancer services in Northland continues to increase.” (The main exceptions are radiotherapy treatment, for which most cancer patients travel to Auckland; while most children with cancer are treated at Starship Children’s Hospital, which has a specialised child cancer unit.)

Based at Whangarei Hospital, the centre was purpose-built, with more than twice the space of the previous cancer treatment facilities that it replaced. Other benefits of the new facility included more privacy,

multi-disciplinary meeting areas, designated areas for children’s treatment and space for future expansion if required.

The centre provides day-stay treatment for cancer patients, including initial consultations, chemotherapy treatments and follow-up from a team of medical experts, including other related nursing and support services.

Named after a prominent Whangarei businessman and philanthropist who died in November 2000, the centre came about as the result of collaboration between Northland DHB and the community, led by The Northland Community Foundation. Through Project Promise, many hundreds of Northlanders were involved in a huge variety of fundraising events and activities and raised more than \$3 million towards the \$5 million project (Northland DHB funded the other \$2 million) to make the cancer centre ‘promise’ come true.

In the year since the centre opened, staff have seen 786 new cancer patients, offered 4500 patient appointments and provided 3358 treatments (up from 1675 the previous year).



Some of the Jim Carney Cancer Treatment Centre team celebrate the facility's first birthday.

The patient perspective: Marlene Tuhiwai



Marlene Tuhiwai with Cancer Society 'yellow shirt' volunteer Kathy Wallace.

Marlene Tuhiwai played a key role in the dawn ceremony to open the Jim Carney Cancer Treatment Centre a year ago. The 58-year-old Titoki woman unveiled the name plate, while her granddaughter Rymona was the puhi – the first to step through the door of the new centre.

Marlene is also a patient receiving regular weekly chemotherapy treatment at the centre. More than five years ago, she was diagnosed with breast cancer which has since spread to her lungs and bones.

She has undergone a series of chemotherapy treatments over the years, although only the latest has caused her to lose her hair.

"I'm very lucky to be at more than five years and just losing my hair now after all that treatment," she says. "You've got to look at life positively. If you start dwelling on it, it will pull you down."

"Everyone's been so beautiful all the way through. The nurses and doctors become your second family, and you meet so many people going through the same thing."

Having also experienced the previous cancer treatment facilities, she is very impressed by the new centre. "The previous one was just a little room and they would sit you right next to one another. It was such a poky little space – you didn't have space like this."

"It must have been hard for the nurses when they were trying to talk to you and be discreet and your neighbour would be right next to you."

"So when we came to open this building, my eyes lit up."

"It was a very beautiful dawn ceremony. I spoke as a patient, thanking the nurses and the specialists for what they do for us and how beautiful they are and that they deserve to have a place like this to work in."

"I think you have to have a very special heart to be a doctor or a nurse in this line of work."

***"When we came to open
this building, my eyes lit up."***

***It was a very beautiful
dawn ceremony."***

- Marlene Tuhiwai.

Marlene plays a big part in the lives of her mokopuna – she has 23 grandchildren and two great-grandchildren in Auckland and Northland.

She also travels with her husband George in his work on behalf of his hapu, which includes relocating elvers (young eels) to new awa (creeks) and educating school children about the challenges facing eels.

Her 39-year-old daughter in Auckland has had a double mastectomy after being diagnosed with breast cancer. "She looks at life positively too. She says I'm her role model."



Dr Sarah Poplar

Dr Sarah Poplar is a consultant haematologist from the United Kingdom who joined the Jim Carney Cancer Treatment Centre team in November, in a move from a visiting haematology service to one delivered locally.

This is a new position to improve access to specialist care for Northland patients and allow treatment within the region. "I am developing the service to accommodate the increasing number of patients from primary care, and also review inpatients with haematology disorders or give advice as required," she says.



Taonga gift acknowledges more than a partnership



Gwen Tepania-Palmer presents Northland DHB board chair Anthony Norman with a taonga.

At a recent board meeting Ngāti Hine Health Trust Chair Gwen Tepania-Palmer presented Northland DHB board chair Anthony Norman with a taonga to acknowledge what is more than just a partnership.

