

WAIKATO HEALTH NEWS

SPRING 2015

Voice of mums heard on maternity board

The voice of women who have used Waikato maternity services is being heard more clearly in a range of ways, the latest being the appointment of three Waikato women as consumer representatives on Waikato DHB's Maternity Quality and Safety Programme Board.

The three maternity consumer representatives are Sharni Budd from Te Awamutu, Milly Emery from Hamilton, and Kylie Hickey from the Coromandel area. They come from diverse experiences and backgrounds, and will make a huge contribution to the work of the Waikato Maternity Quality and Safety Programme Board.

Ruth Galvin, Maternity Quality and Safety Programme lead, says consumer representation is a very direct way to hear and learn from Waikato women.

"It is the next step up from surveys and consumer input we have had on specific improvement projects. It means we have the consumer voice directly on our governance board where decisions are made."

The September Maternity Quality and Safety Programme Board meeting is the first time the three consumer representatives will attend.

Beyond these representatives, a larger panel of maternity consumers is also being developed so the board can draw on wider experiences for particular issues or projects.

Milly Emery, a 23 year old first time mum, is one of Waikato DHB's new maternity consumer representatives.

Her baby Lila was born at Waikato Hospital. Milly had planned to birth at Waterford Birth Centre. However three weeks after her due date Lila was making no sign of arrival and Milly had an induction at Waikato Hospital. Progress was slow and Lila was eventually delivered by emergency caesarean section.

"Apparently Lila was in a position that meant she could not shift into the birth canal, even though I was ready to give birth," she explains.

It was not the birth Milly had planned and she had both positive and negative experiences in her journey. Milly has turned her experience into a learning curve that will benefit many Waikato women.

"It's about learning together," she says. "It's exciting to be in a position to make some positive changes."

Milly is particularly interested in improvements to induction of labour and also bringing a Maori woman's perspective to maternity services and cultural safety and awareness issues.

WELCOME

TO OUR SPRING ISSUE WHICH INCLUDES STORIES, HEALTH ADVICE AND INFORMATION FROM WAIKATO DISTRICT HEALTH BOARD FOR VISITORS, PATIENTS AND PUBLIC.

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What is the Maternity Quality and Safety Programme?



Ruth Galvin (left) with Milly Emery and baby Lila.

It is a national programme which establishes and builds upon both national and local maternity quality improvement activities. The aim is to ensure the highest possible safety and best possible outcomes for all new mothers and their babies. It sets national maternity standards and clinical indicators, which local district health boards can report against for their districts. Waikato DHB does this in its Maternity Annual Report, which is publicly available.





From left: Kristin Dacre, Jelte Drijfhout, Marilyn Vilicich, Amy Harrison who are combined needs assessors/service coordinators. Photo courtesy of Fairfax Media/Hauraki Herald.

Disability Support Link assists in obtaining home support services for people with disabilities in the Waikato, King Country, Thames Valley and Coromandel Peninsula

Home support services may include:

- Household assistance
- Personal care
- Day programmes (non-therapeutic)
- Carer support
- Residential care and support
- Referrals to other support services

Exclusions

Disability Support Link does not have the capacity to assist the following clients:

- Those with short-term illnesses that will require support services for less than six months
- People with ACC-related conditions.

Meet the Thames/Coromandel DSL team

DSL is the Waikato DHB service that assesses the needs of people with long-term health conditions and then coordinates the support services they need.

The Thames/Coromandel Disability Support Link (DSL) team

is an example of the move to more "local presence, local decisions" and to a more integrated approach for DSL clients.

Until recently, the assessment and the coordination parts of DSL work were done by separate people. Assessors were often independent contractors.

Now DSL staff will do both roles at a local level.

Disability Support Link (DSL) manager Graham Guy describes the move as providing a one-stop shop for clients by people who know the local area where the person lives.

"It will make better use of the local knowledge and expertise of our staff, and it also means a less

fragmented approach for users," Graham Guy says.

