





What a year it's been! We thought 2020 was "unprecedented" - this year has managed to top that.

In the last three and a half months alone, we have dealt with the Delta outbreak creating a steady trickle of cases into our community, alongside continuing to implement the most extensive health intervention we've seen in many years - the COVID-19

vaccination programme.

Going into this programme, we knew we had the most challenging place in the country to try and achieve high vaccination coverage levels, as this has always been our reality.

Our teams have worked extraordinarily hard vaccinating and testing our population as well as caring for people with COVID-19 in the community and Hospital when they've been admitted. And, although we have faced many barriers trying to get to the 90 percent target and ensuring equitable coverage, particularly for our Māori community, we will continue to provide multiple opportunities for vaccination and likely continue to see a slow increase in our vaccination rates. With that 90 percent rate comes greater freedom and, most importantly, it provides the protection we need for our population.

One positive we have when comparing last year to this year is people haven't avoided our health services in the community or hospital, and we definitely have not created as much unmet need. In fact, in many areas our waiting times and lists are reducing.

Despite all the challenges caused by having Delta in the community, we have generally carried on providing all our planned care and other services. Despite limited immigration our population continues to grow (again the second highest in NZ at 2.55 percent, this time behind tiny Wairarapa). This means that in the last year another 5000 people have moved to Tai Tokerau with all of their health needs. Undoubtedly, they are finding it difficult to access GP services and will end up putting even more pressure on our hospitals if they get sick and can't be managed in the community.

And this is a tribute to every one of you.

As usual, I have received numerous compliments and thanks for the care you provide every day.

All of you are doing such a fantastic job. It makes me incredibly proud. I genuinely believe we have the best staff and culture - a very caring workforce that is wholly committed to providing high quality and, at times, world-class care.

Looking forward to next year, we are making further progress with Whangārei Hospital redevelopment. We plan to submit our detailed business case in March, which is currently being reviewed due to higher costs than projected.

Recent issues with our soil stack (sewerage pipes) in the medical wing have again demonstrated the conditions all of you have to work in within our ageing hospitals. Whether it's Whangārei Hospital or our regional hospitals, it highlights the urgent need to upgrade these facilities. We plan to look at what needs to be done at Kaitaia Hospital and commence a site master plan for Dargaville Hospital.

There continue to be numerous building works across all our hospitals to improve our ability to manage red and green streams and ensure negative pressure areas are available.

Several other significant facility improvements are due to begin early next year, starting with the redevelopment and improvement of Te Kotuku with Paediatrics, SCBU and a new laboratory.

Soon after that, the refurbishment of Manaia House (Community Mental Health) will commence. And of course,

we are underway with the Bay of Islands Hospital Stage 2 Redevelopment.

We are also waiting on decisions regarding our business case for a new linear accelerator and expansion of our cancer services.

So, several exciting projects are underway while we wait for the big prize – a new Whangārei Hospital.

I want to thank all those involved in reducing our significant colonoscopy waiting times. We now have some of the lowest waiting times in New Zealand and are well prepared and ready for the Bowel Screening programme, which recently commenced in Northland. This will undoubtedly increase demand and hopefully pick up a significant number of bowel cancers at a much earlier stage than would otherwise have been detected.

I would also like to acknowledge two new appointments to our executive leadership team – with Dr Jenny Walker being appointed Chief Medical Officer and Dr Lucille Wilkinson as Associate Chief Medical Officer. Jenny and I did a House Surgeon year together in Whangārei about 35 years ago (but she's way younger than me!).

I had the pleasure of farewelling Dr Win Bennett earlier this month as he moves into retirement after a hugely successful and productive career as a GP, Senior Pharmac and DHB Manager, GP Liaison and more recently, as University of Auckland academic coordinator based at Whangārei Hospital supporting students through the Pūkawakawa Programme. Unfortunately, we have also lost several staff over the few weeks due to the COVID-19 Vaccination Order, which has been a very difficult process for many people,

According to our modelling, we may have a significant increase in the number of COVID-19 cases from mid-Jan onwards due to the borders opening on 15 December. There are number in imponderables – we're seeing a decrease in the number of cases in Auckland, which is a good sign, but we will likely have a significant escalation in our own number of cases, as about 60,000 Aucklanders head North.

Our teams are working hard to prepare for that with community, Māori Health Providers, Iwi, general practices and Whakarangorau (Healthline) able to manage most of the predicted cases in the community and have their healthcare, welfare, and wellbeing needs met.

There are several initiatives underway to strengthen White Cross and the other after-hours services across rural Northland to try and improve things for GPs. Included in this list is a trial at Kaitaia Hospital with Emergency Consult (EC) to support patients who would typically go to the GP after hours, with virtual specialist appointments.

We are also looking at growing our GP registrar workforce and supporting multiple recruitment efforts to grow our general practice workforce.

I'm aware that many of you will be working through the holiday period so I want to acknowledge all of you first. I know you do not have the opportunity to take this time off, but I hope you can have a holiday a little later, after the crowds go back home. I hope every one of you whether you're working or not, get some special time with friends and family - for many it'll be the first time in at least four months that you've connected with loved ones. If you're getting a break, make sure it's as restful, peace filled and safe as possible. I look forward to seeing some of you at the Xmas barbecue and I'll be thinking of everyone working in our rural hospitals and communities. Happy Red Light Xmas and New Year.

Kind Regards,

Nick

2021 Australasian Professional Society on Alcohol & other Drugs (APSAD) First Peoples Award Recipient



Dr Moana Pera Tane APSAD Award Winner

Dr Moana Tane, general manager Te Poutokomanawa Māori Health Directorate, became the recipient of the 2021 Australasian Professional Society on Alcohol & other Drugs (APSAD) First Peoples Award. The award was presented to Moana during the APSAD virtual conference in November 2021.

The Australasian Professional Society on Alcohol & other Drugs (APSAD) is the Asia Pacific's leading multidisciplinary organisation for professionals involved in the alcohol and other drug field. APSAD is dedicated to increasing the profile of the issues related to the use of alcohol and other drugs, through the dissemination of information from the wide range of professions involved in this field. In addition, they strive to promote improved standards in clinical practice and in research into this and allied subjects. It also provides a network of drug and alcohol professionals in Australia, New Zealand and the Asia Pacific.

Through its internationally recognised scientific journal, the Drug and Alcohol Review, and its annual Scientific Conference, APSAD provides a forum for the latest research on the nature, prevention and treatment of physical, psychological and social problems related to the use of psychoactive substances.

Moana conducted qualitative research study while living and working among the Yolngu people of East Arnhem Land in the Northern Territory of Australia, exploring tobacco control denormalisation strategy, stigmatisation and leadership. She graduated in 2020 with a PhD in Indigenous Health and later that year, took up a Post-Doctoral Research Fellow role with the iSISTAQUIT research project, an initiative she had been associated with from 2017 in an advisory and academic capacity. In early 2021, Moana became an Associate Investigator on an international research study funded by Global Alliance on Chronic Diseases and NHMRC, with Professor Dr Gillian Gould, Southern Cross University.

