

News, views and information from Waitemata District Health Board

Healthlines

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Rotary programme brings new-found skills and boosted confidence to future leaders of the DHB.

See pg 3

Families

Patients

Staff

“everyone matters”



Waitemata
District Health Board

Best Care for Everyone



Planning to meet the future needs of Aucklanders

We all know that Auckland is growing at an amazing rate. But many people don't realise that the Waitemata district is at the leading edge of the city's population growth.

Our resident population has grown by 17,000 people over the last year to just over 615,000, accounting for a major slice of Auckland's population growth. We were already the biggest DHB in the country in terms of the number of people we serve but ongoing growth in our district means our population is now approaching 100,000 more than the second-largest DHB.

Recent population projections estimated that Waitemata would grow by 126,000 people by 2030. However, based on current growth rates, this is likely to be achieved much sooner.

While an increasing population is a healthy sign that people value all the lifestyle benefits living in Waitemata offers, it also creates future demand pressures on healthcare and a range of other services.

It means we will need to look at different models of providing treatment and care. Systems that worked 30 or 50 years ago will no longer deliver the outcomes that we or our patients expect.

Together with Auckland and Counties Manukau DHBs, Waitemata has been working on a new Long-Term Investment Plan (LTIP) to guide all significant future capital health investments across the Auckland region.

The LTIP is an unprecedented opportunity to prioritise hospital and other health-related hospital capital projects through a Metro Auckland-wide lens. In the past, this may have seemed overly ambitious and too difficult to deliver but the appointment of our Chair, Dr Lester Levy, to lead the three DHBs across our city has created an opportunity to dismantle these obstacles.

Under the LTIP, DHBs will no longer embark on individual projects for their own populations without considering city-wide needs as part of the process. This

is not to say that the local projects we feel are important won't be approved; rather that in making the case for these, we must demonstrate that we have considered the implications beyond our own district borders.

The LTIP is due to be submitted with the Ministry of Health and Treasury by early next year and we have already received feedback from the well-credentialed Nuffield Trust in the UK that has helped guide the plan's development.

The strong and sustained population growth in the Waitemata district points to a need for the development of additional healthcare facilities to keep pace with future demand.

The LTIP will identify where and when those facilities are required and creates a road map for lifting our regional facilities to where they will need to be. I will keep you updated about what the LTIP means for our population and our services once the plan is finalised and submitted.

Take care
Dale



New faces

If you've just started working for Waitemata DHB, email hinerangi.vaimoso@waitematadhb.govt.nz

New faces this issue include:

Lucy Adams
Associate Director of Nursing



Lucy's last role was Acting Director of Clinical Governance in the Cairns Hinterland Health Hospital Service's patient safety unit.

Meg Smith
Clinical Nurse Specialist for the Patient and Whanau Centred Care Standards



Meg has worked as a charge nurse manager in New Zealand, Australia and the United Kingdom. She has also worked in project management roles in health since 2014.

Developing young leaders for Waitemata DHB

Early 5am wake-up calls and nights under tarpaulin in a remote bush location aren't for everyone – especially in the midst of winter.

But they brought out the best in five young North Shore Hospital-based Waitemata DHB staff selected from a pool of applicants for this year's Rotary Youth Leadership Awards programme.

Kellin Pungatara, Albert Delorino, Rebecca Watkin, Nikki Renall and Ashley Kim were among 120 participants from a number of organisations taking part in an eight-day initiative that started with a week-long series of inspirational lectures, workshops and activities at Eastern Beach. The focus was on team building, problem solving, and communication skills.

Little could they know what lay ahead when they were whisked off to a "secret," remote destination for their testing phase - allowing them to put theory into practice.

"Everything we'd done until that point was priming us for what was to come," Nikki Renall says. "We just didn't realise it."

Helping run the testing phase was DHB medical scientist Jon Atkinson who created the course's final segment based on the New Zealand Army's officer selection standards.

Jon is a former full-time soldier who has

served on peacekeeping missions in both medical and infantry capacities.

He is still a member of the NZ Army Reserve and says the Rotary scheme gives participants the opportunity to test themselves and lead others through a range of challenging scenarios.

Everyone agrees the bar is set high right from the start.

"We were outside of our usual comfort zones from day one," Rebecca Watkin says. "The programme quickly made us acknowledge our strengths and weaknesses."

Ashley Kim says the experience boosted her confidence.

"I am usually the quiet one in a group – but this taught me that it's OK to speak up and to be the leader in certain situations."

Kellin Pungatara says the leadership aspect was all the more daunting with a group of strangers.

But the feedback he got from other participants soon made him realise he was up for the challenge.

"I was told I was calm under pressure and that the same sense of calm was exuded to others. It's hard to get people to follow when you don't know them so to get that kind of reaction was very encouraging."

Albert Delorino says the programme ranks among the best experiences of his life.

