

CEO NEWS UPDATE

March 2019



This year has moved at such pace and with little let-up in events from strike action and other incidents. My apologies for this very late newsletter – the first of the year.

The events that occurred in Christchurch last week and the huge tragedy we have seen unfold is hard to comprehend. My deepest sympathies go to the people of Christchurch, and the people directly affected; the victims' families, friends and their colleagues.

We have offered to support Canterbury DHB in any way we can. Some of our staff have already travelled down to assist. Christchurch Hospital is coping with an unprecedented and harrowing event affecting all of their services. We will do whatever we can to support them in the coming weeks and months, as this event will truly take a toll on people's resilience, once again.

We have learnt that one of our locum physicians Dr Amjad Hamid, a senior medical officer who worked at Hawke's Bay Hospital earlier this year on B2, was at the mosque at the time of the shooting and was one of the victims in the attack. He lived in Christchurch with his wife and family but worked in Hawera and travelled around the country working as a locum. Head of Medicine David Gardner said everyone who worked with Dr Hamid at Hawke's Bay Hospital commented on his kindness and compassion for others. Our thoughts are with his family, friends and colleagues who worked with him at this very sad time.

Saturday lockdown

Last Saturday a concerning note was found on the floor in Hawke's Bay Hospital. This saw an immediate response by police. As a precaution the hospital was placed in lockdown, while police assessed the threat. I'd like to thank each and every one of you that responded to Saturday's event – emergency response management including security staff, the call centre which was inundated with calls, the leadership from the hospital duty managers and other staff who came in to support.

I would also like to thank St John for rapidly responding to the situation. Their collaboration with the acute and medical centres in the region enabled the public to continue to receive emergency care offsite from the main Emergency Department. Debrief sessions are being held and learnings from this event will be shared.

I understand how this event, in light of what happened the day before in Christchurch, could be very distressing. If anyone is feeling anxious or just needs someone to talk to, a trained counsellor is available to free call or text any time on 1737 or by contacting EAP counselling services on 0800 327 669.

NEED TO TALK?

1737

free call or text
any time

Sterilisation incident update

As you know, we are investigating how a batch of equipment used in the hospital operating theatres and community settings was dispatched without completing the full sterilisation process. External reviewers have been at the DHB this week and a final report is expected to be completed by mid-April.

It has been a tough start to the year and we have all witnessed some traumatic scenes and many of us will know someone or a family directly affected in the Christchurch tragedy.

We need to support each other. I encourage you all to look after yourselves, practice self-care, check in with those around you and access the free support available.

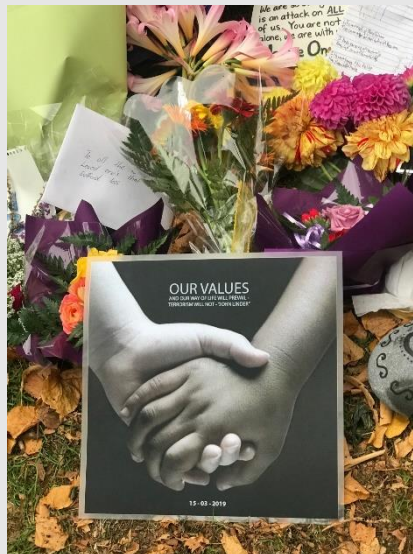
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My personal impression of how New Zealand has responded to this terrible event is one of admiration of a country standing together with empathy and compassion for the victims and the Muslim community. New Zealand's political leadership and the incredible dedication from so many individuals in the Canterbury health system have shown the world how to manage such terrible atrocity.

I was sent this photo (right) from the remembrance wall of flowers in Christchurch, and I thought it was poignant and worth sharing with you all.

Whiria te tangata
Weave the people together

Kevin Snee
Chief Executive, Hawke's Bay District Health Board



New Zealand Defence Force joining forces to deliver dental care

About 500 high-needs patients from across Hawke's Bay have received dental care and treatment through the New Zealand Defence Force's (NZDF) dental outreach programme with Hawke's Bay DHB over the past two weeks.

This has been a great initiative and part of NZDF training. We know how poor oral health can cause pain and other harmful effects on daily life, so we are pleased our joint initiative has had a positive and tangible impact on hundreds of people.

Support from the community has been wonderful and Bernard Te Paa, Executive Director – Health Improvement and Equity said the feedback across the region, from Wairoa to Central Hawke's Bay, had been one of gratitude.