In Thames the change to "local presence, local decisions" has meant increasing from 1.5 to 4 staff members who do all the assessments and reviews for over 65 year old DSL clients in

the Thames/Coromandel area. Team member Amy Harrison takes the local service even further into the community, being based in Whitianga to

look after all DSL clients in that area and the top half of the Coromandel.

Graham Guy says it will take 12 to 18 months to fully move to the new model, evaluate how well it works, and decide the next steps. "For a while there will be a mix of contracted assessors in some areas, and in-house local assessors in others."

In total eight new staff have been recruited to DSL areas bases covering Thames/Coromandel, Taumarunui/Te Kuiti/Otorohanga, Cambridge and north Hamilton, with others in Matamata/Morrinsville and Te Awamutu.

"We have improved the ratio of staff to clients, and already that has helped cut waiting times. We might need to improve that even more in future."

A message to Thames from the Commissioner for Children

"Fluoridation is the best evidenced and most cost effective way to improve the oral health of your children. Māori and poor children benefit more and fluoridation is safe for everyone."

Dr Russell Wills

Children's Commissioner and Paediatrician



WAIKATO & NORTH ISLAND
Children's
Commissioner

Fly-fishing retreat for men with cancer



Reel Recovery is a Waikato-based fly-fishing retreat for men experiencing cancer. There is no cost for participants. It is all done by voluntary helpers – accommodation, catering, fishing buddies/guides, and those who lead conversation groups.

Reel Recovery is based on a programme of the same name in the USA which has been running since 2003. The New Zealand version is organised by Waikato husband and wife team Craig and Wendy Caldwell. The first New Zealand retreat was in 2014 at Wharepapa just out of Te Awamutu, using the local Puniu River for the fishing.

The participants come from all over the country, many to date from the greater Waikato. It is often the first time they have had an opportunity to share their experiences of cancer.

As Craig puts it "We just give Kiwi guys the opportunity to talk."

The fly-fishing buddy team since then has included Waikato DHB's chief medical advisor Tom Watson, who is a longstanding fly-fishing enthusiast.

"I was invited to come as a fisherman not as a doctor. As a fishing buddy my role was to spend a couple of days with the men at the retreat, teaching them how to cast and to catch fish. It's time out for them, to help them find strategies to cope and to talk things through with other guys, but also to enjoy themselves.

"Fly-fishing is great for that. You have to concentrate so hard on what you are doing, it puts you in a different mental and emotional space. You become more aware of the beautiful environment you are in – the tui, kereru, and blue duck nearby. It's very special."

"I found it very humbling to see men struggling with cancer and opening up and sharing joy and suffering with each other," he says.

Since his experience as a fishing buddy, Tom has approached chief medical advisors in other DHBs to interest them in the Reel Recovery philosophy so men from elsewhere in the country can enjoy this opportunity.

Tom says it is often partners and wives who encourage men to take that leap. "Sometimes men can be resistant to the idea at first because it is so far outside their usual experience. But once they do it, it is just a wonderful thing for them".

Ask in Waikato Hospital's Oncology wards and clinics for more information about Reel Recovery or contact Craig Caldwell craig@reelrecovery.org.nz, or google Reel Recovery NZ.

The programme runs on charitable donations and sponsorship, and enquiries are welcome from those who may want to help.

The next Reel Recovery retreat will be held in early 2016.



Fergusson doing his rounds with owner Gill Ballard and patient Doreen Cornwall Photo courtesy of Fairfax Media/Waikato Times.

"Gentle Giant"

Fergusson is a four-year-old Maine Coon, one of the largest domestic breeds of cats, with some males known to grow to more than 15kgs. Fergusson weighs in at a trim 10.5kgs.

Fergusson, also known as the gentle giant, has been visiting Waikato Hospital's Older Person's and Rehabilitation patients with his owner Gill Ballard for two years now.