"It pushed me physically and mentally - revealing my strengths and weaknesses and providing me with an incredibly valuable learning experience.

"Going back into the real world, I've found myself carrying more confidence and self-awareness when interacting with others. I now feel better equipped to deal with difficult situations. All in all, it was an unforgettable week with an awesome bunch of people."

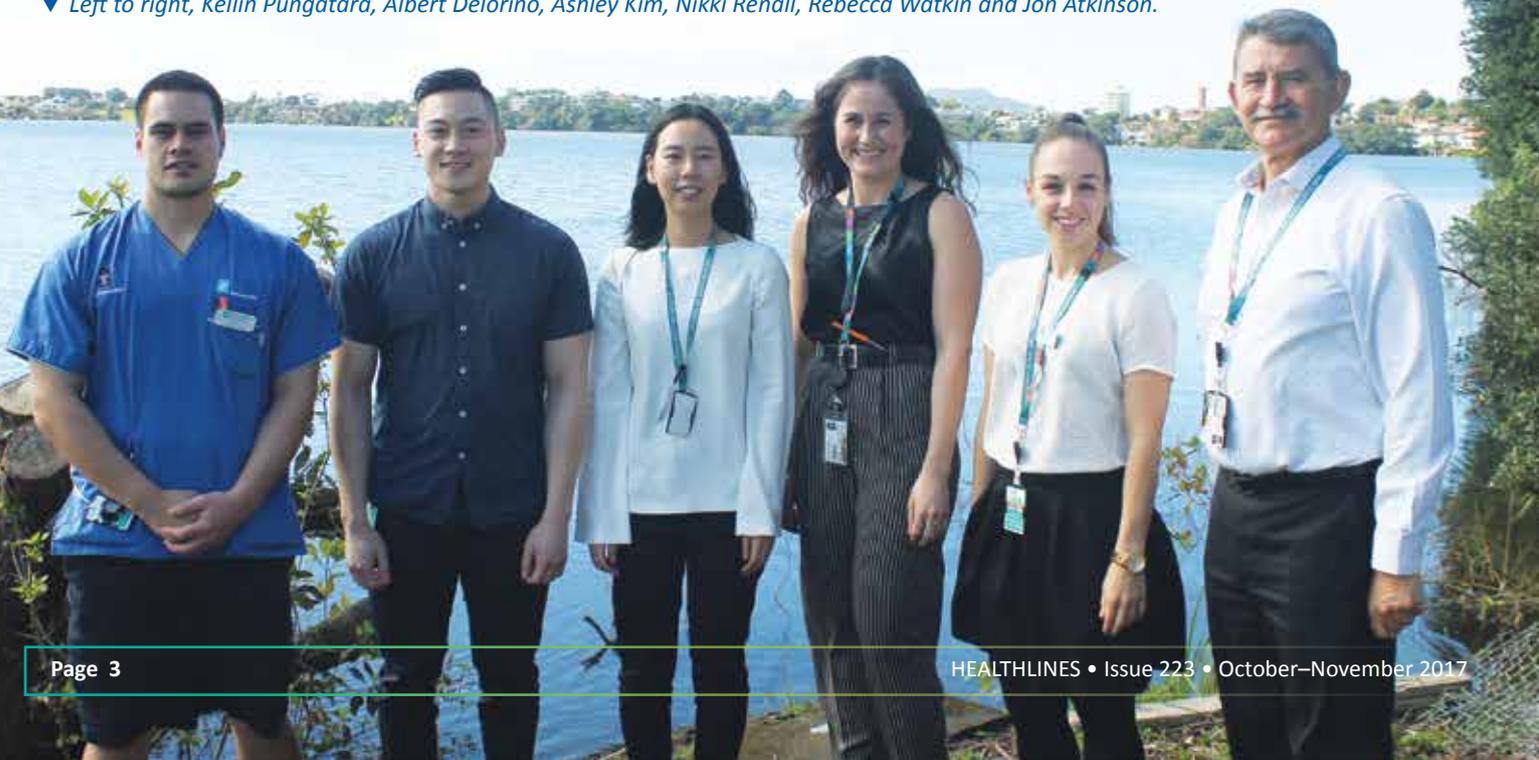
Waitemata DHB Director of Allied Health, Scientific and Technical Professions Tamzin Brott says the programme aligns closely with the DHB's organisational goal to be better, best and brilliant in all that it does.

She says a number of DHB staff, aged between 20 and 28, have participated over the past few years and brought their new-found skills and boosted confidence back to the work place.

"Strong leadership is crucial to the delivery of world-class healthcare and better outcomes for our patients," she says.

"These young people are our future and it is great to have this opportunity to help them develop their potential."

 *Left to right, Kellin Pungatara, Albert Delorino, Ashley Kim, Nikki Renall, Rebecca Watkin and Jon Atkinson.*



Thank you for your care this winter

This winter season has been a very busy period for our hospitals across Metro Auckland. We have seen record numbers of presentations at our EDs and intense demand for healthcare services, exceeding forecasts by a significant margin.

