

ISSUE 55  
FEBRUARY 2020

# Health



**2020**  
INTERNATIONAL YEAR  
OF THE NURSE AND  
THE MIDWIFE

## Nurse practitioners improve service delivery

### YEAR OF THE NURSE & MIDWIFE

What you can expect  
from this year

### NEW DIALYSIS UNIT

Hutt based unit providing  
care closer to home

### A DAY IN THE LIFE

A look at Health  
Care Assistants



## From the CE

Tēnā koutou

From surgeons to technicians, each profession working at Capital & Coast DHB is a crucial part of delivering quality healthcare and you are all highly valued.

This year we celebrate the International Day of the Nurse & Midwife, and so the spotlight is on these two connected but very distinct professions. We can all look forward to celebrating and learning more about the work that these people do, through some of those profiled in this issue of Health Matters.

The people featured demonstrate one or more of our new organisational values, launched late last year. It is good to have names for the shared practices I see around me – kotahitanga, manaakitanga and rangatiratanga.

I have noticed many practical examples of our values in action this year. Across CCDHB you have displayed kotahitanga as one team by pulling together for the Aotearoa Bike Challenge – and taking the lead! The team behind Kōrero Mai are demonstrating rangatiratanga through a patient and whānau-centred initiative that better supports their voice being heard. There are examples of manaakitanga everywhere! Most recently it was great to hear about those of you who took part in a sewing bee, crafting items for animals affected by the Australian bushfires.

I encourage you to start thinking about your achievements – big and small – in terms of these values. We all need to recognise our achievements – and we have much to be proud of.

Thank you for what you all do every day.

Ngā mihi

*Fionnagh Dougan*

Chief Executive

## VIEW FROM THE BOARD



Kia ora koutou,

It is my great privilege to be writing to you as the new Board Chair of Hutt Valley and Capital & Coast DHBs.

Throughout my 35-year career, I have had a number of senior leadership roles in the energy and public sectors, and am very much looking forward to the challenges and opportunities of my first governance position in healthcare.

As Chair of two DHBs, I also see the opportunities that greater collaboration will bring for our communities. Since our first meeting in December, we have agreed to hold concurrent, or joint, Board meetings so we can work collaboratively on planning and strategy, and better understand the issues affecting both DHBs. We will also make sure that the respective Boards make time to focus on issues that are important for each of the DHBs individually.

We have made appointments to our subcommittees, which support decision-making across the Boards. We have agreed to run a joint Health Systems Committee, which will be chaired by Sue Kedgley, while 'Ana Coffey will chair the 3DHB Disability Support Advisory Committee. The 2DHB Financial Risk and Audit Committee will have co-chairs, one for each DHB, Roger Blakeley and Wayne Guppy.

I look forward to working with my fellow board members across both DHBs, and with the hugely passionate and talented people working in our health services. By working together we can achieve our goal of building a stronger health system for all our communities.

David Smol  
Board Chair

**Our new Board was confirmed in December 2019. Check out our website for details about new members!**

[www.ccdhb.org.nz/aboutus](http://www.ccdhb.org.nz/aboutus)



**2020**  
INTERNATIONAL YEAR  
OF THE NURSE AND  
THE MIDWIFE

# Celebrating

## midwives and nurses

2020 is the International Year of the Nurse and Midwife. This provides an opportunity to celebrate and acknowledge all nurses and midwives, who make an enormous contribution to the health and wellbeing of the people of Aotearoa.

So what can you expect from this year? There will be grand rounds, visiting speakers, information sessions, and opportunities to advance and develop your nursing or midwifery practice.

All year we'll be taking the opportunity to celebrate our wonderful nurses and midwives through our intranet and social media. You'll hear from leaders, pioneers and trailblazers, and get

to know some of those right at the start of their careers, to give a flavour of the huge breadth and depth of the work carried out by these professions.

There is a national and international shortage of these crucial professionals, so we'll be reflecting on the reasons why, and sharing information about how we're working to overcome these shortages and attract people into these professions.



*Carolyn Coles, Director of Midwifery and  
Emma Hickson, Director of Nursing*

We'll have a particular focus on ensuring greater representation of Māori and Pasifika. We'll be sharing what great career choices they are, with their many opportunities for development.

## MHAIDS nurse supports Samoa

Toe Fiu is a community mental health nurse at Health Pasifika Community Mental Health Team, based at Kenepuru. Of Samoan descent, late last year she joined the Samoa Measles Epidemic mission run by Pasifika Medical Association, Medical Assistance Team (PACMAT).

"I decided to use my skills, knowledge and experience to help educate my community on the importance of healthcare and immunisations.

PACMAT is an NGO with over 7,000 members in New Zealand, Australia and the Pacific region, mostly doctors and nurses of Pacific heritage.