"This taonga represents the mutual integrity of our relationship, which we trust will last as long," said Ngāti Hine Health Trust Chair Gwen Tepania-Palmer of the ceremonial patu (hand held club) carved from 40,000 year old swamp kauri.

"We endorse the historic leadership of people such as Rob Cooper (former Ngāti Hine Health Trust chief executive) and awhi the leaders who are making this future possible."

The health and wellbeing of the Mid North community is at the heart of the partnership between Ngāti Hine Health Trust and Northland DHB. Ngāti Hine Health Trust and Northland DHB have a common vision to improve access, provide a more integrated, efficient, high quality service working in close partnership to deliver the best possible care for everyone.

The partnership will enhance individual and whānau experiences, with co-location reducing travel time and coordination of services ensuring that that patients and consumers see the right people at the right time.

"This is also far more than just co-location of healthcare providers. There is a drive and focus on delivering a high level of care, based on promotion of health excellence

and prevention of ill health", said Northland DHB chair Anthony Norman.

"Our focus is on keeping people healthy and well in their communities, while providing integrated care across primary and secondary services".

Changes include three general practices coming together to operate as one, the DHB building a new accident and medical department, new renal unit and refurbishing other areas of Bay of Islands hospital.

Ngāti Hine Health Trust is funding the construction of a whānau wellness centre named Te Hauora O PukePuke Rau (a healthy chief/whānau on every hill).

The plans for the hospital refurbishment are well underway and will see refurbishment of the kitchen and laboratory, a new accident & medical department, which will also provide facilities for GPs to provide after-hours services. The accident & medical department will provide the interface to Te Hauora O PukePuke Rau with a single triage point (assessment area) to serve both the whānau wellness centre and hospital.

Other services on site will include community and specialist nurses, health promotion kaimahi (worker), telemedicine, a dispensary, podiatrist, physiotherapists, a radiography suite, dental surgeries, gymnasium and an after-hours GP sleep-over suite.

Refurbishment and construction will be completed by November 2016.



Emergency department reconfiguration nears completion

The reconfiguration of the Whangarei Hospital emergency department (ED) is nearing completion, with only about a week's work left to be carried out during January.

A blessing was held in December for the new reception area – stage one of the project – before it opened for patients.

Patient feedback had raised the need for increased privacy when presenting and throughout the triage process, and this and other feedback was the catalyst for the reconfiguration of the department.

“The previous triage space was far from private and for patients who had private matters to discuss it was quite unsatisfactory,” noted ED clinical director Dr Andrew McClelland.

“ED is the first point of contact with many of our patients, so having an appropriate space to do this well is very important.”

The new clerical and triage area was phase one of the project that is also adding four additional triage bays and improve flow through the busy service, not only

improving privacy for patients but also reducing waiting times.

“The additional triage bays will provide the space to assess and treat patients with minor injuries more effectively depending on what their need is, and this will mean they can get home and continue their day rather than waiting to be seen,” Dr McClelland said.

Improving the work environment is also good news for staff. The old ED entrance was very cold in the winter and because it was right at the front door, there was a lot of additional foot traffic.

“Staff morale is going to improve because this is a much more pleasant area to work in.”

To allow the department to remain open, the work was carried out in stages, with the second stage (demolition of the previous reception area) scheduled to be complete by 23 December.

Whangarei Hospital continues to experience an increase in ED presentations, averaging 100 presentations per day, an increase of three percent from the previous year.



The dawn ceremony to bless the new triage area before it opened for patients.

Out & About



Twelve-month US fellowship for Dr Juliet Rumball-Smith



Dr Juliet Rumball-Smith

Northland DHB medical officer of health Dr Juliet Rumball-Smith will spend a year gaining expertise in the United States, after being selected for a prestigious Harkness Fellowship.

Run by the Commonwealth Fund of New York City – a private foundation established in 1918 by philanthropist Anna Harkness – the fellowships were established to reciprocate the Rhodes Scholarships. They are now considered one of the most prestigious award programmes in healthcare policy, and accept fellows from Australia, Canada, Germany, the Netherlands, New Zealand, Norway, Switzerland and the United Kingdom.