After returning to Aotearoa in April 2021, Moana has been working with a collective of chief executives and leaders from Māori Health Providers in Te Tai Tokerau, to develop a Tupeka Kore strategy to address the disproportionately high prevalence of smoking among our whānau. Moana's research has shown the value of using strength-based messages, in local language and with local people, to support behaviour change, using well-evidenced approaches, such as nicotine replacement therapy and other pharmacological interventions.

Dr Tane Seconded to Ministry of Health

Dr Moana Tane has more exciting news. She has been seconded to the Ministry of Health as Regional Account Manager Equity for the period 10 January to 10 July 2022.

During the period Moana is away Peter Thomas will be the acting general manager Te Poutokomanawa Māori Health Directorate and Belinda Edwards will be the acting group manager, holding the financial delegations.



First-year House Officer at Whāngarei Hospital Dr Benjamin Alsop-ten Hove – Rhodes Scholar



(Pictured from left) Dr Ben Alsop-ten Hove, Monique Cooper and Zak Devey

Governor-General The Right Honourable Dame Cindy Kiro has praised three "really exceptional young people" who have received prestigious Rhodes Scholarships. She says they will make Aotearoa New Zealand proud.

Dame Cindy met Dr Benjamin Alsop-ten Hove, Monique Cooper and Zak Devey during their selection interview for the scholarships, which will see them heading to the University of Oxford in the United Kingdom in October 2022 to join a cohort of more than 100 Rhodes Scholars from around the world. The Rhodes Scholarships are postgraduate awards to support study at Oxford. Established in 1903, they are the oldest international graduate scholarship programme in the world.

Aged 24 and a first-year house officer at Whangārei Hospital in Northland, Dr Benjamin Alsop-ten Hove is already a well-established and highly regarded champion of better resourced and more equitable health services in rural New Zealand.

Ben was a Local Hero Medal recipient in the 2019 Kiwibank New Zealander of the Year Awards for his contribution to promoting rural health careers to university students and more than 15,000 rural high school students. He was a co-founder and co-chair of Students of Rural Health Aotearoa (SoRHA) and is a past board member of the New Zealand Rural General Practice Network (NZRGPN). In 2018, he was president of the Grassroots Rural Health Club in Auckland.

"Ben has been steadfastly committed and passionate about improving the health and wellbeing of all New

Zealanders living in our rural and remote regions," says former NZRGPN Rural Health Careers Programme Coordinator Esther Maxim, one of his referees. "Under his leadership, SoRHA transformed from a small group of mostly medical students to a large, influential and highly respected organisation that has a seat at many tables."

Ben has a Bachelor of Medicine and Bachelor of Surgery from the University of Auckland. He graduated in 2020 with the Rotary Club of Auckland Award for the most distinguished medical student, taking into account personal qualities and all-round abilities.

His referees speak of his leadership skills, tenacity, firm sense of social justice and desire to give back to the community. These attributes, along with his commitment to rural New Zealand, date back to his high school days at Ellesmere College in the small town of Leeston on the Canterbury Plains.

Ben also advocated on behalf of student mental health and climate change issues while at Auckland. In 2019, he was Vice-President External of the New Zealand Medical Students' Association.

At Oxford, Ben wants to study for a Master of Public Policy and Master of Science in Evidence-Based Intervention and Policy Evaluation. "This combination of programmes would enable me to support the development of an evidence-based health system that perpetuates equity and empowers tangata whenua and tauiwi," he says.



Innovation in The North



Dr Giles Chanwai

In 2019 General Practices in Kaitaia withdrew overnight services provided to the community at Kaitaia Hospital after finding it extremely difficult to recruit and retain staff in primary care.

This withdrawal resulted in our Senior Medical Officers (SMOs) providing overnight on-call service to GP patients as well as their regular workload.

With the additional primary care patients, the SMO workload doubled, making their roster unsustainable.

Night shifts in Accident & Medical for nursing staff had the potential to be daunting, even scary, with the prospect of anything coming through the doors at any time. In addition, with only one registered nurse rostered from 10 pm - 7 am and no doctor on-site, the nurses felt isolated and unsupported.

The clinical nurse manager of the General ward at Kaitaia Hospital, Rachel Thompson, said their situation needed to be addressed quickly.

"Our options were to keep the status quo, change shift patterns or find a solution outside the square."

Meanwhile, operations manager Neta Smith was contacted by Dr Giles Chanwai, a staff member from Emergency Consult (EC) who had iwi connections to the Far North. Dr Chanwai came and met with a small team, and an instant relationship developed. He explained how their company worked and what services they provided, and together they merged their services with the Hospital's needs and developed a plan to begin a trial.

Neta was acutely aware she needed to help our doctors, and the trial was planned to start at the end of January 2020. Not all staff were enthusiastic about it until they saw the benefits of the initiative.

The trial was designed to run from 11 pm to 8 am seven days a week. For the first month, EC saw Triage 4 and 5 (low acuity) patients only and would See, Treat and Discharge or See, Treat, Observe and then Discharge.

After a month, this progressed to include seeing Triage 3 patients. The EC doctor would contact our SMO and hand the patient over if they felt they were too unwell and needed to be seen in person.

The next plan was to Discuss Triage 1 and 2 patients and be a second pair of eyes and support during resuscitation. Meaning added support for the nursing staff before the arrival of a doctor (which can take up to 20 minutes).

Unfortunately, this has not yet occurred partly due to all the interruptions with renovations and COVID-19.

We have recently included EC in our surge planning and will use it during working hours to help clear the waiting room.

The advantages of EC are real-time and reduced waiting time for patients, and parallel processing, immediate plans, decision support, reduction in doctor's unsustainable workload.

"This has placed EC in the rural arena, and for Kaitaia Hospital, we have promoted workforce longevity," said Rachel.



The team at Commerce Central get into the Christmas spirit



Going Above and Beyond

Nurse Practitioner Fiona Bamforth in Action

Doing whatever it takes to Care

This image of Nurse Practitioner Fiona Bamforth in action is an example of what lengths the team at our Whangārei Hospital Eye Clinic go to, to ensure the people of Northland get the service.

Fiona had to examine the patient with age-related macular degeneration using an indirect microscope from the floor. Her patient had a neck injury and recently had surgery, making examining using the slit lamp impossible.



Shane Stanners

Sir Shane

When the NASC (Needs Assessment & Service Coordination) team at Commerce Central in Whangārei moved directorates last year, they were supported by business manager/analyst Shane Stanners from the Rural, Family and Community Health Directorate, who created a process that streamlined their referral, triage and allocation to allow for more accurate data reporting. The team was so impressed that they renamed him 'Sir Shane' and wanted to make sure that he knew how much they appreciated his amazing work.

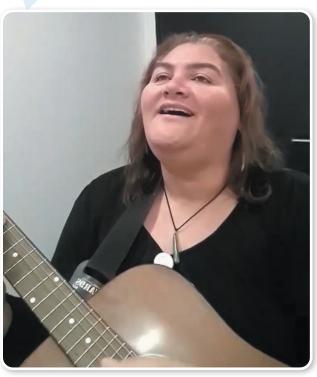
Music to Lift Our Spirits

Anyone who tuned into the Northland DHB Facebook page or staff Facebook page during the start of the August Lockdown would have had their day brightened by Kaiāwhina Mereana Pou who posted a daily waiata on her Facebook page and kindly let us share it to our platforms.