I joined 75 other volunteers on the mission, and it was so important to be working alongside other professionals that had the same goal as me - to provide the Samoan people with love, care and support. Our local

counterparts in Samoa do incredible work.

Working as part of a mental health team of five, I made community visits to provide support to families of patients who died in the outbreak. We also gave support to nurses who were treating measles patients, and I even went on local radio to talk about the importance of immunisation.

Volunteering on this project was a lifetime and career goal, but it also gave me a sense of fulfilment and happiness - that I could say I



*Toe Fiu*

was a part of a team that assisted the Samoan people in their time of need. I would like to thank CCDHB for releasing me to take part in this project."

# Nurse Practitioners improve service delivery

There are now more nurse practitioners (NPs) at CCDHB than ever before. NPs have advanced education, clinical training, and legal authority to practice beyond the registered nurse (RN) level. It is a different scope of nursing practice, and improves service delivery.

CCDHB supports RNs to become qualified NPs through its NP Candidacy Programme. Importantly, this keeps nurses who want to advance in clinical practice – and helps CCDHB retain valuable staff. “We’ve got a commitment to growing our own,” says Helen Costello, associate director of nursing in practice development.

While RNs have degrees and operate under a competency framework, NP training requires a master’s degree, with the last year spent in practicum course under the mentorship of established NPs and doctors. NP candidates also need a minimum of four years’ clinical experience in their area of advanced practice. Finally they apply to the Nursing Council to acquire NP registration.

One recent NP registration is Darcy Stott, who successfully undertook his NP panel assessment at the Nursing Council this year. “Initial thoughts of relief have now been taken over by the realisation of how big an achievement it is,” says Darcy. “I am very proud of what I have achieved for myself and my family.”

“They’re very much nurses, but combine advanced nursing therapeutic knowledge with other skills, including clinical reasoning, to diagnose and plan neonates’ care,” says Helen. “Darcy can now be part of the registrar rota and independently use a wider range of assessment and treatment interventions, order and interpret clinical investigations, prescribe medicines and admit and discharge patients from hospital.”

While NPs work across CCDHB, including in the community, NICU has the highest number, with four established, one due to gain NZ registration shortly, and another in training. “The quality of the unit depends on the quality of the nursing staff,” says Vaughan Richardson, NICU clinical leader. “Developing NPs helps increase the standard and consistency of care.”

“It’s a good example of a service that’s changed its approach to use NPs as an increasingly large part of the team,” says Helen, who works with service areas to help assess whether the NP pathway is right for them.

*Nurse practitioners with NICU and senior nursing staff*



# FOLLOWING LEILANI'S MIDWIFERY JOURNEY



This year we'll be following graduate midwife Leilani Va'a on her journey as she strengthens knowledge of her profession and builds connections with her peers during the International Year of the Midwife.

Leilani had always been drawn to midwifery. "It began when my mum became a midwife, and I got to see first-hand the joy she gained from it. That planted a seed in my head," she explains.

But it was more direct experience that made up her mind. "It wasn't until I got to experience pregnancy and birth with my own daughter that I decided it was the career path for me. Despite being a young māmā and the pressures that can come with that, I had an amazing pregnancy and birth experience - my midwife made me feel comfortable and provided me with amazing support that I'll always be grateful for."

This year Leilani joins seven other graduates on CCDHB's year-long graduate midwifery programme, which provides them with education, clinical practice and support from midwife educators. The hope is that at the end of the year graduates stay working in Wellington, either in one of its hospitals or as a lead maternity carer (LMC, or community midwife).

"We need more Māori and Pacific Island midwives in our community - we've got a shortage. So we're always particularly excited to welcome Pasifika graduates like Leilani to



*Graduate midwives with Anne Ofsofke (back) and Kath Boyle (right) in the atrium of Wellington Regional Hospital*

CCDHB," says clinical midwife educator Kath Boyle, who is one of a small team supporting the graduates.

Kath, who's been involved with the programme for 11 years, hopes Leilani and her fellow graduates will build relationships and confidence.

"As the year progresses and she meets different challenges, she'll build resilience within herself. Because there will be challenges - we're dealing with birth here. But with the support of her mentors and fellow midwives, she'll progress from competent, to confident."

Meanwhile Leilani aspires to strengthen her practice during 2020.

"I want to be able to provide to other women, what my midwife provided for me - an empowering and positive experience. For me, pregnancy and birth are very special and intimate moments in people's lives, and to be able to share in that experience with them is both a privilege and an honour."

**Keep an eye out for more steps on Leilani's journey, find out more about the programme on the CCDHB website, and find out more about the Year of the Nurse and Midwife on the staff intranet.**



CCDHB staff out and about with their bikes

# LOVE TO RIDE

It's never been a better time to be a cyclist at CCDHB. A second scheme for staff to buy discounted ebikes is underway, and a new secure bike cage is currently being built at Wellington Regional Hospital.