His volunteer work as an authorised therapy cat was recognised by hospital staff and he was nominated for a Minister of Health Volunteer Award.

"If a patient can't have him on the bed, he will sit on my knee and just put his paws on the edge of the bed and put his head down as if to say, 'come on, stroke me I'm waiting'."

"We will keep volunteering as long as we can, as long as I am able to bring him around," Gill says.

Tom Watson.



"There's no psychological, religious or medicinal stuff. It is simply men talking to men – and maybe learning to fly-fish!"

- Mark Tomsett, Reel Recovery fishing buddy



Kua hingaia te mataamua o ngā nēhi Māori o te motu!

Takoto okioki, moe mai, haere, e te whaea, ki te Matua nui i te Rangi!

Putiputi O'Brien, of Ngāti Awa, Te Arawa and Tūhoe died in August aged 93 years.

She trained at Waikato Hospital School of Nursing in 1941 to 1945, the only Maori in her class, and worked as a general and obstetric nurse and then as a public health nurse in this region all her life.

She was awarded a Queen's Service Order for services to nursing and her community in 1987.

Her commitment to working with and encouraging Māori nurses led to her becoming the patron of the National Council of Māori Nurses on its inception. She was a founding trustee of the Tipu Ora Charitable Trust since 1991; an active supporter of the annual National Māori Student Nurse Hui and Patroness of Smokefree Nurses Aotearoa.

She was also the patron of the College of Nurses, Aotearoa New Zealand.

Hundreds gathered at her tangi on Ruaihona Marae in the Bay of Plenty to farewell her.

In 2002 Te Rūnanga o Aotearoa, NZNO presented her with the Akenehi Hei award to for her services to Māori and nursing.

Putiputi O'Brien said of her work in rural Te Teko, where the only mode of travel was by horseback, "In those areas you were a jack of all trades, as you were the nurse, the doctor and a midwife".

In her long and varied career she was a wonderful and passionate role model. She described herself as "a bridge between two worlds: Māori and non-Māori."

Treating sore throats, stopping rheumatic fever

Waikato District Health Board and its community partners have made a commitment to decrease the rate of rheumatic fever in the region.

Across Waikato more than 150 GP practices, selected pharmacies, Pathlab sites, Maori and Pacific providers and some secondary schools are providing free sore throat swabbing.

"We wanted to make sure parents could drop in to access sore throat swabbing in an environment they felt comfortable, and at a time that was convenient for them," says project manager Michelle Morley.

The results have meant this winter more sore throats caused by the bacteria Group A streptococcus (GAS) have been diagnosed and treated. A GAS sore throat, if left untreated, leads to rheumatic fever in about three per cent of patients and causes irreversible heart damage. In the Waikato the disease disproportionately affects Maori and Pacific children and is associated with access to primary care, social deprivation and crowded living conditions.

THE STATS

From April to July this year, 2150 eligible children and household members were swabbed by 150 swabbing services. Of those, 437 had positive GAS results and received free antibiotic treatment.

Waikato DHB's Te Puna Oranga (Maori Health) team coordinates a healthy housing project – Whare Ora - which aims to assist families in making homes warmer, safer and healthier for high risk children.

So far Whare Ora has completed 95 healthy homes assessments, provided 70 families with heaters, 39 with blankets for the winter and 29 with physical beds.

This programme is another strategy in preventing rheumatic fever.

While the campaign to reduce rheumatic fever in the Waikato is still in its early stages the intervention is hoped to see a reduction in numbers by July 2016.

THE NATIONAL FOCUS

Health Minister Jonathan Coleman says national rheumatic fever rates have dropped significantly.

"The Government is committed to making progress on issues that affect our vulnerable young people," says Dr Coleman.

"It is great to see that rheumatic fever rates have continued trending downward since 2013. The latest figures show a 24 per cent decrease in first episode rheumatic fever hospitalisations since 2012. This reflects the hard work being carried out in communities most at risk of rheumatic fever.