Another talented staff member Dr Lincoln Nicholls and his wife Nora penned and created a video for their waiata 'Vaccinate Everywhere'. Like the video, it travelled far and wide, entertaining and spreading the message of vaccination importance throughout the country.



Dr Lincoln Nicholls



Mereana Pou

New Year, New Chapter



Sandy Bing

After 59 fabulous years of hard work, including 18 years at the reception helm of Whangārei Hospital's Outpatients department, receptionist Sandy Bing is feeling rather anxious about giving it all up to retire.

Sandy started working as a cadet at the Railways in Whanganui two days after her 15th birthday. She had her first daughter four years later. However, maternity leave wasn't a thing back then, but thankfully, her mother supported her with childcare and Sandy continued to work until her second daughter was born three years later.

When her husband was offered a job in Auckland, the family headed Northward, and he built specialised yachts for the One Tonne Cup and other notable races, which Sandy said was a really exciting time.

Homesickness took the family back to Whanganui, and Sandy returned to the Railways, and she hasn't stopped working since.

She moved to Northland to be closer to her sister, which led to an 18-year role at the Pathology Laboratory in Whangārei. This is where she found her calling to help people after seeing so many anxious people come in for blood tests.

"It became my mission to make people feel comfortable and happy about having to come in. I took that with me when I came to Whangārei Hospital in 2002 because, let's face it, nobody wants to be here. I truly feel you get back what you give — if you're grumpy, people will be grumpy back."

She started working on the front desk on the fifth floor for Orthopaedics. Then moved downstairs to Outpatients, where she remained until late last year when the Department moved upstairs.

"I wasn't overly happy at first because I loved the hustle and bustle down there. But I had to suck it up and get on with it. When I looked at it, I realised I was fortunate to be with such a nice group of services, including Medical, Cardiology, Rheumatology, Gastroenterology, Respiratory, and Procedures. It turned out to be just great."

Sandy said although several people had been here since she started, there have been a lot of new faces and change over the past 19 years. When she started in Outpatients, Oncology was based there. Sandy said she wasn't sad when the Service moved to Jim Carney Cancer Treatment Centre because dealing with so many very sick patients was often quite stressful.

Sandy said the doctors she works alongside are so innovative. Implementing the Fast Track Clinic Service has been wonderful for patients.

"They come in for an appointment, do all their tests and they will get a final result on the day. It's so much better than having to go home and wait for a few weeks to hear. It's very impressive."

Plaster Technician Noel Johnson is someone else that has impressed Sandy so much that she worked with Rotary to give him their Vocational Service Award for all the work he does.

"It was funny we had morning tea with him and had to covertly ask him all these questions to give Rotary some background on him. He had no idea he was up for an award. He really deserved it."

Other adjustments have been the booking girls moving to other areas around the Hospital and not having to send angiograms down to Auckland because of the new Cardiac Catheter laboratory opening, which has been exciting. The increased use of Telehealth has also meant there are fewer patients in the ward.

Sandy wanted to acknowledge her workmates across the board, including the Surgical and Orthopaedic teams and the Gynaecology girls, because she has enjoyed them all.

"This has been a wonderful job for me. I've met some fabulous people - doctors and patients, and it has been my saviour."

Sandy said that because she is a very regimented person, she will miss having a routine and hopes to get into some volunteering in the New Year after a rest at Christmas.

Aside from working, she has also been an avid sportswoman and is looking forward to turning her hands to new sports, including table tennis and maybe even bowls with others from her community at Waikaraka. She and her partner, Colin have a launch which they plan to spend more time on, and she is looking forward to spending more time with her Grandsons Finn and Campbell, and daughter Leanne, who live in town and maybe getting back to Perth to see her other daughter Kirsty.

If it weren't for COVID-19, she would have returned to Scotland for a trip where her father was from but plans now to become a grey nomad like everyone else in their motorhome when it's safe to travel.

When she leaves us on 16 December, her kind, smiling, and familiar face will be truly missed by so many people who have come through our doors to find her ready and waiting to assist them.



A Groundbreaking Career



Dr Win Bennett and some of this year's medical students at his farewe

It is not until you delve into the career of Dr Winfield (Win) Bennett that you realise how often this humble man has been at the helm of some of New Zealand's most important health organisations and medical programmes.

The young Win Bennett left his hometown of Christchurch in 1965 to study medicine at Otago University and graduated 50 years ago this month earning a Bachelor of Medical Science along the way. He chose Auckland for his final year at Medical School because he had never been there, and the following year moved north with a group of friends from the class to work as house surgeons at Whangārei Base Hospital.

Among this group was Dr John Karalus (Kobi) who shared with Win the inaugural role of medical registrar at the Hospital.

The pair eventually went into general practice in Kamo and later joined with Dr Loek Henneveld and the three of them set up practice in Station Road. Win continued to work for 20 years in the practice and thoroughly enjoyed the experience.

"The privilege of general practice is getting to know patients really well and building trust over time. In those days there were few formal training opportunities and we were dependent on colleagues for support and to develop the art and skills we needed."

During this time, Win married Wendy and together they raised five children.

Win and Wendy decided they needed a change and moved to Wellington where Win became the first medical director of PHARMAC during the organisation's formative years.

"It was an exciting and groundbreaking time setting up the new institution and developing new policy and operating procedures.

"Some highlights were winning multiple legal challenges which included a case argued in the Privy Council in London and surviving an intense publicity campaign, called 'Mayday', driven by the pharmaceutical industry."

Win also met two of his biggest influences while working at PHARMAC. The organisation's first general manager David Moore, an economist who taught him how economists think and what they had to offer in improving health.

The other key influence was respected Māori health and education leader Rob Cooper (Ngāti Hine), who Win said persuaded PHARMAC to do better things for Māori and was also a significant influence on the Health Funding Authority (HFA), where Win moved to

after PHARMAC. The HFA was a national organisation that replaced the four Regional Health Authorities. At that time the Ministry of Health (MOH) was in charge of policy, and the HFA looked after all the funding.

"That was a senior operational job and the HFA was a wonderful place to work and had great leadership." Unfortunately, the Authority only lasted a couple of years before being dissolved when health funding moved back to the MOH.

Win said it is funny how things go around in circles because he sees the HFA format being played out again in the new health reforms.

After HFA, Win took on the role of director of Funding and Planning at Capital and Coast District Health Board and remained there for four years before relocating to Hawkes Bay District Health Board to be Director of Planning, Funding and Performance.

Both roles were interesting yet challenging, and provided opportunities to improve primary care delivery, especially to high need populations.

During this period Win chaired the Committee that developed the then, new Primary Health Care Strategy (PHCS). Win also chaired for several years the Primary Health Organisation Service Agreement Amendment Protocol (PSAAP) Committee which negotiated the development of the PHCS with general practice.

With retirement on the horizon, in 2009 Win and Wendy decided to move closer to two of their five children living in Whangārei. Win took over from Dr Loek Henneveld as academic coordinator for the newly created Pūkawakawa Programme.