"We want to make it easier for people to have an active commute," says Sustainability Advisor Jay Hadfield. "Cycling improves staff wellbeing and productivity, while reducing transport congestion and providing benefits for the environment. That's why we're supporting staff to get their own ebike, and offering them more options for secure storage."

"It's really exciting watching staff who haven't ridden a bike in a decade, get on an ebike at the demo days."

Laura Garrod of MHAIDS decided to take advantage of the CCDHB ebike discount scheme last year. "I am able to leave home, cycle to work,

change and be at my desk within 30 minutes most days. I rarely have to rely on public transport and feel more independent," she says. "I love my bike and feel I have improved my fitness since starting to cycle."

With the additional motivation of taking part in the Aotearoa Bike Challenge all through February, the hope is that more staff than ever before take up a greener, healthier commute.

The bike challenge is a national initiative in which workplaces compete to get the most people riding bikes. Points are awarded for distance, number of rides, and for



Laura Garrod with her new commuting bike

encouraging others to ride. At the time of writing, CCDHB was leading regionally for the third year in a row.

"Challenges like this really brings people together," said Jay, who organised a group lunchtime cycle as part of the initiative. "There is a common goal."

## CHILDREN'S HOSPITAL UPDATE

The new children's hospital is really taking shape. With seismic framing in place, some of the more striking design aspects are now being installed.

Glazed blue panels are currently being added to the structure, decorated with patterns and symbols which will be visible from inside the building. The custom design combines a dot pattern with images inspired from the natural world and classic Kiwi culture, and was applied using a ceramic silk screen printing process.

The glass units were assembled in Thermosash's factory before delivery and installation onsite. Together they form an energy efficient and seamless building facade. The glass units sit in seismic framing to allow for any movement of the building.

Asymmetric metal fins run vertically the length of the glazing, providing a feathered softening effect to an otherwise functional facade. Elsewhere, coloured glass is selected in a range of bright hues that create

connection with the terracotta cladding of the main hospital building opposite, and give the building a sense of joy.

With new developments taking place every day, we're getting closer to establishing a functional, robust and beautiful children's hospital that not only helps support our children and whānau, but offers them a pleasant space in which to spend time.

Exterior glazing for the new children's hospital

## WELLINGTON HOSPITALS

### FOUNDATION UPDATE

#### Raising \$10 million for children's hospital

Following Mark Dunajtschik's fabulous commitment of \$50 million, the Foundation has been asked by CCDHB to fundraise \$10 million to equip the interior of the new children's hospital. With more than 6,500 individual donations to date, almost \$7 million has already been generously gifted by our donors.

Bill Day, Chair of the Foundation said, "We are incredibly grateful to all our supporters. The new children's hospital will be completely different from anything we've seen before and we are excited to see the building being wrapped in stunning glazed panels. Stencilled with iconic kiwi symbols, the exterior glazing will echo the interior design of the hospital, and having Weta Workshop involved in this process will ensure that it is simply magic!"

#### New furniture for Te Whare Whānau

The Foundation is delighted to have funded a number of items for Te Whare Whānau, which offers urgent

temporary accommodation for whānau from outside the DHB region supporting a loved one in hospital, and is managed by Whānau Care Services at Wellington Regional Hospital.

The new beds, couches, occasional chairs, TV and whiteware appliances all help to make this a comfortable home away from home.

#### Fantastic recognition for ED volunteers

Our wonderful Emergency Department (ED) volunteers were thrilled to win their category of Volunteer of the Year at the Celebrating Our Success Awards in November. They provide practical support by helping to create a positive and friendly environment.

The Wellington Hospitals Foundation is pleased to have provided a team of volunteers in ED since 2010.



Bill Day (left) with the ED volunteer team.

# CCDM: WHAT'S THE PLAN FOR 2020?

## CONTINUE FTE CALCULATIONS

Over 60 additional nursing and midwifery FTE were implemented throughout 2018/19.

## FTE CALCULATIONS

FTE calculations to be undertaken in 16 inpatient areas by June 2020.

## CORE DATA SET

This is almost complete and is being used at all levels of the organisation. Visibility and transparency of all clinical areas has vastly improved.

## VARIANCE RESPONSE MANAGEMENT

- Updated Capacity at a Glance (CaaG) screens throughout the organisation are on the way and currently under development.
- CaaG screens will include real time patient acuity and traffic light system (variance indicator score) to show areas with a mismatch or variance between capacity and demand.
- Review of 'the week that was' – these meetings have commenced and have enabled a review of staffing, acuity, shifts under target, staffing reportable events, forecasts and predictions for the following week and planned leave.