Fellows spend 12 months in the United States, working with leading US experts to study healthcare delivery reforms and key issues in both the US and their home countries, as well as attending a programme of seminars throughout the year.

Dr Rumball-Smith says although her research project and her placement have yet to be confirmed, common locations for recipients include Harvard, Stanford and Washington universities/institutions.

Her husband, radiologist Dr Alistair Rumball-Smith, who also works for Northland DHB, and the couple's

four children, ranging in age from 10 to twins who are approaching six, will travel with her. "The kids are excited about living in a new country, and it will be a great opportunity for us to have an adventure as a family.

"Previous fellows tell me the fellowship is a life-changing experience. It offers time and space to both perform research, and to learn from world-leading minds in health policy," she says. "This is an exciting time in US health policy, with a variety of innovative and bold approaches being used to improve healthcare across the country. I am hoping to watch and learn about strategies that may be helpful for New Zealand, and for Northland in particular."

The fellowship is open to one New Zealander a year and this year saw the highest-ever number of NZ applicants. Previous New Zealand recipients include former Health and Disability Commissioner and now parliamentary ombudsman Professor Ron Paterson, Waitemata DHB chief executive Dale Bramley, University of Otago pro-vice chancellor of health sciences Professor Peter Crampton and Martin Hefford, chief executive of Compass Health, a primary health organisation (PHO) in the lower North Island.

"I think this organisation is particularly supportive of professional development and takes a 'long view' when considering this type of opportunity for its employees."

- Dr Juliet Rumball-Smith.

Dr Rumball-Smith believes a key reason for her selection was the support she received from Northland DHB and its PHO partners. "I think this organisation is particularly supportive of professional development and takes a 'long view' when considering this type of opportunity for its employees," she says.

"I'm committed to working for the health and wellbeing of New Zealanders, and want our health services to be the best they can be. I'm extremely grateful to have been given this opportunity. I'm excited both about the year ahead, and about returning to Northland to put my learnings into practice."



Dedication brings fresh water to island population

When Maungaturoto man Stephen Rosser was first introduced to the Vanuatu island of Ambrym, the population of 10,000 relied on 'sea wells' for their water.

"The name 'sea wells' means that when the tide came in, the well was full," says Stephen. "It was a 50/50 mix of fresh and salt water and this is what they were using to wash, to cook and – if they had to – to drink."

After a decade of taking teams of volunteers to Ambrym, Stephen – the Maungaturoto Kaiwaka station manager for St John – will by next year have succeeded in making fresh water available throughout Ambrym, one of Vanuatu's 83 islands.

Ambrym has two active volcanoes and – until the beginning of the project Stephen leads – had no fresh water system.

Stephen had previously carried out a voluntary project installing

sinks into the patient rooms at a World War II-era hospital on a neighbouring island. A close friend from his church, Juanita Ingham,

"It was a 50/50 mix of fresh and salt water and this is what they were using to wash, to cook and – if they had to – to drink."

- Stephen Rosser.

who Stephen describes as visionary in identifying and setting up such projects, asked if he could solve Ambrym's lack of fresh water.

Each year since then, Stephen has raised funds, trained up a new volunteer team and spent half of his annual leave on Ambrym.

"In every village, there's a substantial building with an iron roof – a church or hall that they use as their shelter in cyclones. All the other buildings are thatched," says Stephen.

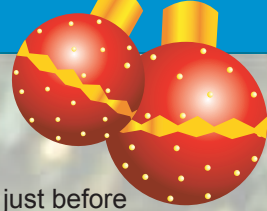
"So for 10 years, we've been installing spouting on buildings and building concrete water tanks."

Plastic tanks were initially trialed but concrete tanks have an advantage: the lime in the cement neutralises the acid rain from the volcanoes, making the water drinkable within a week.

Of the 100 villages on Ambrym, fresh water supplies are now available in 87, covering roughly 8700 people. "There's just one corner to do this coming year, then the whole island is finished."