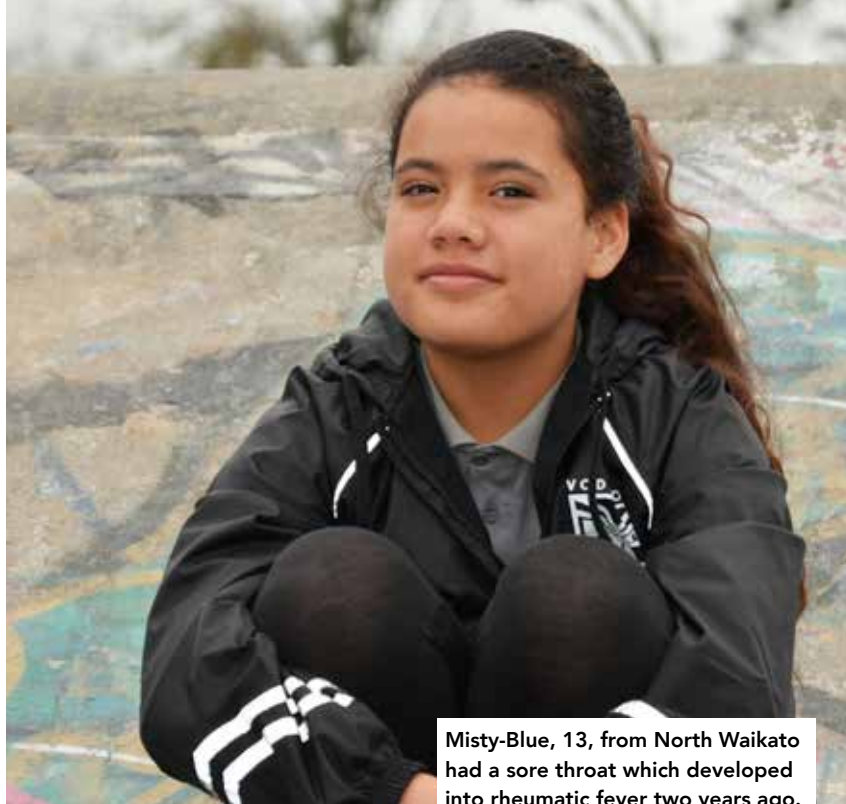
"The Government has invested more than \$65 million on a range of initiatives in high incidence areas to prevent rheumatic fever.

"These initiatives are making a difference, but there is more work to be done towards reducing rheumatic fever by two thirds by June 2017, as well as ensuring gains we make now are sustainable."

"IT'S NOT COOL TO TAKE THE RISK"

SORE THROATS
RHEUMATIC FEVER
HEART DAMAGE

A sore throat can lead to rheumatic fever, so every time your child has a sore throat please take them to a GP, Pathlab or selected pharmacies



Misty-Blue, 13, from North Waikato had a sore throat which developed into rheumatic fever two years ago.

Misty-Blue's story

Living with chronic heart damage is not something many of us associate with children but for some children in the Waikato this is still the case.

Misty-Blue, 13, from Huntly was diagnosed with rheumatic fever when she was 11. For her and her family, the experience of spending months in hospital and now going through the ongoing treatment has completely changed the course of her young life.

As a result, Misty-Blue wants others in her community to be aware of what a simple sore throat can lead to. She is the face of the local community campaign that shares her story with peers and families in the area and, through online media, with a much wider audience.

Rheumatic fever is caused by Group A streptococcus – a simple throat infection. If not treated approximately three per cent of “strep” patients could develop rheumatic fever which can lead to irreversible damage to the heart valves. In the Waikato the disease disproportionately affects Maori and Pacific children and is associated with social deprivation and

poor living conditions.

But North Waikato had a plan. This winter local schools, pharmacies and health providers have joined together to fight rheumatic fever as part of the national push to end the disease.