The pioneering Programme was a partnership between the University of Auckland's Faculty of Medicine and Health Sciences and the Northland District Health Board (Northland DHB). It began in 2008, offering 20 (this later increased to 24) year five medical students the opportunity to gain experience in regional and rural health.

During their year in Northland, each student worked with different specialities in Whangārei Hospital. Win said for most students the high point is seven weeks spent in a rural environment (one of Dargaville, Kaitaia, Bay of Islands or Rawene Hospital) experiencing rural general practice, rural hospital care and community health.

"I had always been interested in student education, and this looked like a good opportunity that fitted with our retirement plans.

"When I took over as academic coordinator, the Faculty of Medical and Health Sciences, University of Auckland and Northland DHB had already done an excellent job of setting it all up and all the hard work had been done."

Win worked part-time in this role and part-time as GP advisor for the Northland DHB with Dr Diane Davis.

After six years, he decided to reduce his workload to two and a half days a week, which he said didn't always work out because these roles don't have boundaries. However, he said Pūkawakawa continued to be an exciting journey and great fun.

"The programme has had outstanding leadership from Professors' Warwick Bagg, Phillippa Poole and Alan Merry. They have to take a lot of the credit, as well as all the teachers in Whangārei Hospital and rural areas who do a great job."

After five years, we took on the trainee Intern cohort, which has been built up to include 20 interns per year. There are now up to 45 students a year involved in the two Programmes.

"The students are a great source of inspiration and are becoming more diverse and better reflective of the population. We are going to have some great young doctors in the near future, which is exciting.

"They will all be excellent doctors with excellent training, compared to when I started - it would be great to go back and start again.

"We're starting to see more students from the North go to medical school and return to work here — all of which is very rewarding. The Programme is good for Northland, Northland DHB, the University, Medical School, and the students who give us lots of hope for the future, despite all the issues in health."

Win said another exciting element of Pūkawakawa is the relationship with Te Poutokomanawa Māori Health Directorate at Northland DHB.

"This has been very successful, and we are very grateful for the support they have given to the students and the programme."

The Programme's success has led to similar programmes starting in the Bay of Plenty and Taranaki. In August 2018, Win was appointed by the Minister of Health to the Advisory Panel for the Health and Disability Review.

Win was farewelled in early December and said the event was great fun and very humbling.

He said retiring is a process rather than an event, and he has been moving along the lines for the last ten years or so.

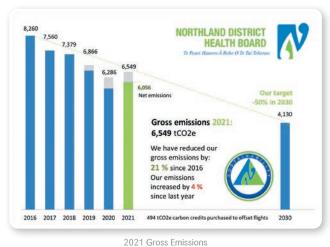
Win and Wendy have just bought a new home with a large garden, so they have plenty to keep them busy. They have a motorhome and will have trips away. They love their multitudes of grandchildren and children and hope to spend some time with them over the Christmas/ summer period.

Whangārei GP Dr Aniva Lawrence, a graduate of the Auckland medical programme, will take over from Win as the University of Auckland academic coordinator at the Northland Clinical Site.





Sustainability and Carbon Reporting





2021 Northland DHB Carbon Emissions [tCO2e] Flights staff Emissions 2021: Waste to landfill Refrigerants

2021 Northland DHB Carbon Emissions

The Northland DHB has a 2030 target to halve emissions by 2030 compared with 2016. This means lowering the emissions from 8,260 tCO2e in 2016 to 4,130 tCO2e in 2030.

Looking at the progress over the last five years, we are on track to meet these targets and operate below the yearly allocated carbon budgets by focusing on areas such as large emission sources, and transitioning away from the use of natural gas combined with energy efficiency measures and fleet conversion.

An energy transition roadmap has been developed supporting this transition.

The most significant increase in waste was from Whangārei Hospital. Besides an increase in activity and Covid implications, there was also a lot of construction waste from the building projects.

Northland DHB received \$4.3 million in funding from the state sector decarbonisation fund to convert half the fleet of 300 cars to electric vehicles and install charging infrastructure. To further support the sustainability and emission reductions effort the DHB has approved the creation of a Circular Economy & Waste Minimisation role.

Also, Desflurane has almost been phased out, and syringe recycling and single-use medical device reprocessing have been introduced.

Patient and staff air travel is offset with carbon credits and last year Northland DHB was awarded the Health Care Climate Challenge Gold Award for emission reduction efforts in energy.

Northland DHB's emissions for 2021 were 6,549 tCO2e. This is four percent higher than 2020 but 21 percent lower than the benchmark year 2016.

Theatre Hats for All



Our theatre nurses, healthcare assistants and anaesthetic technicians have joined the anaesthetists in switching to personalised hats thanks to a quality initiative to support teamwork in the operating room.

The initiative aims to improve communication and patient safety and follows an international trend #TheatreCapChallenge and qualitative data that suggests hats help identify roles and improve morale and team performance.

Project sponsors, Clinical head of Anaesthesia, Jo Coates and surgeons Mike van Niekerk and John Lengyel provided funding for the 370 hats to be made and labels created.

Project organiser Ulrike Gerstenberger was able to find a local woman to make the hats, using a set of Kiwiana fabrics that staff got to choose from. The name labels were colour coded according to the roles to help with identification.

Ulrike has received lots of positive feedback from everyone, including new staff, who have found it much easier to address colleagues by name and the coloured label helps identify the roles.

Getting Vaccinated a 'no-brainer' for Maungaturoto local



May Seagar

For Maungaturoto local May Seager, getting vaccinated against COVID-19 "just made sense".

"I'm proactive when it comes to health because I've lost members of my family who could've lived for longer if we'd had more knowledge," she says.

May lost her 56-year-old grandmother to cervical cancer when she was 10 years old.

"She was basically my mum. I lived with her and she adopted me. It had a huge impact on me when she died. I didn't realise what she'd died of until I was 30 and we found her death certificate. My doctor had been telling me I needed to have a cervical smear, and once I read that piece of paper I had it done. And when they did my smear, I had abnormal cells and had to have laser therapy. I was only 32 at the time, and a mother of two. If I hadn't had that smear, my story could've been very different."

It wasn't May's last encounter with cancer.

A mammogram when she was 45 revealed breast cancer. May had a mastectomy, but in 2017 the cancer returned, and May continues to battle advanced cancer, which has left her immune-compromised.

She has also lived with chronic asthma for 10 years, following a chest infection.

Health issues have affected May's family, too. She lost a baby, had two premature daughters, and her stepson had encephalitis, an inflammation of the brain that led to long-lasting effects. Her husband's family has a history of prostate cancer, and he gets checked regularly.

"Health is a big thing for us."

When it came time to get the COVID-19 vaccine, May says, "It was pretty much a no-brainer for me to go and have my vaccine. But it's not just for myself. My Mum has COPD

[Chronic Obstructive Pulmonary Disease – a severe lung disease] and if I want to visit her, I should be keeping her safe."

May also wanted to help protect vulnerable people in her local community, where she's lived for 25 years.

"There's a lady who just turned 95 in my church group, and we love her to bits. You've got to think about people like that – our friends and whānau who are vulnerable."