The total cost of the spouting, fittings and other materials installed to date has been \$180,000. Stephen and his teams – supported by the





Stephen Rosser

Maungaturoto community in particular – have fundraised this entire amount.

The teams are responsible for fundraising separately for the costs of their airfares, as well as accommodation and food on Vanuatu's main island for the three days while the volunteers wait for transport to Ambrym, where they are hosted by the village where the project is taking place.

The volunteers are also required to live for two weeks in the belongings they can fit in their carry-on luggage, with Stephen using everyone's checked baggage to transport fittings from New Zealand.

"Each trip takes three months' planning," Stephen says. "We fundraise through sausage sizzles, doorknocks and 'island nights', which include auctions of items donated by Maungaturoto businesses.

"I'm born and bred in Maungaturoto – I've lived here 56 years and there is huge support from the business community."

Over 10 years, Stephen has taken 170 people to Ambrym: "Rotary groups, church groups, Youth With A Mission. Teams from as far afield as Whangarei and Invercargill – many many teams from the South Island, there seems to be a bit more finance there.

"The oldest person was aged 78 and the youngest was four. As long as you can use a hammer, you can come.

"It's great for young people to go there. They can see how good they have it here, and a few teenagers have come back totally changed."

In 2005, he also took up a TV news crew from Campbell

Live, resulting in an eight-minute segment just before Christmas.

At the end of each project, Stephen measures up the next villages that will be the focus of the next trip. "If you are going to go and work for a village, you have to do it by invitation and arranged in advance. The village is expected to feed us and provide a hut for us all to sleep in.

"The food is mostly rice and vegetables – I've become very used to it but some of the teams find it very difficult and the three-day wait for transport out to the island is a good opportunity for everyone to adjust to the change."

Severe Tropical Cyclone Pam in early 2015 is regarded as one of the worst natural disasters in the history of Vanuatu and devastated part of Ambrym.

Aside from this damage – and the effects of the sun – Stephen says all of the equipment installed over the years has been maintained in perfect order, testament to its value to the villagers.

"I look forward to every trip," says Stephen. "There's excitement, enthusiasm and always an air of the unexpected.

"As I'm heading for the airport, I sometimes wonder whether I really want to do this again but then I get there and I'm into it."

"I look forward to every trip, there's excitement, enthusiasm and always an air of the unexpected."

- Stephen Rosser.

He has five sons aged from 21 to 31, all of whom are working and have donated money to the project. "I've taken three of them up there but the others have no interest. My wife's never been – it's not her cup of tea but she has made it all possible over the years by looking after everything at home.

"To be fair, it's been a sacrifice for them at times and a sacrifice for me too.

I don't have to do it and it's by choice that I do it – because I wanted to help people, not for my ego."

Next year, he will make an extra trip to Ambrym in August: the first village he worked in has been building a church for five years, which is nearing completion. The opening will involve guests from all over the South Pacific, and Stephen has been invited to be part of the official party and to speak at the event.

Reflecting the importance of family as part of life in Vanuatu, his parents have also been invited to attend the opening.

His future once the project on Ambrym is complete is likely to involve India: his church friend Juanita Ingham, who originally got him started on Ambrym, has new projects underway there, which Stephen visited early this year.

"It's very new work – and lot more expensive to get there – but I'll probably go up there again next year."



Strategic Leadership Mentoring Programme

By Lyn Rostern, Northland DHB population health strategist



Lyn Rostern

During 2015, I have had the privilege of being a capacity partner for The Springboard Trust. The Springboard Trust provides the Strategic Leadership for School Principals Programme, an intense eight-part workshop series over a year, facilitated by leading business executives.

This programme helps principals create and implement more effective strategic plans for their schools, thereby strengthening educational outcomes and dramatically improving life skills for young New Zealanders.

My involvement is a mixture of volunteering and professional development – I am chair of the Northland Area Society Plunket board and have a passion for supporting children and families, particularly vulnerable children.

There is synergy between health and education as happy school communities = happy healthy children.