Raukura Hauora o Tainui rheumatic fever prevention coordinator Melissa Epiha with Lyn King of Waikato DHB's Population Health have spearheaded the campaign with a hope to reduce the number of cases found in Huntly and Ngaruawahia.

“It's about raising awareness and education about rheumatic fever in the home, school and community and providing the support for whanau to access free services that can swab a sore throat – anytime and anywhere,” said Melissa.

The campaign uses several strategies including media, school newsletters, posters, community events and teachers kits.

“Our focus is addressing a community problem with a community solution. A strong community sense of belonging and pride is a key factor in having a successful campaign.”

DID YOU KNOW...

New Zealand has 160 cases a year, with the cost of hospital admissions for rheumatic fever and rheumatic heart disease totalling \$12 million a year. Waikato has some of the highest rates of rheumatic fever in the country and data shows that between 2004 to 2012 a quarter of the new cases diagnosed in the DHB catchment came from Waikato District Council's catchment which encompasses Huntly and Ngaruawahia.

Dr Clyde Wade retires

He has literally touched the hearts of thousands, but what makes Dr Clyde Wade proud is building a cardiac service that reaches more patients than he ever could treat personally.

Clyde Wade was born and educated in Tauranga and earned his medical degree at Otago University. He then worked in Wellington as a house surgeon and registrar before spending four-and-a-half years in London.

His arrival in 1982 at Waikato Hospital was quiet and understated but within five years his appointment would prove instrumental in developing a cardiac surgery service for Waikato Hospital.

By 1990 the Cardiac Surgery service was running and Clyde, along with Hamish Charleson and John Ormiston, were conceiving plans to introduce coronary angioplasty. Four years on Waikato Hospital was the first to offer 24/7 primary angioplasty services, a decade earlier than anywhere else in New Zealand.

Since 1989 Waikato Hospital Cardiac Surgery and Angioplasty services have treated over 24,000 patients and done more than 600 cardiac surgeries and 800 angioplasty procedures a year. Waikato Hospital is considered a leading cardiac centre in Australasia.

“First and foremost Clyde has been a clinician with a genuine love for his patients and staff.”

Clinical nurse specialist Catherine Callagher has worked alongside Clyde for more than 20 years. She describes the man as funny but never too busy. “He has a love for his patients, he will sit next to them and deliver bad news, comfort them. He is totally human but he also has this cheeky sense of humour and Clydisms that just resonate with everyone. For example sometimes after a patient has had a cardiac episode and is mended and on their way home he will say ‘You’ll probably live to 90 and be shot by a jealous lover’.”

Dr Clyde Wade retired from Waikato Hospital at the end of July this year after 33 years as a cardiologist, and will spend his retirement tending his 50 acre deer farm in Temple View. He will retain his current position as an elected Waikato DHB board member.



Dr Clyde Wade

Family Violence affects everyone on varying levels, both those directly involved, neighbours and the wider community. The broader cost of family violence is carried by all the community. At its most fundamental level, family violence is an abuse of another's human rights to be safe and free from violence, oppression, abuse and fear, something that many of us take for granted and for others is almost non-existent.

The primary victims are predominantly women and children although there is a growing number of male victims who could be experiencing abuse at the hands of another male e.g. father/son, new partner/ex-partner, same sex relationships, siblings or could be a female perpetrating the violence. The message is the same – family violence is intolerable in any form against anyone!

Tactics of family violence can vary from yelling, swearing, put-downs, name calling, threats, breaking things, mind games, throwing things, pinching, punching, kicking, hitting and can also involve using weapons.

Other behavior includes stopping another person from doing something such as going out, talking with family/friends, stalking, checking who they are seeing, talking to, texting, emailing, skyping – in fact electronic media has become another mechanism to abuse others whether family or not. Other actions can involve forcing a person to do something against their will/beliefs or punishing a person for doing or not doing something.