## WORKING IN PARTNERSHIP

Continue to work in partnership with NZNO, PSA and MERAS to achieve safe staffing for our nursing and midwifery staff.

## TRENDCARE

Due to TrendCare improvements, FTE calculations can be undertaken in 16 areas. More calculations will occur as TrendCare accuracy improves.

## MHAIDS

MHAIDS FTE accuracy checks and calculations to begin after 12 months of accurate TrendCare data (from June 2020).

## CONTINUE WITH LOCAL DATA COUNCILS

These have achieved great success throughout 2019 with ward and process improvements.

## WHAT IS ACUITY BASED STAFFING?

Acuity based staffing measures the care patients need based on the nursing or midwifery time required.

FTE calculations undertaken in the CCDM programme require a year's worth of accurate TrendCare data. This takes into account the acuity of patients every day throughout that year as well as the coordination hours, other productive work undertaken (ie patient transfer, patient displacement) and leave requirements of all nursing and midwifery staff.

TrendCare is the national acuity tool that all DHBs in New Zealand use.





It's about our place

# RAINBOW COMMUNITY AND ALLIES CELEBRATE WELLINGTON PRIDE FESTIVAL

Capital & Coast DHB is joining in celebrations for the 2020 Wellington Pride Festival.

The Pride Festival is designed to inspire all to celebrate diversity, inclusivity and creativity – allowing safe expression, encouraging acceptance and supporting lasting relationships between our LGBTQI+ communities and allies.

Creating a positive and safe workplace in which all of our people can thrive, is a key strand of our Supporting Safety Culture programme. We want to be a welcoming, fair and just workplace that values diversity and inclusion, and we want to be able to bring our whole selves to work.

A workplace that is safe for our rainbow community to work in will be safer for our rainbow community service users and patients.

## Get involved in pride celebrations

- We helped to launch the Wellington Pride Festival and a group of us got 'out and about' to walk in the Wellington Pride Whānau Hikoi.
- Several teams are holding 'Rainbow Morning Teas' during the week of 2 March – leading in to the Wellington Pride Parade.
- We will also be hosting rainbow morning or afternoon teas in the coming weeks – watch 'Daily Dose' and the staff intranet for details.

## Pink Shirt Day

Addressing unacceptable behaviours is essential to workplace safety, and has significant relevance for the rainbow community.

CCDHB has participated in Pink Shirt Day for the past few years. Pink Shirt Day takes place on 22 May and is an opportunity to turn the workplace māwhero/pink



Our group at the Wellington Pride Whānau Hikoi

to celebrate diversity, spread kindness, and prevent bullying. It has grown internationally since 2007 when two Canadian students took a stand against homophobic bullying after a student was threatened for wearing pink. How will your team celebrate?

These initiatives are part of celebrating and supporting our rainbow community, and connect with our work to address workplace bullying. We will be introducing our new Creating a Positive Workplace policy and guidelines during May and June, with some great resources to support you to achieve a positive workplace.

## Dates for the calendar



**Wednesday 4 March 10am:** Rainbow Morning Tea – Whānau Care Centre, Wellington



**Wednesday 4 March 2pm:** Rainbow Afternoon Tea – Kenepuru Conference Centre



**Saturday 7 March 6pm:** Wellington Pride Parade



**Friday 22 May:** Pink Shirt Day

Speak up for Safety when you experience or observe discriminatory language or bullying behaviours.

Tell us about what celebrating Pride means to you and share your ideas via [itsaboutourplace@ccdhb.org.nz](mailto:itsaboutourplace@ccdhb.org.nz)

# A day in the life...

## HEALTH CARE ASSISTANTS

Health Care Assistants (HCAs) are the unsung heroes of healthcare. They can be found all over our hospitals, from the delivery suite to theatres, as well as in general wards and in the community.

“They are such a valuable workforce. The nurses really couldn’t manage their day-to-day activities without them,” says Sandy Stewart. Sandy is clinical nurse educator for CCDHB’s ‘Bureau,’ which allocates casual HCAs to departments as needed, while permanent HCAs are attached to wards.

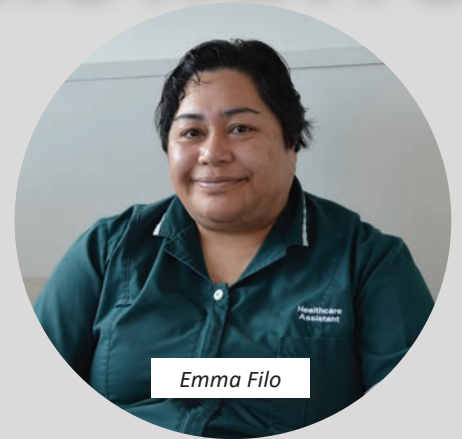
“It’s something new and different every day,” says Emma Filo, one of CCDHB’s casual HCAs. “You have to be prepared because when you walk into a ward at the start of a shift, you don’t know what you’ll be doing.”