While we always expect winter to be busy, there is no question that the surge in patient numbers this year has placed a real strain on our hospital-based teams. I want to acknowledge all of you who gave your all to provide very high-quality services for our community during a particularly challenging period. This includes working extra hours to help out and demonstrating flexibility to allow us to meet this sustained need for care. Your commitment is recognised and very much appreciated.

I know a great amount of effort and thought went into how best to manage fast-emerging scenarios, with an overriding priority of protecting patient safety at all times. I also want to pay tribute to all those staff who played a role in the discharging process to ensure the flow through our hospitals was expertly managed according to what was best for individual patients.

The reality is that while we do our best to forecast demand, the pressure on the front doors of our hospitals is famously difficult to predict. One thing is clear, however: the population of Auckland is growing rapidly and the need for care continues to grow year-round, not just in winter. The same growth pressure and demand is contributing significantly to housing affordability and the challenge of commuting right across the city.

The high demand we have seen this winter reinforces the need for the three Auckland-based DHBs to work closely together on sustainable planning for future patient needs. I was very pleased to see the level of collaboration to joined-up decision-making to consider the overall picture in the Auckland region. This will continue to be increasingly necessary if we are to rise to the challenge of a larger, older and more multicultural population.

Once again, thank you – the work you do and your commitment is recognised and appreciated.



Another busy day for Emergency Department staff at North Shore Hospital in the wake of flu season and a surge in patient numbers.



Waitakere Emergency Department staff are among those who have worked hard over winter to meet extra-high demand.



Herceptin treatment: a welcome opportunity for staff

The introduction of Herceptin treatment at North Shore Hospital has been beneficial for breast cancer patients.

Herceptin treatment for patients with HER-2 positive breast cancer at North Shore Hospital started in August. It eases the pressure of traffic and parking issues for North Shore, Rodney and west Auckland residents who previously had to travel to Auckland City Hospital.

Herceptin infusion is required once every three weeks over a course of a year. Treatment takes around 75 minutes per session.

About 350 people from Waitemata will be diagnosed with breast cancer this year. By August, that number was already up to 218. Thirty of those already diagnosed were under 45.

Breast Cancer Nurse Specialist Anne Norris says a third of woman diagnosed with breast cancer will benefit from Herceptin.

"Herceptin is given when their surgery has been completed. Our patients are very happy to be having their treatment here now," Anne says.

"It has been a welcome initiative here and

we had a great response from staff wanting to be able to administer the treatment as a direct way to help people in our local community with this diagnosis."

Short Stay Ward Charge Nurse Manager Liz Pitney says she had five staff who quickly put their hands up for the Herceptin treatment training which consisted of an online and practical component, including a port-a-cath access sign off.

The registered nurses then spent time at Auckland City Hospital working with Auckland DHB staff to get hands-on experience administering Herceptin.

Liz says staff also spent time with the breast care nurses, a cancer services social worker and psychologist.

"They are all now fully signed off and ready to go," she says.

"Staff have really enjoyed the training aspect – it is most definitely a new skill for all of them but also very rewarding to be working with this group of patients."

While Liz didn't have an oncology background, the process has been challenging but rewarding. She says the support of Project Lead Julie Cairns and the Well Foundation has been appreciated.

Well Foundation throws support behind Herceptin patients

The Well Foundation is fundraising for two comfortable reclining chairs to deliver Herceptin infusions to women receiving this new service at North Shore Hospital. Undergoing treatment after a cancer diagnosis is an overwhelming experience, but the ability to recline in a comfortable chair during the procedure will hopefully allow patients to feel much more relaxed.

The Foundation is also fundraising for a SureSigns Monitor to ensure each patient's vital signs are tracked during these infusions. It will take \$21,352 to fund this service.

If you can help, please donate now and spread the word to your friends and family to do the same. Together, we can make a difference and help women in our community facing breast cancer.

www.wellfoundation.org.nz

**WELL
FOUNDATION.**



Emily Wake and Kristine Zheng were among the first five Waitemata DHB nurses to be trained in the administration of Herceptin.





Families

“everyone matters”

Patients

Giving Waitemata babies ‘the best start in life’

Waitemata District Health Board has given in-principle approval to plans to establish an urban primary birthing unit - a direct response to community requests to provide more choices for the district’s population.

The unit would be built on the Waitakere Hospital site and the Board is now doing investigative work that will establish timeframes, with a goal of completion in the 2019/2020 financial year.

The proposed 500m² facility will be designed with input from the community, clinicians and other key stakeholders to ensure a culturally appropriate space with flexible bed capacity. It could also cater for the colocation of pregnancy and parenting classes as well as various other services for parents and infants.