Family violence often leaves people feeling scared, alone and isolated. Those experiencing family violence may feel ashamed or embarrassed and may not tell others or ask for help. They may be told they are to blame for the abuse against them and the harder they try to please the person abusing them, the more vulnerable they may become. They need help to understand that abuse against them is not their fault.

Children all too often witness or hear the abuse and can also be direct victims of family violence. Threats against the children is another tactic to keep the adult victim under control. Children who witness family violence are affected and their own wellbeing suffers too.

We can all play a role in supporting this issue to end. If possible, in a safe way, offer help to someone you know is being abused such as a family member or even neighbour – break that isolation for them, be prepared to call the police when necessary. Have the courage to say this is not acceptable and act upon it.

-Lila Jones, Manager HAIP

We ask because we care

Family violence has a massive impact on the physical and emotion health of those who are affected (see article on this page).

So please don't take offence if our staff ask you about it – it's part of their job to check if things are okay. We ask because we care.

Each year New Zealand has a White Ribbon Day in November to raise awareness of family violence and in particular men's violence towards women. The aim is for men to take ownership of the issue, actively engage all men to end violence towards women and children, and themselves model good behaviour.

White Ribbon Day is driven by a campaign team and community groups in towns and cities throughout New Zealand, supported by many businesses, cultural groups, sporting teams, local government and a wide range of community and government agencies.

Waikato is no different, and a big event is planned on the day (25 November) at a Hamilton location – so keep your eyes and ears open for details of that, and come along to show your support.

Waikato DHB will be putting its support behind the day, with representation at the event and plenty of promotion at its facilities.

The theme this year is Respectful Relationships and the focus will be on sexual violence and the issue of consent.

HAIP (Hamilton Abuse Intervention Project) is one Waikato organisation dedicated to preventing family violence. Manager Lila Jones (photo left) and Ikimoke Tamaki-Takarei are working with a group of Waikato Hospital staff – including Waikato DHB's Family Violence Intervention coordinator Kim To'angutu – to extend family violence awareness right through to the Christmas and New Year period.

"That's the time pressures come on and stress can bring things to a head," Ikimoke says.

"We want people to share the things they do to calm down and get control of themselves, when they feel things starting to escalate.

"It's about men feeling able to reach out for help to manage their feelings and responses, and about women knowing where to go if they don't feel safe."



From left: Lila Jones and Ikimoke Tamaki-Takarei.

IF YOU WANT TO ASK FOR HELP, CALL ONE OF THESE SERVICES:



Hamilton Abuse Intervention Project **07 834 3148**

Hamilton Refuge and Support Services and Māori Women's Refuge **07 855 1569**

Parentline **07 839 4536**

Police/Ambulance **111**



- It's OK to ask for or offer help
- If you know someone who is being frightened or intimidated by the behaviour of someone else, it is not OK.
- Violence isn't just physical. It's also emotional or verbal behaviour used to control someone through fear.

App brings support to breastfeeding mums

Mothers and health professionals have welcomed a new smart phone app because it provides "one source of information all on one app, reducing the need for lots of resources."

BreastFedNZ is a free app available on Apple and Android devices.

The app was developed by the Midland Maternity Action Group (MMAG), in response to feedback from a 2013 study which identified a need to harness smart phones to provide new mothers with instant user-friendly advice.

Written by experienced midwife, lactation consultant and Baby Friendly Hospital Initiative coordinator Karen Palmer, the app provides simple, consumer-focused information, alongside illustrations, photos, video clips, web links, and personal stories.

BreastFedNZ contains three chapters covering pregnancy and birth, the first few days, early weeks with a further three chapters - breastfeeding the older baby, twins and early babies - due for launch in October. Answers are also provided to common questions.

Comments from some of the mums who attended the launch function:

"It's beautifully written and in a way that has a hint of humour coming through."

"It's a confidence builder."

Quotes from some of the health professionals who attended the launch function:

"I can take it around on our visits and use it on the spot. It will be good for me as a kaimahi to use with our mamas." - Erena Koopu, Te Ha Ora Māori antenatal classes, Pirirakau Hauora.