Part of protecting the community is about preserving our quality of life, our culture, and the way we connect with each other, May says.

"I'm a Cook Islander, and Pacific people are all about getting up close and 'kanohi ki kanohi'. The way this pandemic makes us live is contrary to the way we naturally operate, and that's very difficult for us.

"Also, I want to be able to walk down the road and not have to take a wide berth from the person coming the other way. I don't like that. I don't want to be worried about who's coming around the corner – have they got it, are they going to cough at me? I don't want to have that fear in my life, so I'd rather be vaccinated."

May is also aware of the impact COVID-19 could have on health services. Because of her health issues, she's been involved in several consumer groups that give advice and insights from a patient's perspective to healthcare organisations to help them provide better care. She has worked in this capacity with Northland DHB, Northland's primary health entity Mahitahi Hauora, and the National Cancer Control Agency Te Aho o Te Kahu.

"What would our quality of care be like if a lot of people ended up in hospital with COVID-19? All those poor overrun staff struggling to cope ... I don't want to contribute to that."

May had heard some of the fears about the vaccine from family and friends who had been swayed by misinformation circulating in their communities.

"It's disappointing and frustrating that really smart people can get easily swayed. It's important that people get the right information so they can make up their minds for themselves," she says.

Despite her health conditions, May had no problems when she got her vaccine.

"It was fine. The staff were fantastic. I was a little bit tired the next day and I had an itchy arm but that was about it."

May and her husband are both fully vaccinated, and all four of May's children have had either their first dose or both doses.

"We're all keen. I think my family want to protect me, too. They've heard the messages – do it for yourself, do it for your whānau, do it for your community."

*95 percent of Northland's eligible Pacific population have received at least one dose of the vaccine and 85 percent are fully vaccinated at the time of printing.

National Bowel Screening Programme Rolled Out in Northland



Pitotori (Peter) Naera, Northland Bowel Screening Programme Champion, & Stuart Selkirk, Northland DHB Health Promotion Lead for the Northland Bowel Screening Programme

On 2 November this year, the National Bowel Screening Programme began offering free bowel screening to around 36,000 residents, potentially detecting 44 cancers in the first year, here in Northland.

Eligible people, aged 60-74 years, will be sent an invitation to screen every two years. Invitations will arrive around the participant's birthday, with half of Northlanders being invited in the first 12-months of the programme, and the other half in the year following.

Those eligible will receive a simple test in the mail which they complete at home and mail back for laboratory testing. If a test result is positive, they may be invited for a colonoscopy at Whangārei or Kaitaia Hospital to further investigate.

Dr Byron Theron, clinical lead for the programme says that a positive test does not necessarily mean that a person has bowel cancer, but often represents bleeding from polyps.

"Polyps detected during screening colonoscopies have the potential to develop into cancer. These polyps are often removed during the procedure. Therefore, the programme aims to prevent bowel cancer from developing in addition to detecting cancers," he says.

Detecting any potential cancers in the early stages is key to a positive outcome.

Bowel Screening Programme manager Carolyn Jones says that bowel cancer is often curable if it is picked up in the early stages, but chances decrease the longer it is left untreated.

"People who are diagnosed with bowel cancer, and receive treatment at an early stage, have a 90 percent

chance of long-term survival compared to around a 10 percent chance if picked up late," she says.

Screening is for people who are not experiencing any symptoms of bowel cancer. It is important that people of any age with concerns about their bowel health should seek medical advice without delay.

"It is important that they talk to their GP or Māori Health Provider if they have any symptoms," Jones says.

Common signs and symptoms of bowel cancer may include a change in your normal pattern of going to the toilet that continues for several weeks, or blood in your bowel motion. Although these symptoms are often caused by other conditions, it is important to get them checked by your doctor.

A key focus of the programme will be reaching priority populations including Māori, Pacific, disabled, remote and rural participants. To reach these groups the team will be working with many community and health groups including Māori Health Providers, Pacific groups, general practices and community groups.

As part of the promotion for the arrival of bowel screening in Northland, the team's health promotion lead Stuart Selkirk will be bringing a large inflatable bowel to towns and events in the coming months. This will stimulate conversations about the programme and bowel cancer in general and will be used as an educational tool.

To find out more about the National Bowel Screening Programme visit timetoscreen.nz, free phone 0800 924 432 or talk to your GP or Māori Health Provider.

Further information:

- Northland is one of the last DHBs to go live in the country
- Ministry of Health modelling estimates around 44 cases of bowel cancer will be detected in Te Tai Tokerau in the first year
- New Zealand has one of the highest rates of bowel cancer in the OECD
- Around 3000 people are diagnosed with bowel cancer and around 1200 die of the disease in New Zealand every year
- Eligible people are aged between 60 and 74 years, reside within the Northland DHB area and are eligible for publicly funded health and disability services.
- Bowel cancer is the second highest rate of cancer in the country and kills as many people as breast and prostate cancer combined
- Since the National Bowel Screening programme (NBSP) began in 2017, the NBSP has detected over 1000 cancers across the country.

Tū Tira Kāupapa Maori Symposium By Viv Beazley - Tū Tira co-leader



Tē Tira Working Group - Louisa Kingi, Rhys Manukau, Viv Beazley & Bubbie Rapana

Tū kotahi, wehe ka ngaro United we stand, divided we are lost

'We are going virtual', was the message from the working group for this year's Tū Tira Kaupapa Māori Symposium. Being flexible in a changing health environment was key to this decision. Rather than taking the risk of cancelling the kanohi ki te kanohi (face to face) delivery at Semenoff Stadium, the team opted to go to a live webinar on Friday, 19 November 2021.

The annual event sponsored by Te Poutokomanawa Māori Health Directorate and delivered by the Tū Tira Working Group, is targeted specifically for Northland DHB Kaimahi Māori. This year marked the third time the Symposium has taken place and the first time as a webinar through zoom.

"It was exciting but nail-biting for us to navigate this virtual space to deliver another quality programme. We were fortunate to have the full support of Mobile Health to make it happen," said Viv Beazley, Tū Tira co-leader, Te Poutokomanawa.

Listening to feedback from staff in previous years allows the event to be more refined and packed with dynamic kōrero and offers powerful professional development. Our keynote speakers and presenters this year did not disappoint. As in previous years, Pio Terei, as MC and iconic entertainer, provided the familiar humour and connectedness we are used to and brought with him the added bonus of backyard canine vocals.

Heeni Hoterene, a self-confessed mokopuna of Te Tiriti and an environmental activist, led our keynote presentations and guided us through the ebb and flow of the maramataka to increase our productivity and balance. Her insights into maramataka help to make our lives simple.

Dr Matire Harwood was scheduled to present but had to withdraw a week before to support the COVID-19 response in Tāmaki Makaurau. Stacey Daniels (self-described as the 'stand in') was engaging, frank and honest in recalling her journey into learning te reo Māori and leveraging her media experience. Being labelled a 'plastic Māori' at one point did not dampen her determination, nor her aspirations for herself and her whānau.

Our comment to Stacey was 'never a stand-in but always, a standout,' and we are grateful for her swift contribution to our Symposium.