Over 2800 babies were born in Waitakere in the year ending June 2017 and that number is expected to rise by up to 700 infants per annum by 2025. Overall population growth across the Waitemata district is also set to rise by 15% over the same period. “The greatest demographic growth is predicted in the west, which is why we are initially focussing our efforts on Waitakere,” Waitemata DHB Director of Funding Dr Debbie Holdsworth says.

“We undertook an extensive community consultation to understand what our community wanted from this facility and how it would be used. Overall, the community was significantly in favour of a West Auckland-located facility run by Waitemata DHB. “The needs of other parts of our district will be addressed in the next stages of our ongoing investment in supporting mothers and their babies.”

Dr Holdsworth says the Waitakere site was among a range of scenarios explored for an urban option. “It is well-known to our community and we have suitable land available which will make starting this project much easier,” she says. “This could well be the first phase of a broader programme to develop more fit-for-purpose, primary birthing units in Waitemata once the Waitakere model is up-and-running successfully.”

Waitemata DHB already funds rural primary birthing units in Helensville, Warkworth and Wellsford. All are well-used and deliver excellent outcomes for patients. The DHB hopes the provision of a new unit will encourage more women to give birth naturally. International and national research shows giving birth in a primary birthing unit is safe and increases the likelihood of vaginal birth.

Waitemata DHB Head of Division for Midwifery Emma Farmer says normal birth offers the best outcomes for most mothers and babies – decreasing risk of post-surgical complications and making a swifter recovery more likely. “In recent years, we have seen a rise in the rate of caesarean births. These can be life-saving procedures but were never intended to be routine for well women with normal pregnancies.

“We want to be able to offer women an alternative to hospital birth in a home-like environment. This will not be suitable for mothers with complex pregnancies but it will help those with normal pregnancies who want normal births.”

A national report released by the Health Quality and Safety Commission in August says Waitemata DHB’s perinatal mortality rate is among the lowest in New Zealand.

Waitemata DHB Acting Chief Medical Officer Dr Andrew Brant says the new birthing unit will help keep the DHB at the forefront of maternity care. “Our DHB’s infant health outcomes are already among the highest in the country,” he says. “We are committed to delivering best care for everyone and that includes giving Waitemata babies the best possible start in life.”

Waitemata DHB breaks new ground in spreading safe sleep message

It's been just three years since Community Midwife Manager Sue Fitzgerald secured funding for one annual wahakura weaving wānanga at Waitemata DHB.

Fast forward to 2017 and she now hosts three of the safe sleep education sessions with the addition of one specifically for midwives and Lead Maternity Carers (LMCs), a first for New Zealand.

Te Aka Oranga Waikawa Wahakura wānanga started at Waitakere Hospital in 2015 when a group of expectant Māori mothers wove flax wahakura (bassinets).

During the sessions, Maternity Services and He Kamaka Waiora Maori Health Services educated mums and whānau about the importance of being smokefree, breastfeeding and using safe sleep practices to reduce the risk of sudden unexpected death in infancy (SUDI). The mum and whānau sessions have been a success but the wānanga for midwives and LMCs is vital.

"They experience the journey of weaving a wahakura like the mums which provides understanding of tikanga and the whole feel around it," Sue says. "They then encourage hapū (pregnant) mums to attend a wānanga with more understanding."

Nineteen midwives participated in this year's inaugural professional's wānanga. Throughout the day, services that support Maori, Pacific and young mums did presentations to update LMCs on what services will meet their patients' needs.

SUDI is a leading cause of preventable death in New Zealand babies. Of the 44 babies who died nationally in 2015, a report showed that 37 of the deaths could have been prevented. Māori babies are nearly seven times more likely to die of SUDI. Sue says the message for Māori mums needed to be conveyed in a culturally appropriate way.

"For us, a baby dying from something that could have been prevented is just unacceptable. We needed to do something drastic. We needed to make a difference and it had to be something more than just handing someone a pamphlet," Sue says. "Mums who learn to weave wahakura, are getting in touch with their culture and learning a skill to pass on."

Wahakura are mobile and can be used as a safe option for parents wanting to co-sleep as baby is clear of anything that may obstruct their breathing. "In many SUDI cases, the baby was bed sharing, sleeping in an improvised sleeping environment like a couch or surrounded by pillows or in a

porta cot with a poorly fitted mattress. With wahakura, we're able to support cultural values of bed sharing for Māori and Pacific communities but keep them safe," Sue says.

Ariana Davis isn't Māori but wanted to weave a wahakura for each of her twins who were due in September. The Massey mother and her partner were welcome to attend a session but weren't able to before the birth of their twins. "I was so keen for my mum and me to do it together. Being from a big family, co-sleeping is very much a part of our culture so this was a great way for us to have them close to us but safe at the same time," she says. "I also thought being able to make something like this was so special and an awesome way to connect with New Zealand culture."

Ariana received a surprise a few weeks before her due date when she was gifted two wahakura made in a Waitemata DHB session. "I was blown away with these gifts. I will definitely appreciate them and, considering they were a gift to me, would like to pass them on to a new mum in the future."