Northland school principals are completing the program in greater numbers each year. Each principal is supported by a capacity partner who is a business or intersectoral mentor.

The partner's primary role is to support the principal within the planning model, help structure their thinking, encourage networking and collaboration, building their capacity and future strategic leadership. This of course goes both ways as learning and facilitation outside of your usual comfort zone is a powerful enabler. The opportunity to connect business leaders and education leaders is inspiring for both.

Being a capacity partner has also allowed me to update my strategic leadership knowledge, and application of up-to-date tools and processes.

A highlight for me was seeing the sheer innovation and inclusiveness in the strategic plan developed by the principal I mentored. The children were included from the start in the vision and aspiration for the plan, and the whole school community has been part of its development, which is now symbolised in a way that everyone recognises – painted on a high-profile trio of water tanks. It was a stroke of brilliance and made it all worthwhile.

'Growing' other capacity partners is important for the future of this program in Northland, so if you feel you are able to 'challenge with empathy', this is a rewarding personal and professional development opportunity.



'A stroke of brilliance' – symbolising a strategic plan on a high-profile trio of water tanks.

Volunteers provide a friendly helping hand



Every year, our dedicated hospital volunteers are acknowledged with a special lunch, small gifts of appreciation and prize draws. We talked to some of them about how they first got involved, and what the experience means to them.

Joan Keyte always wanted to be a nurse “but my parents told me I was too shy and sent me off to teacher training.”

At the age of 70, she saw a newspaper article seeking volunteers to assist at Whangarei Hospital. “I thought at 70, maybe I’d be too old. The lady told me: ‘Joan, you would be one of the youngest’.”

Now aged 84, Joan considers her volunteer work with the Emergency Department to be “an absolute privilege.

“I love communication and I’ve always had that personal touch,” she says.

“It’s about talking to individuals and hearing their stories and giving them the feeling that they don’t have to be alone. Folk of all nationalities have shared their stories and happy events with me.

“They accept me because I’m neutral – there’s no pressure from anyone.”

Rosemary Rundlett and Carole Tilbury both work in the library and appreciate the option to choose where they want to be. Rosemary says: “I like books, so it suits me.”



Joan Keyte

Carole adds: “It’s nice company. When you’re retired, you’ve got to go out and do things.”

The volunteers clock up between 6,000 and 7,000 hours a year. For many, their involvement began with the new service in 2000, meeting and greeting people and helping them find their destinations that were often changing due to redevelopment work.

The areas volunteers work in are:

- Meet and Greet;
- Shuttlebug (providing transport to and from the Whangarei Hospital lower car park to the main entrance, Surgical Admissions Unit and Tumanako mental health inpatient unit);
- Library;
- Emergency Department;
- Ward 2 playroom;
- Massage;
- Chaplaincy;
- Kaitia Hospital;
- Hospital bus from Kaitia to Whangarei; and
- Snack trolley/book trolley.



Volunteers Rosemary Rundlett and Carole Tilbury with library manager Karen Goosen (centre).



Liz Williams, Clinical Nurse Specialist – Stroke

In her first weeks as Stroke CNS, Liz Williams would say to her husband: "I'm not sure if I like this job – it seems nearly every patient I meet has a cry." Nearly seven years into the job, she talks about her role in Ward 15.

Starting the Stroke CNS job in Ward 15 in May 2009 introduced me to a team of nurses, physiotherapists, occupational therapists, speech and language therapists and doctors and I felt I could learn a lot from these new colleagues. Ward 15 is the only in-patient rehabilitation facility in the Northland DHB. In 2007, under the leadership of Dr Alan Davis, a four-bed Acute Stroke Unit (ASU) was established in Ward 15 and since July 2015, a further two to four beds are now available.

Nursing care involves assessing patients, reducing risk of complications after stroke and working with the multidisciplinary team to support stroke survivors to regain the capability to attend to their personal and daily life activities.

A key activity for a CNS is to provide information for patients but before doing this, it's important to take time to listen to patients and their family/whanau. Now I recognise it is actually a privilege



Liz Williams

to sit with people when they feel safe to release their emotions. Grief is part of processing the loss of a former self.