Our last keynote, Mike Smith, gave us a 'speed dating' account of climate change. Being the chair of the Climate Change Iwi Leaders Group, Mike is a champion for working collectively toward solutions to reduce all greenhouse gases, accelerating whānau, hapū and iwi resilience to climate change and building a Māori Climate Network across Aotearoa.

We must acknowledge and applaud our own DHB staff who presented on the day. The depth of their commitment to improved health outcomes, their research, their outstanding talent and knowledge in their areas of interest and mātauranga Māori is heartening and reassuring in these uncertain times.

Viv said they love hosting these events and creating opportunities for our Māori colleagues to learn and grow together in a space designed just for them.

Past events have built unity, lifted kaupapa Māori literacy and encouraged innovation rooted in Māori knowledge and practices. The Symposium also serves a greater purpose in achieving health equity.

A special mention to our working group; Louisa, Rhys, Bubbie and Tracey – thanks, team.

Ahakōa he iti he pounamu Despite being small, you are of great value

In line with the building excitement, co-leader, Tracey, left a week before the Symposium to take on another exciting opportunity. In keeping with her get it done attitude, she worked on the Tū Tira kaupapa right up to the last hour of her last day at Te Poutokomanawa. We also appreciate that Tracey helped set the kaupapa and foundation for this Symposium back in 2018/19.

Acknowledgement goes to our chief executive, Dr Nick Chamberlain who continues to encourage this Māori workforce development opportunity and the executive leadership team who clear the way for kaimahi Māori to attend.

Final thanks also to our general manager Māori, Dr Moana Tane, who was new to the Directorate this year but did not hesitate to support our kaupapa, planning, and our decisions during the year.

Moana describes our aspirations and challenges ahead in the following whakatauk $\bar{\imath}$:

Whaia e koe ki te iti kahurangi; ki te tuohu koe, me maunga teitei

Seek the treasure you value most dearly; if you bow your head, let it be to a lofty mountain.

Final praise goes to our kaimahi Māori who show up and step up continually in service of our people.

Mauri ora!



The Raumati Marae Tour



First timers, Taurus Tau, David Puru and Zion Sanders had all been thinking about getting vaccinated and decided to come along.

Among the pandemic's many challenges, perhaps the one that we find most difficult is our ability to connect with our whānau and friends. Like most things we don't realise just how much we need those connections until they're not gone exactly, but difficult to access.

The changes to the new COVID-19 Protection Framework or traffic light system and the arrival of raumati/summer on our calendar can't come soon enough. Raumati/summer is the season of connection, rejuvenation, relaxation and most importantly, whānau. It's a time to be with our whānau, and the season we most look forward to.

But before we can celebrate, there is still work to be done and that's where the Raumati Marae Tour or the Summer Marae Tour comes into its own.

Te Poutokomanawa, the Māori Health Directorate of Northland DHB has partnered with marae across our rohe and like-minded health providers to support whānau to get their COVID-19 vaccinations.

Directorate general manager, Dr Moana Tane, says this tour may not be the music tours we'd like but staff are rock stars none the less.

"Our kaimahi have worked hard to protect our communities and offer whānau the chance to be vaccinated before their whānaungā return home," says Moana.

"The North has anxiety about COVID hitching a ride. To alleviate that anxiety, we're working with marae across the rohe to vaccinate whānau."

The oranga whānau events on the Raumati Marae Tour were held across Hokianga and Pewhairangi, Waipoua, Takiwira and whānau marae, west of Whangārei during December 2021. Trained personnel were also there to answer any questions whānau or individuals had.

The tour included travel to as many local marae as possible to manaaki whānau with live music, kai, rongoā giveaways, marae incentives and positive vaccination kaupapa.

Moana said it was a celebration and a thank you to those coming to get their vaccinations.

"We appreciate how difficult the decision to vaccinate may be, so manaaki is a big part of our efforts to keep whānau safe. So, let's celebrate the fact that they're here."

The running total so far from this tour and the first Raumati Whānau Drive-Through COVID-19 Vaccination event in November is nearly 900 people vaccinated. Tu meke!



Mahitahi Hauora:

The Year in Review



Year in a snapshot

While I was only with Mahitahi for a few months of the 2020/21 annual reporting year, when I joined the team in March 2021 it was very clear the challenges primary health care and our whānau and communities across Te Tai Tokerau continue to face. However, what is also clear to me are the opportunities and strengths within our communities as well, which are plentiful.

Any review of the 2020/21 year must include thanking my predecessor Phillip Balmer for all of his hard work laying the foundations for Mahitahi Hauora, and the Board for their support as I've navigated my first six months in the role.

I've also been pleased to understand the Mahitahi Hauora team (many of whom I know from previous roles) still have the wellbeing of whānau as their guiding principle, and have made some great inroads on key areas highlighted in this year's report including:

- Responding to the need for an increased primary care workforce by:
- Leading a nurse practitioner and enrolled nurse training and placement programme, focusing on increasing access for Māori nurses
- Introducing a project focusing on increasing the number of General Practice trainees in our region
- Increasing the support, we provide General Practice through our Improvement Partners and POADMS (Primary Options Acute Demand Management Service) programme of work
- Continued programmes of work in our community including keeping homes warm and dry (Manawa Ora, Healthy Homes), funding for community kai projects (Kai Ora) and our Smoking Cessation mahi
- And making sure we put 'what matters to whānau' first by addressing some of the key areas of health that matter to them including:

- Tailoring primary mental health services to the wants and needs of Taitamariki in our community
- o Protecting our young wahine Maori by funding a pilot to introduce HPV self-testing in Te Tai Tokerau

But of course, that doesn't mean there isn't more work to do or areas we can improve on in supporting whānau and the community or our primary health care providers more, or better.

Our focus for the year ahead will be continuing ensuring we're supporting whānau and our community, along with primary health care providers through:

- Supporting better access to COVID vaccines for those who need it, especially our Māori whānau
- Navigating primary health care providers through the health reforms and ensuring we all capitalise on the changes in the best interests of our whānau and communities, including the development of locality networks
- Continuing to respond to the challenges our primary health care workforce is facing, especially for General Practice

You can find our full annual report and details on our proposals and plans for the future on our website at Providing support for primary health care across Northland - Mahitahi Hauora.

Ngā mihi

Jensen Webber, CEO



Year in a snapshot



Christmas Giving

Looking for a meaningful koha (gift) that can keep on giving? By gifting a donation to Northland Community Foundation on behalf of your family or friends you're able to provide something of real value for Te Tai Tokerau.

Through the Northland Community Foundation's smarter giving model, your gift will be continually reinvested to make an ongoing difference year after year.

If you would like to provide koha directly out to a charity or cause of your choice, they can organise this too.

So, contact them if you would like to make a meaningful Christmas koha this year for Tai Tokerau, and they can send a gift certificate out to you to share with your loved ones. https://northlandcommunityfoundation.org.nz/giving/christmas-giving/

Support a Small Business

With COVID-19 putting pressure on our small businesses over the last two years, they need your support. Make a conscious effort to shop locally and purchase something that has been made here in Te Tai Tokerau. We have so many talented craftspeople producing beautiful clothes, art,

furniture and they are all looking for customers. There are several local Facebook pages that offer ideas on where to go wherever you are in the region to buy local.