Mr Te Paa said the combined team of military and community dentists worked well together.

Local business have donated fresh fruit, bottled water and generators to help support the outreach.

Mr Te Paa said health promotion sessions at a number of local schools were also well-received. These were a great way for students to learn about the importance of good oral health as well as being able to take those messages home so the whole community can benefit.

The DHB would like to thank the wonderful organising team led by Charrissa Keenan. The NZDF said it was the best outreach set-up they had been to, thanks to the wonderful organisation from the DHB team, amazing support from the community dentists and the community itself.



Commitment to reducing the DHB's carbon footprint

HBDHB has committed to measuring and reducing its greenhouse gas footprint by signing up to the Certified Emissions Measurement and Reduction Scheme CEMARS®.

This is a significant step toward better understanding and measuring our greenhouse gas footprint – one of several initiatives we will take toward minimising our impact on climate change and reducing our impact on the environment.

Our DHB is one of several now joined up to the CEMARS® scheme and certification includes all our sites – Hastings, Napier, Wairoa and Central Hawke's Bay.

If you're in Hastings, please come along to the Sustainability, Climate Change and Health Grand Ground on 3 April at 12:30pm to learn more.

[You can view the DHB's sustainability initiatives as well as our CEMARS® certification and planning here.](#)

Our People Plan



This year is the launch of our People Plan – a 5-year working document that sets out a clear pathway of what's important to us and what we'd like to achieve across all of our core values:

HE KAUANUANU RESPECT – showing respect for each other, our staff, patients and consumers

ĀKINA IMPROVEMENT – continuous improvement in everything we do

RARANGA TE TIRA PARTNERSHIP – working together in partnership across the community

TAUWHIRO CARE – delivering high quality care to patients and consumers

This plan has been developed following staff and consumer feedback from The Big Listen. Valuable information and insights were gained from The Big Listen and we are committed to enhancing our workplace and places of care for all.

I encourage you to view the plan to understand the direction we are heading toward.

[Read more of the Our People Plan here.](#)

Our People Plan

"The people who work for us are our greatest asset. To make sure we meet our people's expectations of what it means to feel supported and engaged, we are committed to working together so we can provide high quality care to our community.

We undertook The Big Listen, a series of staff engagement workshops, to understand what it was like to work here, and what mattered the most to you. This plan responds to your feedback.

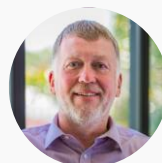
We know a well-skilled, supported and engaged workforce supports high quality care. Therefore our endeavours must be person and whanau-centred through a values-based culture where behaviours and values are at the heart and centre of everything we do. However, for this to have any meaning, our actions must deliver on our words – that is our commitment to you."

He aha te mea nui o te ao?

What is the most important thing in the world?

He tāngata, he tāngata, he tāngata.

It is the people, it is the people, it is the people.



DR KEVIN SNEE
CEO



KEVIN ATKINSON
CHAIR



NGAHIWI TOMOANA
DEPUTY CHAIR

Clinical Services Plan:

A road map toward the future of our health care services in Hawke's Bay

This year significant work will get underway on implementing our region's Clinical Services Plan. The final draft plan was submitted to the Board in November for review and endorsement.

The endorsed plan was the result of extensive consultation with our health professional workforce (both primary and secondary care), as well as support groups and regular users of our health system.

This information gathering shone a light on what the Hawke's Bay health system does well, and where things need to change to meet the challenges of the future. There is a strong emphasis in the plan on stamping out health inequities, changing the focus of hospital services and delivering more community-based care, closer to home.

What happens next?

The CSP will be integrated with various other strategies to form the new overarching Hawke's Bay Health Strategy. A working group has already been formed to develop this, and subsequent implementation plans. Regular updates will be provided to staff.

The plan sets out a range of options with strong themes being:

- prioritising services to meet the needs of the populations with the poorest health and social outcomes
- investing more in preventative strategies and keeping people well
- evolving primary health care (providing more care at medical centres/pharmacies + specialist appointments/care, including long term conditions, within the community)
- working with whānau to design the services they need (breaking the health inequity cycle)
- relevant and holistic responses to support mental wellbeing
- keeping older people well at home, and in their communities, longer
- hospital care/services more defined.