Assisting and working closely with nurses and midwives, HCAs carry out diverse tasks including attending to patients’ living cares - e.g. helping them shower and making sure they have enough fluids - as well as routine tasks like answering patient bells and supporting visitors.

Another important part of the role is patient observation and engagement. This involves staying very close to patients who are at risk through frailty, mental health conditions, delirium or dementia, and keeping them safe. Some patients can be quite challenging due to their condition, which can be testing for HCAs, but ultimately Emma enjoys spending time with patients.

“Getting a smile out of patients at the end of a shift is one of the best parts of the job. It’s great when you go home feeling like you’ve achieved something, and looked after a patient really well.”

Part of Sandy’s role is facilitating education for HCAs. There are many opportunities through e-learning and annual core training days, focusing



Emma Filo

on topics such as CPR, emergency management, and working with conflict. “The role has changed over years to offer more opportunities for growth,” says Sandy. “HCAs can even undertake merit steps to become more qualified, which contributes to their feeling of worth.”

“The education is really helpful,” agrees Emma. “I’d like more opportunities for learning and training, to help nurses out and keep the job interesting.”

As well as building trust with patients, Emma enjoys working with ward staff. “Good communication and building trust is really important. Nurses and HCAs make the place run by working together as a team.”



Health Care Assistants

Palliative care staff with international researchers

# PALLIATIVE CARE WORKSHOP FORGES CONNECTIONS

CCDHB ran a one-day palliative care workshop on Valentine's day, collaborating with the Palliative Care Clinical Studies Collaborative (PaCCSC) based in the University of Technology in Sydney, as part of the IMPACCT project (Improving Palliative, Aged and Chronic Care through Clinical Research and Translation).

"The hospital palliative care advisory team were excited to welcome internationally-renowned researchers," said Emma McMenamain, palliative care consultant at CCDHB.

"They were able to share their valuable experience alongside early career researchers, so that those new to research could get guidance on how and where to start."

A key focus was building networks to improving palliative care research in New Zealand. Topics included the importance of conducting randomised controlled trials in palliative care and lessons learnt from the field.

"It was great to see the enthusiasm of clinicians from right across New Zealand wanting to improve the

evidence base for palliative care clinical practice," said Professor David Currow, chief investigator at PaCCSC. "Some exciting new collaborations are likely to grow from this."

"PaCCSC and CCDHB worked together really well to produce a great conference," said Dr Richard McNeill, advanced trainee in clinical pharmacology and palliative care. "I hope this conference will be the boost needed to create the infrastructure to foster research collaboration in New Zealand."

## Staff Compliments

### GYNAECOLOGY AND THEATRE WELLINGTON REGIONAL HOSPITAL

Thank you for the extraordinary care I received. I appreciated the processes of checks and balances prior to and post-surgery, the discussion on the anaesthetic that would be used, the natural light in the operating theatre and the friendly staff. At all times I found communication was clear, informative and helpful. I experienced being 'listened to' and felt heard. This was my first experience of surgery and I came home feeling that I had had the best care from the moment I stepped into the women's gynae clinics to the time I left the hospital after surgery. Thank you for the wonderful team of people you have employed in Gynaecology and Oncology.

### CMU - RESPIRATORY CLINIC WELLINGTON REGIONAL HOSPITAL

[Named staff member] was looking after me. Her personality, humour, attention to my thoughts, needs and feelings was superb. I had to say something because my experience with her was very relaxing, reassuring and I left feeling upbeat. My appointment was more of a relaxing experience that just "I have to go to the hospital again" feeling.

### MARGARET STEWART HOUSE

My stay following a kidney transplant was awesome, everything was there for me, my room was like a motel room. The kitchen was awesome too. The lounge was lovely and I met a lot of people there. Thank you so much to [named] in the office, you helped

me out at times finding things and it was always nice to have a chat with you. My sister couldn't believe how lovely it is to stay there, she thanks everyone so much.



# MHAIDS UPDATES

## Funding announced for

### Te Whare Ahuru

Earlier this month we shared the news of the Government's announcement of capital funding for Te Whare Ahuru.

This is a significant achievement for MHAIDS and is a reflection of the hard work undertaken by many on the Te Whare Ahuru reconfiguration project. Thank you to Rod Bartling and the TWA steering and user groups for continuing to drive this project through many challenges.

We can now look forward to developing a new fit-for-purpose facility that provides for safe, therapeutic and culturally appropriate care and recovery.