Gift an Experience

Save yourself time and stress (and wrapping paper) by gifting an experience.

- Hire bikes and do the Twin Coast Cycle Trail Adventure
- Surfing lessons
- Purchase tickets to one of our many Museums
- Buy a concession for the gym, yoga or a golf club
- Check out what is going on at Community Education Whangārei (CEW) and offer a class as a gift - www. cew.ac.nz
- Why not buy tickets to the newly refreshed Kamo Wildlife Sanctuary which is open again

Over and above gifts is spending time with your whānau and friends. Now more than ever, we all realise how important this is and how those memories live with us forever.

Process for Discharging a Senior Patient from our Hospitals

The best place for a person is in their own home, rather than in another new environment and Northland DHB is looking at options to do more to support complex patients to discharge safely and be supported at home.

This has been a gap in our service coverage to date. We do not have capacity in our public hospitals, or in aged residential care, to provide transitional levels of care as we are consistently at full occupancy with patients who are very unwell.

Preparing patients for discharge is an important aspect of the care we provide. We want to make sure that patients are well enough to go home and that they have the support they need to be at home safely.

Patients have to be able to safely manage the basic everyday tasks that they were able to complete prior to admission in order to return home, with other supports provided if necessary.

To ensure this, patients go through a process that includes a full assessment of their functional abilities to identify what support they need with a social worker assessing the home situation and an occupational therapist completing the functional assessment to see if they can manage on their own.

The process may also include a referral to Needs Assessment and Service Coordination (NASC) for allocation of short term or long term supports for eligible patients. Options can include short term home-based support services, equipment, carer support or respite. If a person is under ACC they may be assessed and allocated supports as determined by ACC.

A few points to remember when it's time for patients to go home:

- Patients should be given the form 'Information on Leaving Hospital' which includes a summary of their hospital stay and outlines their recent illness, treatment received and any follow-up care that may be needed at home. The nursing staff will discuss the summary with the patient, their whānau or carer.
- Prescriptions provided by the doctor for the medicines needed and referrals to any services they may need, for example district nursing visits or Meals on Wheels need to be organised as well.
- If the patient does not intend to return to their usual address, check that we have their correct postal address so correspondence such as appointment letters reach them
- If medical or ACC certificates are required, the ward clerk will complete these before the patient leaves hospital.
- Provide the patient with a number to call if they have any questions or concerns once they leave
- Transport ensure the patient has suitable transport home. If a patient is admitted because of an injury, they will require ACC documentation in the form of a Medical Certificate
- St John Ambulance transportation to and from hospital does incur a fee, unless they are transferred between Kaitaia, Bay of Islands, Rawene or Dargaville Hospitals to Whangārei Hospital.

COVID-19 Milestones

As of 17 December, 82% of the Northland eligible population are fully vaccinated against COVID-19, and we expect to reach 90 percent of at least one dose by the end of December.

Nearly 20,000 first doses were administered during October and November. There are now only three and a half thousand more vaccinations needed for the region to reach 90 percent first dose coverage.

This growth is also reflected in the vaccination rates for Northland's Māori and Pacific populations.

Over 93 percent of Northland Pacific people have received at least one dose of the vaccine, and 88 percent of Māori. However, a further 3,985 first doses are needed for Māori to reach the 90 percent mark, which Northland DHB believes is achievable.

In October, nearly 8,700 Māori received their first dose compared to 2,803 Māori receiving their first dose back in July.

Jeanette Wedding, Senior Responsible Officer for the Northland COVID-19 Vaccination Programme, says that she is excited to see the progress that Northland is making.

"Northlanders should be proud of this milestone, and for doing what they need to, to protect themselves and their whānau against COVID-19," she says.

"Over the last two to three weeks, the rate of Māori receiving their first dose has increased greatly. Last week Māori first dose was sitting at 75 percent. Now they are at 80 percent, and fully vaccinated has gone from 63 percent to 67 percent."

In addition, the uptake amongst the Indian community is also excellent, with 92 percent having had their first dose and 87 percent fully vaccinated.

Once the region reaches the 90 percent milestone for fully vaccinated Northlanders, everyone who has received two doses will automatically be in the draw to win a car, proudly supported by Mark Cromie Motor Group.

Jeanette says that the progress is the result of incredibly hard work by the Northland DHB team and their partners across the region.

"This is a huge Northland-wide effort by DHB staff, Māori Health Providers, iwi, general practice, pharmacies and many other organisations, working together to support our communities to be vaccinated. Everyone involved is putting in lots of long hours."

Northland DHB is asking locals and visitors to the region to be prepared for COVID-19 over the holiday period and to have a care plan in place. The care plan should outline what they would do if they test positive for the virus.

Further information and a readiness checklist can be found on the Unite Against COVID-19 website.

Visitors to Northland who test positive will be asked to return to their usual residence if they can travel there safely. If they have taken public transport to Northland, they will need to remain in isolation in Northland for an extended period of time.

Anyone travelling with them is classified as a close contact and will also need to isolate for an extended period of time depending on their vaccination status.

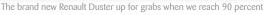
"Our message for everyone, including visitors, is to make sure you are prepared before you come to Northland and get fully vaccinated, get prescriptions filled and bring any medical supplies you need with you.

"With COVID in Northland, we all need to display a COVID QR Poster at home or the bach, so we can trace you if you come into contact with an infected person, mask up, scan in everywhere you go and use your My Vaccine Pass.

"And above all, please, if you're not feeling well, stay home and call the COVID Healthline on 0800 358 5453 to see if you need to have a test."







A Star on our Staff

Te Roopu Whitiora has the Great Kiwi Bake Off 2021 winner on their team, Psychiatry Registrar Dr Albert (Alby) Hailes.

Alby beat 10 talented cooks to win the third season of the baking reality TV show last week after filming nine exciting episodes. Baking and medicine are not Alby's only major talents. He also designs clothes and is working on creating his first cookbook. Alby took some time out of his hectic schedule to let us know how the experience was.

What inspired you to enter The Great Kiwi Bake Off?

Cooking and baking have been a passion of mine for a number of years. I'm someone who always likes to push myself to have new experiences and go outside of my comfort zone. My partner and family encouraged me to enter, and I thought it would be a good opportunity to test my skills in a unique setting.

What was the process like to get on to the show?

I had actually applied to do the first season of Great Kiwi Bake Off, had made it through the audition process, and they were keen for me to be a part of it, but I couldn't get time off from my final year of medical school for the filming. The producer emailed me to let me know they were doing another season this year and suggested I apply. So, I went through the application process, which involved submitting a video, examples of your bakes, having an interview etc. and made it onto the show!

Have you been inundated with media interviews?

I've had a few interviews with radio (Radio NZ, More FM), newspapers, magazines etc., which has been quite full-on, but fun to be a part of.

What was your prize?

It's mostly about the prestige of winning, so the prize is simply a beautifully engraved cake stand trophy and a bunch of flowers.



Alby with Great Kiwi Bake Off presenters and judges

Are your team wanting to sample your goods?