Northland DHB has started following the Waitemata DHB model in a bid to bring down its infant mortality rate.



 Ariana Davis of Massey with the wahakura made for her newborn twins by midwives and Lead Maternity Carers at Waitemata DHB.

Work continues to boost child vaccinations across Waitemata

All staff can help make a positive impact on the number of Waitemata babies missing out on immunisations each year.

Waitemata DHB aims to have 95% of all eight-month-old babies fully against serious diseases such as whooping cough and pneumococcal disease, in line with the Ministry of Health target.

Of the 2065 babies who turned 8-months-old between June and September this year, 1928 (93%) were immunised. That means 137 babies missed out on potentially life-saving vaccinations in the Waitemata DHB area.

Immunisation Programme Manager Georgina Tucker says some of the main reasons babies are missed include parents forgetting; being too busy and a lack of accessibility, issues that Waitemata DHB staff are working to help improve.

Discredited anti-vaccination messages, such as those in the highly publicised movie *Vaxxed*, can raise anxieties in parents but Georgina says this can be overcome by conversations with whānau about how successful immunisation is at preventing disease.

Two years ago, the children's ward at Waitemata DHB was full of babies with gastroenteritis caused by rotavirus. Now, thanks to the introduction of the rotavirus vaccine, there has been a 70 percent reduction in hospitalisation nationwide.

"Getting all babies free immunisations that could one day save their lives gives children the best start," Georgina says.

"Sometimes it's just letting people know prevention is free and where it's available".

Waitemata children and pregnant women can visit their GPs for free vaccinations.

Making the process even easier for children at Waitakere Hospital is a team of immunisers who can be called on to immunise children or support conversations with caregivers.

Waitemata DHB's stance on immunisation was recently endorsed by its board. "Immunisation is a safe and effective way to protect individuals and the community from serious vaccine preventable diseases. The Waitemata DHB actively supports and encourages immunisation in line with the New Zealand National Immunisation Schedule and World Health Organisation recommendations," the board said in an official statement.

Georgina encourages staff across Waitemata DHB to help boost the number of babies and children vaccinated.

"We would encourage all staff working with children and expectant mothers to ask the question and check immunisation records to ensure they've either been vaccinated or that the caregiver is at least informed about the importance of immunisations."

Georgina says having a conversation about vaccinations should be part of routine care.

With the mumps outbreak seen in Auckland in recent months, Georgina says it's also important for staff to stay alert around those travelling to

the Pacific Islands. Immunisation schedules in some Pacific Island countries don't match New Zealand's so travellers can pick up diseases and bring them back as unwanted souvenirs.

"Again, this could be a simple conversation and a check to ensure vaccinations have been administered before people travel," she says.

"All staff can have a hand in creating better health outcomes for children, their families and the community."



Immunisation Programme Manager Georgina Tucker encourages all staff to have a hand in boosting the number of child vaccinations.



Diabetes care in the west gets boost through pilot



A collaboration between Waitemata DHB, four primary health organisations and 10 general practices to improve diabetes care has won an award for best innovative service delivery.

The Improving Diabetes Care in West Auckland Pilot won the award during the 2017 New Zealand Scientific Study of Diabetes Annual meeting for its use of practice-specific quality improvement plans.

The plans were developed in conjunction with the Waitemata DHB Quality Improvement Team and used quality improvement (QI) models including the 'Plan, Do, Study, Act' (PDSA) method used by global innovation leaders.

The QI approach focused on processes and systems of care-delivery in general practice to facilitate changes and improve clinical outcomes.

Ten general practices were recruited in west Auckland and seven completed the pilot. The work with these practices successfully showed how a quality improvement approach can better health outcomes by improving processes and care delivery systems.

Four practices focused on systems changes to current practice to maximise opportunistic contact with patients.

Quality improvement Coordinator Janine Strickland says the ability to use the patient level data was useful for the general practices to critique their present systems of care.

"Initial data showed that patients with a high HbA1c frequently

visited their GP but not usually for the management of their diabetes," Janine says.

"These practices decided to make changes to their system to ensure that at these existing appointment times, they proactively addressed the patient's diabetes management."

Three practices focused on intensification of engagement and management with patients deemed as being at-risk.

One of them was the Fono in Henderson. Diabetes Nurse Eseta Naidu has worked with people diagnosed with diabetes and pre-diabetes for ten years.

"This approach ensured that every appointment attended was of maximum benefit to the patient. They see the doctor for a review, including medications, then the diabetes nurse for education and ongoing follow up, and possibly a health psychologist," Eseta says.

"Instead of working in isolation around the care of each patient, we now have a system that is inclusive of all the services we offer here at the Fono.

"It has enabled us to meet regularly to discuss our patients and ensure that we manage their care as a team. I believe this has definitely been better for our patient's outcomes."