Stroke can affect people in many ways. All survivors are changed to varying degrees. Therapeutic relationships with patients and close family are established as the team guides patients on their individual journeys.

The role of the CNS includes leading the advancement of specialised nursing skills. The Stroke Team

aims to shorten time in the Emergency Department and admit the patient to the ASU as soon as possible. I find it rewarding to be able to move patients to the unit and hand over care to my ASU colleagues and see tired and tearful people relax and trust that the nurse has appropriate expertise to care for them.

The specialised skills of nurses working with acute stroke patients are the fundamental reason for improved patient outcomes. I recommend stroke nursing as a career pathway – it is certainly hard work but has big rewards. There are many 'feel good' moments: seeing patients improve and mutually celebrating even the smallest progress.

What is stroke? Usually the underlying cause of a stroke is similar to the cause of a heart attack. In stroke, the arteries to the brain are obstructed, resulting in damage to part of the brain. Strokes can be small, leading to subtle problems; or large, causing obvious disability; or devastating, leading to death. It is vital to seek emergency help as soon as signs of stroke appear. Very early emergency care can potentially make a difference to the effects and the New Zealand Stroke Foundation promotes this simple test to help recognise a possible stroke:





Sandra Meyst

Clinical Nurse Specialist – Hepatitis



Sandra Meyst

I work with people in our region diagnosed with viral Hepatitis B and C. There is a high prevalence of Hepatitis C in New Zealand, with an estimated 50,000 people infected, and an estimated 40 percent undiagnosed. Many of these people have no symptoms.

While these viruses can sometimes cause little or no damage to the liver, in many people there can be a process of inflammation and scarring over time, especially when combined with heavy alcohol consumption. Hepatitis B and C are also oncologic, meaning they can cause liver cancer in some people.

A major part of my role as a nurse specialist is to monitor people on treatment for viral hepatitis. For Hepatitis C, this currently involves a course of Interferon and Ribavirin medication, with regular blood tests

and clinic visits to monitor side effects.

Unfortunately this treatment causes many unpleasant side effects, such as feeling like you have the flu for a year!

Our liver service has cured many people over the years with Hepatitis C. However, new pharmaceutical advances have produced oral antivirals which have a very high cure rate for Hepatitis C, and very few side effects. This is promising for future eradication of the virus. Due to the high cost of these medications currently, they are not yet funded by Pharmac.

Hepatitis B is another outpatient group my colleague RN Judy Coyne and I care for in our region. We currently have 70 patients on our remote prescribing list, managed together with Dr Rachael Harry. These people receive three monthly blood tests to monitor their treatment with oral antivirals to suppress the Hepatitis B virus, such as Entecavir, Tenofovir, Adefovir and Lamivudine. These medications prevent the virus from replicating within the liver, which in turn prevents further damage to the liver caused by associated inflammation and scarring.

The other main patient group cared for by our service are people with chronic liver disease, many of

whom have cirrhosis. This extensive scarring of the liver can be caused by a variety of factors, including viral hepatitis, excessive alcohol consumption, autoimmune hepatitis, haemochromatosis and fatty liver disease.

Management of cirrhosis from a nursing and medical perspective includes six monthly liver surveillance monitoring, to allow early detection of abnormalities such as liver cancer. The surveillance program includes a blood test and ultrasound scan.

I also hold nurse specialist clinics alongside our hepatologist, Dr Rachael Harry, to follow up people with liver disease and on treatment for viral hepatitis.

The main message I would like to end with is to emphasise the vital role our liver performs in keeping us healthy and energised, and the importance of a simple, regular blood test to check whether the liver itself is remaining healthy!

If you want to find out more about the Liver Service at Whangarei Hospital, go to www.healthpoint.co.nz and click on the liver service under Healthcare Services at Whangarei Hospital. Referral guidelines are also on this site. I and my colleague Judy can be contacted on (09) 430 4101, extension 7724 for any queries.