## Wellington Co-Response team

### to provide front-line support for

### emergency mental health calls

From Tuesday 10 March, a new interagency pilot will provide emergency front-line support for people who ring 111 requiring an urgent mental health response in Wellington.

The Wellington Co-Response team will deploy staff from Wellington District Police, Wellington Free Ambulance and MHAIDS to attend events requiring an urgent mental health intervention. This team will consist of a police officer, paramedic and mental health clinician.

The new co-response service enables people presenting in mental health crisis to receive the most appropriate response in the right setting for their needs.

The service will mean people in mental health distress can be assessed and provided therapeutic care in a home or community setting, rather than being transported to an emergency department or police station.

The co-response model is the first of its kind in New Zealand, and follows similar international models, which have been extensively evaluated with positive outcomes for service users and agencies.

The co-response service pilot will run for a period of one year, and be rolled out across the Wellington and Hutt Valley regions.

If the pilot is successful, the initiative will become a permanent service and may be extended to other regions.

## Staff profile



### CATHERINE STEWART

Correspondence Officer,  
Office of the Chief Executive

#### *What's your role here?*

I manage the flow of correspondence going in and out of the Chief Executive's office between the DHB, parliament, stakeholders, and members of the public. That includes Official Information Act requests (OIAs), ministerials, parliamentary questions from MPs, and any other correspondence that needs attention. I'm currently working on a new process for OIA responses.

#### *Who's in your team?*

The Office of the Chief Executive is a very new team of four. It was set up to provide support to Fionnagh, our CE and help the 2DHBs to be more consistent as we continue to find ways to work together closely. In the team is Fionnagh's Executive Assistant, Jo Murray, Board Liaison Officer, Amber Igasia, and Nicola Holden, Director of the CE's office.

#### *What's the best part of your job?*

I've only been here just over a month, but the subject matter I deal with is interesting. Everything crossing my desk relates to issues that affect our staff and patients, and I'm enjoying learning more about these topical issues.

#### *Tell us something most staff wouldn't know about you.*

I have just spent the last two years living and working in sunny Glasgow. I have a strong opinion on where to get the best hot chocolate in the Wellington area (Midnight Espresso and Queen of Jackson). I am interested in #vanlife and the tiny house movement and am a big Lady Gaga fan, but think Friends, the sitcom, is overrated.

The Kōrero Mai project team with patient Geoff and his wife Angela (left)



# KORERO MAI SERVICE SUPPORTS PATIENTS AND FAMILIES



The Kōrero Mai service supports patients and their whānau to escalate care when they are worried about a change in a patient's condition, by putting them in touch with Patient-at-Risk nurses.

Angela got in touch when she became concerned about the deterioration of her husband Geoff's health during his stay in hospital. A family member noticed a poster promoting Kōrero Mai and suggested Angela raise her concerns, so she called the Patient-at-Risk service and spoke to one of the Speciality Clinical Nurses.

"I called because I felt our voices weren't being heard. I had raised concerns with the doctor, but I felt I was shut down," she says. "Geoff's health was going backwards, and he was becoming desperate."

The Patient-at-Risk nurse was able to give Angela the time and in-depth information she needed to understand what was happening with Geoff's treatment. "It was good to have someone to listen," says Angela. "The care was great, but things were changing so fast and we weren't always kept informed. I talked through all my concerns with the nurse and she was able to put my

mind at ease. It was as good, if not better, than being there myself."

Following the call, the Patient-at-Risk nurse carried out a full clinical assessment of Geoff. Shortly afterwards, his medication was changed, resulting in a big improvement in his condition.

Both Geoff and Angela really appreciated the extra support offered by the service. "Knowing that I'd been re-checked by such a well-trained and professional senior nurse made me feel well cared for and secure," says Geoff. "It gave extra support and peace of mind for me and my family."

"Kōrero Mai empowered Geoff and Angela to voice their concerns," said Sarah Imray, Patient-at-Risk nurse. "This service provides an extra layer of security for concerned patients and families."

"It was a great outcome for Geoff and Angela, and a great outcome for our staff. The ward staff have

done an excellent job of making sure that patients and their whānau were aware of Kōrero Mai and that is something we should celebrate" said Laura Ellis, Consumer Engagement Manager QIPS.

Kōrero Mai is part of HQSC's five-year national patient deterioration programme, which aims to reduce harm from failures to recognise or respond to acute physical deterioration for all adult inpatients by July 2021.

Now that the first stage of Kōrero Mai has been successfully established in Wellington Regional Hospital it will be evaluated with an equity lens. The evaluation will have a strong focus on the voice of our Māori, Pacific and Disability populations making sure that Kōrero Mai is accessible for everyone.