The improvement across the seven participating practices for their patients with poorly managed diabetes was an average drop of 10-17mmols/mol in HbA1c. A 10 mmol/drop in HbA1c reduces the risks of complications of diabetes by 35 percent.



"everyone matters"

Patients

Staff



West Fono Diabetes Nurse Educator Eseta Naidu.

Campaign to make NZ primary health care “the safest in the world” hits milestone

Patient safety is at the heart of an international health improvement programme now being promoted by Waitemata DHB across GP practices and community pharmacies in its region.

The Safety in Practice (SiP) initiative aims to make primary care safer through improved practice systems and teamwork; improved efficiency and better evidence-based care delivered with a patient-centred focus. It is based on tools and approaches developed in Scotland as part of the Scottish Patient Safety program in primary care.

Waitemata DHB clinical lead Dr Neil Houston is a GP and global clinical improvement expert who led the successful Scottish Patient Safety Programme in Primary Care and helped spread it to over 900 GP practices across Scotland. He has been working in New Zealand since 2014 to support the application of the methods and tools of the programme in Auckland.

He says the Scottish model started with a sample size of 40 GP practices before being rolled out nationwide.

“In our first year of developing the programme for a NZ context, we started with 20 GP practices across Auckland. This year, we are supporting almost 80 GP practices as well as six urgent care

clinics. We are now moving into supporting community pharmacies and will be testing with 20 in the next 12 months.” New Zealand was the first nation outside of the UK to adopt the improvement programme and adapt it to suit.

“I’ve found practices in Auckland that are very engaged with the work,” Dr Houston says. “Some have, in many ways, taken the innovations even further than their Scottish counterparts - particularly in terms of role development, increased teamwork and better communications with patients.

Waitemata DHB chief executive Dr Dale Bramley says Waitemata DHB has made a strong commitment to developing and improving safety and quality in primary care teams and seeks to grow the programme to cover all GP practices in its catchment. “Collaboration between Waitemata DHB and local PHOs has been intensive and led to big changes. What once began for many providers as a way to improve safety has advanced to a stage in which practices now have the confidence and skills to evolve to improving quality,” he says.

Dr Bramley noted that Dr Houston was particularly excited by the outstanding amount of data collected and made available by Waitemata DHB that helps identify where harm related to medication occurs.

Recent national health research indicates 30 percent of patients in hospital across New Zealand have received some form of harm from a medication, and a third of that harm originates from primary care in the community.

“We understand the main causes of harm for these patients are management of prescriptions drugs such as opioids, Warfarin, non steroidal anti-inflammatories and anti-coagulants,” says Dr Houston.

Practices involved in SiP have reported significant quality and safety improvements across multiple areas since their involvement.

“Practices have reported back to us that they are seeing significantly better management of high-risk medications and test results, better overall communication with patients and better communication between staff,” Dr Houston says.

“There have been some really exciting results and we expect the quality and safety improvements to continue as the programme is rolled across primary care.”



Waitemata DHB CEO Dr Dale Bramley, left, with Quality Improvement Clinical Director and Safety in Practice advocate, Dr Neil Houston.





SCBU staff band together for babies like Braxton



It will be ward-on-ward warfare when staff pound the pavement in this year's Auckland Marathon on October 29.

The team at Waitakere Hospital's Special Care Baby Unit (SCBU) have challenged colleagues at North Shore Hospital SCBU to a head-to-head competition, to help the Well Foundation fundraise for two new transport incubators for the Waitakere and North Shore Hospital Special Care Baby Units.

Waitakere SCBU nurse Vicki Savage is a driving force encouraging her team.

"We wanted to support the Well Foundation that is fundraising for this vital piece of equipment to support our vulnerable babies in SCBU," she says.

"We decided to make it fun and challenge our colleagues at North Shore SCBU to sign up too and they are pretty eager to step up and join us."

Tegan Moyne, a nurse at North Shore Hospital SCBU, says training for the marathon is a great team-bonding experience.

"When our colleagues at Waitakere SCBU challenged us to enter the marathon, we were keen to get on board. Finding time to get out there and train together is a challenge but doing it as a team is fun and a great way to spend time together outside of work," she says.

The new transport incubators are worth

\$127,000 and will help babies like Braxton Ridge who was born prematurely at 36-weeks at North Shore Hospital and admitted to SCBU for monitoring.

Braxton's mum, who was recovering from her emergency c-section, was eager to be transferred to Waitakere Hospital so she could be close to family and friends who all live in west Auckland.

Luckily, two days after he was born, Braxton was transferred safely back to Waitakere Hospital's SCBU in a transport incubator.

Without it, Braxton and his mum would have had to remain at North Shore Hospital

with Braxton's father and the rest of the family having to make daily trips from west Auckland in order to support them.