Bird Feeders – A Perfect Gift For Anyone

What you'll need:

- 3/4 cup birdseed
- 1/4 cup water
- 1 small envelope of gelatine
- twine or string
- cookie cutters, moulds or jar lids
- waxed paper.

What you do:

- Mix together the envelope of gelatine with 1/4 cup of water and bring to a simmer while stirring. Continue stirring until the gelatine is dissolved;
- Remove from heat and let cool for a minute;
- Stir in the 3/4 cup birdseed, adding a little more if there is liquid still in the bottom of the pan;
- Lay your cookie cutters out on waxed paper and fill half way with the birdseed mixture;
- Cut your twine, knot the end and push the knot down into your birdseed;
- Continue filling with birdseed, covering the end of your twine and knot. Push the birdseed evenly into the cookie cutter until it's full;
- Allow them to dry overnight, turning them over every now and then;
- Remove from the cookie cutters and hang them in your trees and then wait by the window to watch for your first guest ☺.



NEW COURSES FOR 2016

Learning & Development is pleased to announce the launch of the 2016 training programme

New for 2016

Change Management
Coach Development Programme
Coaching training for managers
Courageous Conversations – end of life
Dealing with Difficult Behaviours
Finance
Leading and Working with Values
Meetings that get Results
Mindfulness for Resilience and Wellbeing
Motivational Interviewing
Patient & Whanau Centred Care
Patient Experience and Co-design
Presentation and Public Speaking
Project Management and Planning Fundamentals
Strategic Leadership
Understanding Yourself and Others – Myers Briggs Type Indicator
WorkSmart

These new courses are in addition to our existing programme.

Further details can be obtained from the Learning & Development website (accessed from StaffCentral).

To book yourself on to a course, you can use GrabaCourse via YourSelf Kiosk.

Check out the five new Learning Pathways for 2016.

Northland DHB Learning Pathways for 2016

Patient and Whānau Centred Care

Learning Pathway

300 Credits

- Relationships between people are important.
- Learn how to put patients in the centre of their healthcare.
- Patient and Whanau Centred Care Learning Pathway.

Efficiency and Effectiveness

Learning Pathway

300 Credits

- Have the confidence to aim high.
- Learn useful tools that will help you succeed.
- Efficiency & Effectiveness Learning Pathway.

Reducing Inequities

Learning Pathway

300 Credits

- Committed to eliminating inequities and improving Maori health outcomes?
- Learn how you can play a part in eliminating inequities in Northland.
- Reducing Inequities Learning Pathway.

Living the Values

Learning Pathway

300 Credits

- Northland DHB is a Values-based organisation.
- Are you a Values champion?
- Living the Values Learning Pathway.

Management and Leadership

Learning Pathway

400 Credits

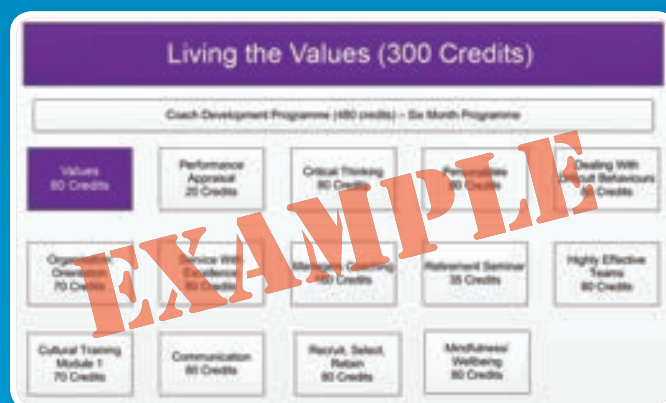
- Healthcare deserves excellent leaders and managers.
- Regular refreshers keep you at the top of your game!
- Management & Leadership Learning Pathway.

Cross crediting between pathways is offered. Recognition of prior learning can be applied



Learning & Development

Serving people, facilitating success



Please visit the Learning & Development website for further details.

A Healthier Northland
He Hauora Mo Te Tai Tokerau

NORTHLAND DISTRICT HEALTH BOARD

Te Poari Hauora Ā Rohe O Te Tai Tokerau



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