**To find out more about the service contact Sarah Imray or Laura Ellis.**

# NEW DIALYSIS UNIT WILL PROVIDE TREATMENT CLOSER TO HOMES

**Hutt Valley and Wairarapa patients will soon be able to receive their dialysis treatment closer to home, with the establishment of a new satellite dialysis unit next to Hutt Hospital.**

Recently approved by both the Capital & Coast DHB and Hutt Valley DHB Boards, the new outpatient unit will be located on the Hutt Valley Health Hub on Lower Hutt's Witako Street.

"The dialysis units at Wellington Regional and Kenepuru Community Hospitals currently provide treatment for nearly 150 patients – around 50 of whom live in the Hutt Valley, and four who live in the Wairarapa," said the DHBs' director of provider services Joy Farley.

"Patients typically receive treatment three days a week – for around five hours – and travelling all the way to Wellington or Porirua can be a significant burden for them. This new unit removes much of that burden by allowing them to undergo outpatient dialysis closer to home."

In line with international trends, demand for renal dialysis has been growing steadily across the greater Wellington region. For the past two years, the renal teams at Wellington Regional and Kenepuru Community Hospitals have been delivering more than 420 dialysis treatments each week.

"As well as making it more convenient for many patients, the unit increases the dialysis capacity we already have across the region. This means we will be better placed to meet growing demand in the coming years."

Minister of Health Dr David Clark congratulated the DHBs on their decision to proceed with the new unit.



"This is a great example of our health services finding new ways to make more treatment available now and in the future, and to make life easier for patients."

"With Māori and Pacific people unfortunately being over-represented among these patients, and many living in the most deprived areas of the Hutt Valley, having more accessible treatment will help improve equity in health outcomes across the region," David Clark said.

# Thanks

Special thanks and recognition  
to the following staff

## 25+ Years

Wendy Rudd, *Associate Charge Nurse Manager*  
Laurence-Sinclair Thomson, *Psychiatrist*  
Gavin Lane, *Storeperson*  
Alyson Gillan-Sutton, *Registered Nurse*  
Dagmar Hempel, *Team Leader Anaesthesia Pain Clinic*  
Mark Simmonds, *Cardiologist*  
Lynette McAnulty, *Telephonist*  
Beverly Lawton, *Senior Medical Officer*

## 20 Years

Donna-Miree Graham, *Staff Radiation Therapist*  
Anne Pahina, *Health Care Assistant*  
Georgina Wilson, *Registered Nurse*

## 15 Years

Charmaine Climo, *Clinical Typist*  
Helen Long, *Ophthalmologist*  
Cindy Crowley, *Community Nurse*  
Bharti Jeram, *Human Resources*  
Jonathan Adler, *Senior Medical Officer*  
Wallace Taefu, *Security Orderly*  
Craig Duncan, *Registered Nurse*  
Daniel Watson, *Specialist*  
Lynsey Sutton-Smith, *Clinical Nurse Specialist*  
Iuta Hope, *Mental Health Support Worker*  
Kanak Kishore, *Clinical Physiologist*  
Naomi Radburn, *Clinical Typist*  
Adam Sims, *Consultant Psychiatrist*  
Clarissa Ventress, *Operations Manager*  
James McGiven, *Cardiothoracic Surgeon*  
Bettina Reichelt, *Associate Charge Midwife Manager*  
Paula Jones, *Occupational Therapist*  
Anais Ashbey-Rendell, *Staff Medical Radiation Technologist*  
Sheryl Matthews, *Community Administrator*  
Lutui Logologo, *Health Care Associate- casual*

## 10 Years

Elizabeth Andrews, *Grade Radiation Therapist*  
Rebecca Solomon, *Social Worker*  
Nadine Martin, *Administrator*  
Jared Wright, *Medical Records Administrator*  
Gabrielle Driscoll, *Nurse Practitioner*  
Kate Adam, *Team Leader, MHAIDS*  
Alan Hunter, *Driver*  
Michele Love-Gray, *Care Manager MHAIDS*  
Paul Young, *Specialist*  
Mohammed Irshad, *Accounts Assistant*  
Roger Moore, *Community and Justice Liaison Nurse*  
Melanie Simon, *Social Worker*  
Hazel Almeida, *Registered Nurse*  
Jennifer Davies, *Community Nurse*  
Raewyn Haenga, *Social Worker*  
Julie Millar, *Surgical RMO Coordinator*  
Christine McCully, *Liaison Nurse*  
Gitta Majumder, *Registered Nurse*  
Inakura Tengar, *Mental Health Support Worker*  
Katherine Walden, *Administrator*