It's fair to say I've been inundated with jovial expectations that I'll be making something for the teams I work with. I've brought a few treats along for Te Roopu Whitiora – they've all been incredibly supportive of me during the show.

Will your cookbook focus on baking or other types of cooking as well?

I'm still in the process of developing the recipe book and in discussions with publishers, so it's an ever-changing process.

While I love to bake, my passion for food extends beyond this, and I have a website and Instagram where I write all sorts of recipes that focus on using seasonal produce and growing your food to produce something delicious. A balanced approach to eating, where the process of growing your food and preparing it yourself from fresh ingredients is a positive way of eating, as opposed to restrictive diets, which can create a toxic relationship with food.

The website is <u>www.treatrightnz.com</u>, and Instagram is @treatrightnz which the book will more than likely be focused on, rather than simply baking.

Where to from here - Back to reality?

I've been getting stuck into my work as a psychiatry registrar since the show. While also working on my recipe book and website on the side. It can be a bit of a juggling act at times balancing the two, but it's important to have passions outside of your work, and I'm trying to find a sweet spot where I can dive deep into both of these realms.



Great Kiwi Bake Off 2021 Winner Dr Alby Hailes

Sock-Sessful Suggestion



Whangārei Hospital laundry assistants Alicia Toki & Charelle Clyde with Chloe Henderson, clinical nurse manager and the some of the socks

When an Endoscopy patient suggested anti-slip socks given to patients following an examination to keep their feet warm, be donated on, rather than getting discarded a plan was put in place to have them laundered and sent to Open Arms Day Centre in Whangārei to give to whānau in need.

Clinical Nurse Manager Chloe Henderson and her team thought it was a great idea and got approval from the infection control team to go ahead with the project.

The Endoscopy Suite give out up to 30 pairs of socks a day to patients. The patients can take them home, however, most decline and those pairs are now sent to Open Arms.

The socks also happen to be red, so will be the perfect addition to the provisions the Centre make up for whānau for Christmas.



ELT joined the Te Reo class on 14 December for a cultural experience paddling in Kahakura, a 26 seat waka, hosted by Mereana Pou



Messages of thanks from our Community

- To all the HCA's at the NDHB you are all magic, especially ward 1 and ED
- I would like to say thank you to my Doctor Jackson and nurses Ian and Lee who were absolutely amazing taking care of me Saturday and Saturday night at A & E you guys were amazing caring and just the best

COVID Teams

Good morning! I wasn't sure where to share this to, but I just wanted to say a big thank you to the beautiful nurses at Semenoff stadium yesterday. They must have been able to tell I was a little nervous, but all of them were such lovely humans and completely put me at ease. Hoping I get the same lovely people for my second vaccination!

The Welcome, the efficiency of delivery and the way your procedures worked at Toll Stadium was outstanding. Congrats to all working there and making it a painless process in all respects. Good job Northland District Health Board thanks for making it easily accessible to all of us that want a vaccination.

Great staff at Whangārei Stadium. Get in before the crowds. Had no problems with my 2 shots. Just a sore arm a few days. So relieved to say I'm done.

Hi there. Had my first jab with you guys today. Your team was fabulous! Thank you.

Big thank you to nurse Andy from the covid immunization team today. I turned up 33 weeks pregnant as a frontline Dr ... stressed and emotional about getting vaccinated and was mortified to burst into tears. My science brain was telling me it's the right thing to do, and my hormonal pregnant mummy brain was freaking out ... and he was lovely, and kind and I got my jab and feel relieved and grateful for the opportunity

Thanks so much to the awesome Covid 19 vaccination team at Okara. Your mahi around providing an excellent service delivering the programme, assistance for people feeling a little nervous or who need more information, with lots of smiles, patience and encouragement is very much appreciated. Both appts I attended have been an efficient, well managed production line and clear instructions, the 20mins wait time was clearly outlined so people know exactly when they can leave after the vaccination. Great job!

Thank-you DHB staff at Semenoff Stadium today. Second Vaccine done and impressed with how lovely and calm you all were. I imagine most of you have been working long days or weeks for a while now as well as your main jobs within the DHB!

Kia ora koutou, on behalf of my older parents, who got their covid jab today, they would like to thank you for your great service and getting them in a tad earlier than expected and squeezing my dad in on the same day. They said you were all smiles and no wait, so thanks for doing your best on challenging times I'm sure. Many thanks for your great mahi

Saved by a Stranger's Hug The Power of Simply Being Nice

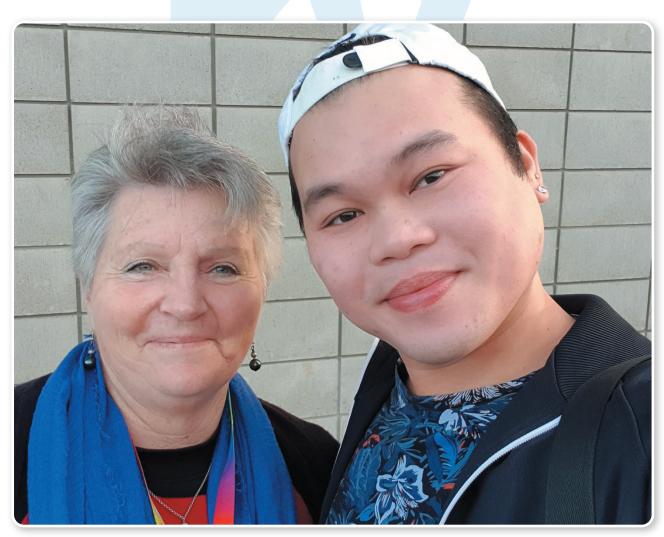
I had the last dose of my covid vaccine today and after I did my vavavoom grand exit from the stadium where they administered the vaccine, I heard and saw a lady chasing me. I looked back and saw this beautiful soul running towards me. She works with the vaccination team. I asked her what she wanted, and she replied, "Nothing, I just feel that I need to give you a hug". We both smiled and without saying anything, we hugged each other. I felt the sincerity and warmth of her hugs and VOILA, 2 tears suddenly started to fall from my right eye. Char! But yeah, I cried.

It felt so good. All that stress, anxiety, insecurities, heaviness and feeling of hopelessness that I had for the entire week was just gone after that 10 seconds hug

from a complete stranger. We smiled to each other and thanked her as I needed that. I was blown away from what happened. Weird yet satisfying. Before we said goodbye as she needs to go back to work, I asked her if I can have a photo with her and she happily agreed. And here she is. She saved me today. I hope to bump into her again one day...

My point here is that being nice is free, so why don't we just be nice to everyone we meet. You don't know what other people are going through. Most of us might be smiling yet quietly fighting a battle. You'll never know, your kindness, smile and that hug is all they really need. Spread love.

BE NICE PEOPLE. BE NICE.



Northland DHB administrator Glenis Campbell and Phillip Haduca



Are you prepared if you need to isolate at home?

If you test positive for COVID-19, you'll need to isolate at home for an extended period of time

Plan ahead and make sure you have everything you need.

For more info and checklists to help you prepare go to northlanddhb.org.nz