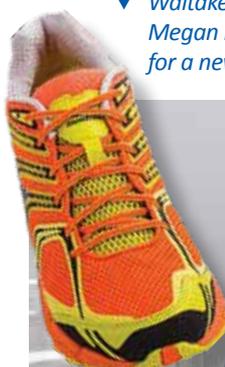
The two teams from SCBU will join a number of other Waitemata DHB staff running and walking various distances to fundraise for the foundation.

You can show your support by making a donation towards their fundraising efforts before the end of November. Just visit <https://wellfoundation.org.nz/page/aucklandmarathon> for ways to donate.

Any donation, no matter how big or small, still makes a difference.



Waitakere Special Care Bay Unit (SCBU) nurses Vicki Savage, Stefanie Smith and Megan Reid all put their hands up for the Auckland Marathon to raise money for a new transport incubator.



National award for medical educator

Dr Eleri Clissold works hard to ensure young doctors receive the highest possible level of training at Waitemata DHB.

Her efforts to develop and enhance training systems and materials were honoured in August with a national Open for Leadership Award from the Health Quality and Safety Commission (HQSC).

The award recognises, celebrates and shares the work of emerging health leaders whose efforts have made a difference to patient care. Dr Clissold was presented with a trophy and certificate by then Associate Minister of Health Hon Peter Dunne at North Shore Hospital.

HQSC has also offered her a place at one of its forthcoming events. Dr Clissold is as proactive about patient care as it is possible to be. That's why she volunteered to join the crew of a hospital vessel delivering health care through the Mercy Ships organisation to some of the world's poorest people in Africa after graduating from a UK medical school in 2013.

It's also why she took a job in the Medical Education and Training Unit at North Shore Hospital two years later after immigrating to New Zealand. She soon immersed herself in a number of ground-

breaking training initiatives as a Fellow of the Waitemata DHB's Institute for Innovation and Improvement (i3).

Among those initiatives was the design and implementation of a teaching programme for post-graduate year-two doctors with a focus on quality and safety of patient care.

"A highly skilled clinical work force directly translates to better patient outcomes which is why I am drawn to medical education," she says.

"The Fellow's programme gives early career professionals an opportunity to gain experience working on the system rather than in it. It enabled me to do all the work that is now being acknowledged by this award."

Dr Clissold is now employed in the urgent care department of Apollo Medical on Auckland's North Shore but continues to work part-time at i3. The award ceremony in August recognised her efforts to develop and enhance training experiences for post graduate year two and junior doctors.

It also acknowledges her part in trialling virtual reality technology as a learning tool.

"Virtual reality brings aspects of medical training to life in a highly engaging and interactive way," she says. "This work is ongoing and I am now part of a team researching and developing its use in junior doctor education."

Waitemata DHB CEO Dr Dale Bramley says Dr Clissold's example epitomises the DHB's organisational goal to be better, best and brilliant in all that it does.

"Our DHB supports the training needs of nearly 7000 people who are tasked with providing quality patient care to a population of over 600,000.

"This award recognises the high value we place on training and developing that workforce to constantly put patients first and make us a national leader in healthcare delivery," he says.

"Dr Clissold's work with and through our Institute for Innovation and Improvement is very much an example of Waitemata – the largest DHB in the country – providing an environment where improved patient care is absolutely paramount."



Dr Eleri Clissold is the recipient of a national Open for Leadership Award from the Health Quality and Safety Commission (HQSC)



Pacific Week to focus on clear communication



Authentic communication, the Pacific way, will be the focus of this year's Pasifika Week starting on December 4.

The week's events will take place at Waitakere and North Shore hospitals and will feature guest speakers and performers, leadership seminars, competitions, stalls and discussion groups. All staff are welcome to attend the workshop on best Pacific practice which trains staff in the fundamentals of engaging meaningfully with Pacific patients and their families.

General manager for Pacific Health Services Puluotu Bruce Levi says Pacific issues will continue to be important to Waitemata DHB as the population grows. "As a health organisation, it's important that we work on ways to work effectively with the Pacific community," he says. "Pasifika Week at Waitemata DHB is about celebrating the diversity our Pacific staff bring to the workforce, it's about encouraging our staff to take more of a leadership role in the community and it's a chance for us to discuss what's working for our people now and what we could improve on."

Pasifika Week 2017 will start with a traditional Ava ceremony to officially launch the event and acknowledge Seinafolava Meia Schmidt-Uili, the first Pacific Island doctor to hold the position of Head of Division for Child, Women and Family Services. "We're really proud that our Pacific staff not only do well working as part of the Pacific health team but excel in the general healthcare stream too, sharing their skills with all cultures," Puluotu says. Pasifika Week highlights and promotes Waitemata DHB initiatives that enhance communication between its staff and the Pacific community.

Puluotu says youth play an important role in this year's Pasifika Week celebrations because of the specialised work that has been done with them throughout the year. "We believe that in order to get the most out of our community in the future, we need to reflect it. Our Pacific Health Science Academies programme ensures that we establish a connection with our young Pacific people. "This helps us show them the possibilities of a career in health care and how that will help reduce inequalities for Pacific people in generations to come."