"There is so much information out there so it's good to have one source of information for health professionals and mums. It's all on one

app so you don't need lots of resources." - Te Rina Joseph, Hei Tiki Pumau antenatal and parenting programme, Huria Trust.

"We are excited for mothers to be able to now access breastfeeding information and support so easily using this app." - Mel Arnold, Health Improvement Advisor, Toi Te Ora - Public Health Service.



Download the app on this website: www.breastfed.co.nz

Let's talk

National Patient Safety Week this year is from 1-7 November, and the theme is **Let's Talk**, with a focus on consumer engagement and communication.

Why that theme?

Because good communication can make the experience of health services a better one - in terms of safe treatment and care and also how a person feels.

This year Patient Safety Week will look at a range of things Waikato DHB can do to promote better communication between staff and patients and among staff.

During the week you may see life size cut outs of clinicians, posters, tip sheets about planning for a clinic or GP visit, and new 'airline-style' laminated cards for each hospital bed just like you get on a plane (see article below), all promoting patient safety and good, clear communication.

Information card helps patients "take off and land" safely

From November onwards many of our wards will start using this 'airline-style' patient safety card. It is based on the concept of safety advice given on aeroplanes before take-off.

For hospital patients, the cards will be a simple reminder of good safety tips and useful things to know - for example, hand hygiene to stop the spread of infection and asking questions if there is anything they don't understand.

The card (and the video that goes with it) also has simple advice on preventing things like falls, blood clots and pressure ulcers.

The card is produced in New Zealand by the Health Quality and Safety Commission and if it proves popular it will be made available in other languages. It is adapted from a similar card used by all National Health Services Trusts in England.



Big Latch On

Once again Waikato registered a significant number of "Latch On" venues for the Big Latch On in August - in Taumarunui, Te Kuiti, Otorohanga, Te Awamutu, Tokoroa, Morrinsville, Paeroa, Thames, Waihi, Huntly and five in Hamilton - where women could gather for a synchronized breastfeeding session to help publicise the importance of breastfeeding and the acceptance of women breastfeeding.



Waikato Hospital hosted two events - one in the post-natal ward, the other in NICU (Newborn Intensive Care Unit) with 16 'latches', and the DHB's Māori health service Te Puna Oranga promoted a large event hosted by the Lido Cinema in Centre Place Hamilton.





2015 APPEAL
WAIKATO HOSPITAL

Our wishlist
for 2015



Waikids Madison and Bunny with Stacey Morrison from The HITS and Cheryl Reed, Countdown store manager.

Countdown Kids Hospital Appeal 2015

Patients in Waikato Hospital's Waikids wards enjoyed a visit from two local celebrities in August as they handed out trolleys full of gifts promoting the Countdown Kids' Hospital Appeal.

Stacey Morrison and Paul Flynn from The HITS radio spent time interacting with children in the hospital's newly refurbished Waikids playroom before making a visit to our paediatric surgical ward.

The Countdown Kids Hospital Appeal is now in its ninth year and has raised a total of more than \$8 million for 14 hospitals across New Zealand in that time.

Last year Countdown Waikato donated \$110,813 to help the health board purchase a

range of equipment to aid paediatric care at Waikato Hospital and for the first time at our hospitals in Tokoroa, Te Kuiti and Taumarunui.

Of that \$110,813 more than \$33,000 was raised by the Cambridge Countdown store alone, which was also the most amount of money

raised by any store in New Zealand. People can contribute by purchasing a \$2 wristband or making a donation at a Countdown checkout.

This year Waikato DHB has put out a call to help purchase a resuscitaire, which is used

to resuscitate and transport newborn and premature babies, a BrainZ monitor which is vital in assessing brain function in newborns, and a retinal camera to assess babies' eyes development.

"The hospital has given us a massive challenge to meet but we know that our communities and Countdown are up for it."