## 5 Years

Jayde Ratana, *Health Care Assistant*  
Katrina Albano, *Registered Nurse*  
Marisa Bey, *Pre-treatment Supervisor*  
Kelsey Lane, *Staff Radiation Therapist*  
Chelsea Goodes, *Staff Radiation Therapist*  
Thomas Dorreen, *Medical Records Administrator*  
Michelle Batac, *Registered Nurse*  
Louise Goossens, *Senior Medical Photographer*  
Donna Wylie, *Nurse Coordinator*  
Beverly Scott, *Nurse Coordinator*  
Ance James, *Occupational Health Nurse*  
Mary Hewitt, *Service Desk Support Analyst*

Anthony Murray, *Service Desk Support Analyst*  
Sarita Sharma, *Enrolled Nurse*  
Gregory Lines, *Registered Nurse*  
Stephanie Reyes, *Registered Nurse*  
Anup George, *Consultant Haematologist*  
Heather Brown, *Nurse Coordinator*  
Elizabeth Sommer, *LEAP Nurse*  
Lauren Sole, *Registered Nurse*  
Donna Muir, *Community Team Midwife*  
Sarah Francis, *Physiotherapist*  
Abin John, *Registered Nurse*  
Susan Hunt, *Senior Clinical Psychologist*  
Jane Shaw, *Health Care Assistant - Casual*  
Jade Walker, *Social Worker*  
John Suckling, *Management Accountant*  
Liberty De Jesus, *Registered Nurse*  
Lauren Garcia, *Registered Nurse*  
Geoffrey Carden, *Specialist*  
Cleo Jay, *Social Worker*  
Terriane Cripps, *Registrar*  
Michelle Adams, *Specialty Clinical Nurse*  
Kimberley Fox, *Registered Nurse*  
Annie Locsin, *Registered Nurse*  
Jennifer O'Callaghan, *Occupational Therapist*  
Kimberley Barrow, *Registered Nurse*  
Lisa Bosman, *Registered Nurse*  
Leon Huang, *Registrar*  
Andrew Davies, *Respiratory Physician*  
Steven Pardoe, *Supervising Electrician*  
Janet Satherley, *Senior Medical Radiation Technologist*  
Heike Schoenfelder, *Radiographic Assistant*  
Jessica Sejalbo, *Registered Nurse*  
Leslie Charles, *Occupational Therapist Support Worker*  
Arnie Valencia, *Registered Nurse*  
Estelle MacDonald, *Clinical Psychologist*  
Lydia Chan, *Registrar*  
Sarah Sparks, *Radiologist*  
David Tripp, *Clinical Leader*

# NEWSinBRIEF



## COVID-19 (Coronavirus)



### Goals of Care

Goals of Care encourage clinicians to think about a patient's prognosis and likely response to treatment, and to determine what treatment options are most important for that person.

At CCDHB, the Goals of Care work area now has an updated form and policy, as well as additional tools and resources.

Find out more by searching 'Goals of Care update' on the staff intranet.

### What you need to know

There are still no confirmed cases of COVID-19 in New Zealand, however, we continue to prepare for any eventual cases.

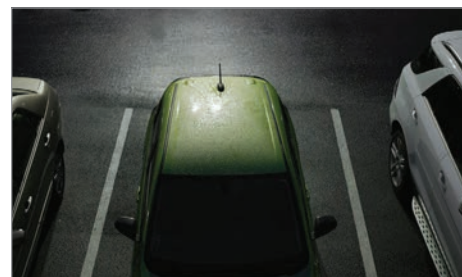
A new page has been created on our intranet where you can get updates on what we're doing to prepare and advice given to primary care, what we know about COVID-19, and guidance about travelling overseas.

Find out more on the intranet.

### Change to constipation guidelines

CCDHB has introduced a new constipation guideline for community and hospitalised adults. The development of the new guideline has been implemented by the Choosing Wisely group, which identified a need for a more evidence-based and up-to-date policy in the prevention and management of constipation. This guideline introduces a stepped approach to constipation for adults.

Find out more on the intranet.



### Sewing bee for bushfires

Allied Health staff in Wellington held a sewing bee to support the Australian bush fire wildlife appeal last week. Out of work time, they made pouches, blankets and knitted jackets for animals affected by bush fires.

"The energy, enthusiasm and camaraderie was delightful. The staff excelled in their talents," said Emma Williams of Ward 6 South Heart and Lung Unit. These items were shipped to Australia.

### New values poster available

Lots of work is going on to develop tools and resources to support you to explore the new values and to share with your team. Our new values posters are hot off the press and you will soon start to see them popping up across our campuses.

Download and print one from the intranet by searching 'new values poster available'.

### Improving car park safety

Staff and patients will soon be even safer when walking to and from their cars in the PM parking area of Wellington Regional Hospital, with new security lights and cameras being installed at Wellington Regional Hospital.

We ask people to please be patient and bear with us for the short time that this work is being undertaken.