Puluotu says the week's theme of authentic communication is about improving the quality of engagement. "This isn't just about making sure people turn up to their appointments but building that trust and empowering the Pacific community to feel ownership when it comes to the health system and be proactive about their health."

Go to [StaffNet](#) to see the full programme.

Waitemata and Auckland DHB General Manager of Pacific Health Puluotu Bruce Levi says it is important for us all to understand how to communicate well with our pacific patients.



Waitemata DHB HEALTH HEROES

We're so fortunate to have the generous support of the City Cake Company and Bliss Reflexology. These businesses generously supply us with a sumptuous celebratory cake and a relaxing spa treatment.

Supported by:



Who: Sarah Timmis, Charge Nurse Manager, Rangatira Ward

**Nominated by: Elizabeth Campbell,
Kaiatawhai**

Sarah has been nominated for her culturally appropriate care. She goes out of her way to make sure the cultural and clinical components of care work collaboratively for best outcomes for patients and their whānau. It's a pleasure to work with her and her team on the Rangatira ward. Everyone matters to Sarah. Sarah does her job with serious compassion. Sarah is connected to her staff and patients and their whanau. Sarah gives better, best and brilliant care to all.



“everyone matters”

Staff

CEO Dr Dale Bramley with Health Hero Sarah Timmis.

Team: Central 1 Team ARDS

Nominated by: Team leader Ros Syms

The Auckland Regional Dental Service C1 team has been nominated for its work to make sure that children in the metropolitan Auckland area get good, punctual dental care.

Team leader Ros Syms says C1 staff have showed fabulous teamwork and made customer focus a priority.

“everyone matters”

Staff



Central 1 Team ARDS with CEO Dr Dale Bramley.

Compliments



I write to express how proud I am of Waitemata DHB's maternity services.

I was recently discharged after nearly a year of healthcare for myself and my baby twins.

I have, since learning of my MCDA pregnancy in late 2016, seen sonographers, obstetricians, anaesthetists, dietitians, midwives, community nurses, maternity physiotherapists, SCBU staff, maternity nurses, lactation consultants, paediatricians, healthcare assistants, orderlies and administration staff.

The services have been superb and everyone involved in our care has been an exemplary model of the Waitemata DHB promise, 'best care for everyone', and the organisational values as outlined below:

With compassion: The first days recovering from my C-section and learning how to manage and breastfeed twins was difficult. The hospital midwives, lactation consultants and maternity nurses were always encouraging and supportive. They went out of their way to ensure I had enough help, paying attention to even the smallest of details. They kept me on track by reinforcing my confidence with their kind language.

Connected: Health professionals and administration staff made sure I was included in the decisions made during my treatment and the healthcare of my babies. Phone calls and paperwork ensured my lead maternity carer and GP were also informed. Referrals to community services were promptly made and I was seen or contacted by these teams within a couple of days. I regularly received phone calls or text messages to remind me of my many appointments. I always knew where I was at with the healthcare plan for myself and my children.

Everyone matters: Care was taken to include my husband and my older daughter in our healthcare. They were always welcomed to the wards or at sonography services. Staff took time to learn their names and speak directly with my 2-year-old who also had a lot of change to deal with. I also noted the supportive way staff spoke to each other which aided the smooth transition between shift changes.

Better, best, brilliant: The healthcare our family received was exceptional. There was always a team approach so any uncertainty was reviewed by several eyes. I was also made central in the care provided so I felt informed and able to make decisions for my own best care. The skill levels of the health professionals and supporting staff were exceptional and because of this I am now at home, fully recovered, exclusively breastfeeding and delighting in the company of my thriving baby boys.

Many thanks
Anonymous

“ best care for everyone ”

This is our promise to the Waitemata community and the standard for how we work together.

Regardless of whether we work directly with patients/clients, or support the work of the organisation in other ways, each of us makes an essential contribution to ensuring Waitemata DHB delivers the best care for every single patient/client using our services. ”

“ everyone matters ”

Every single person matters, whether patients/clients, family members or staff members. ”

“ with compassion ”

We see our work in health as a vocation and more than a job. We are aware of the suffering of those entrusted to our care. We are driven by a desire to relieve that suffering. This philosophy drives our caring approach and means we will strive to do everything we can to relieve suffering and promote wellness. ”

“ connected ”

We need to be connected with our community. We need to be connected within our organisation – across disciplines and teams. This is to ensure care is seamless and integrated to achieve the best possible health outcomes for our patients/clients and their families. ”

“ better, best, brilliant... ”

We seek continuous improvement in everything we do. We will become the national leader in health care delivery. ”



Email Hinerangi Vaimoso with your story ideas at Hinerangi.Vaimoso@waitematadhb.govt.nz

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