[You can view the plan here.](#)



Health Equity Report

Prior to Christmas, the DHB released its third Health Equity Report.

The report provides a stark reminder that constant attention and new ways of working are needed to eliminate inequities in health.

This report and the Clinical Services Plan now provide a pathway for future direction that will focus more on Kaupapa Māori and whānau-centred approaches – something we believe will make real in-roads into reducing and eventually eliminating inequity.

Our bleakest reminder within the report is that Māori,

Pacific people and people living in areas of greater socio-economic deprivation are still more likely to die early from avoidable causes.

For Māori, avoidable deaths could be reduced by a quarter by improving heart health, and another quarter by addressing the current rates of mortality from lung cancer through smokefree living and by addressing the underlying causes of suicide and vehicle crashes.

However, the report did provide some good news, highlighting a number of success stories arising from effective community partnerships.

We know from successful programmes both in Hawke's Bay and elsewhere that tackling inequity requires system and culture change. There are many components to this and health can't do this without the support, focus and commitment of our community partners.

I encourage each and every one of you to view this report – [available online](#).

Of interest may also be a life chart in the report, which illustrates the importance of equity across the course of life, and tells the story of how events earlier in life influence health as we age.

Executive Director of Health Improvement and Equity

In January we welcomed a new member to the team, Bernard Te Paa, who takes up the newly created position of Executive Director of Health Improvement and Equity.

Bernard brings with him an enormous amount of skill and achievement from working in a variety of leadership positions in public sector, kaupapa Māori and mainstream roles.

He worked as general manager of Māori health at Counties Manukau District Health Board for many years before moving to take on a key strategic role for Auckland Council, as Māori outcomes manager and head of Māori policy. His most recent position was Hoe Whakatere, Regional Director of Te Wānanga o Aotearoa where he led the management and delivery of 47 tertiary courses.

I am delighted Bernard accepted this role; his skill, knowledge and achievement will help us deliver and improve health equity to our Hawke's Bay communities.

Bernard has a strong desire to see rangatahi (youth) achieve to their full potential and this, coupled with his managerial skills and ability to problem solve, will hold us in good stead as we look forward to a new year.



Thank You Dr Andy Phillips

I would like to thank Dr Andy Phillips for his hard work and leadership in bringing together the new Health Improvement and Equity directorate.

Andy was seconded to the position of Executive Director of Health Improvement and Equity until a permanent placement could be found. In stepping across to this role from his allied health responsibilities, Andy forged a great working relationship with the team and supported them admirably during this period of change.

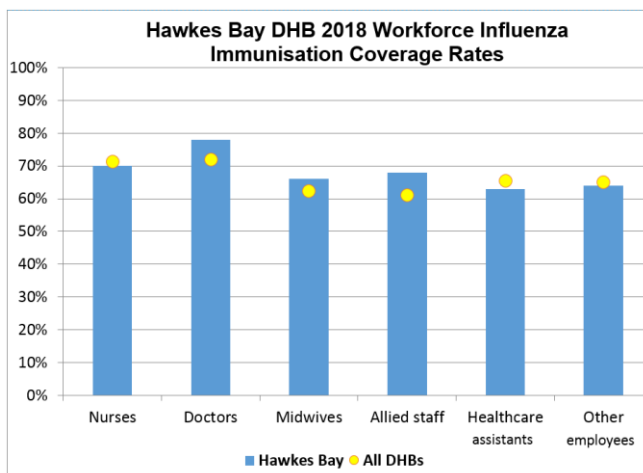
The wider team thanked Andy at a morning tea in early January prior to Bernard Te Paa's arrival. I am sorry I was away on leave and missed this occasion, but it goes to show the respect and mana held for Andy by the wider team. Andy has since moved into the role of Hospital Commissioner.

Hawke's Bay staff flu vaccination rates impress!

In 2018 the Ministry of Health set an ambitious goal for DHBs to have 80 percent of staff immunised annually against influenza. We had a really successful lift in immunisation rates in 2018 (65.4 percent –up more than 10 percent on 2017) and it was great to see that we performed well compared with other DHBs in a recently published [report on the Ministry's website](#): seventh equal in terms of overall rate.

This is a fabulous result, reflecting a real team effort, and one that makes a difference to the health of our staff and the patients they care for.

Let's try and improve even further this year.



Note: table above shows HBDHB immunisation rates compared to the national average; figures do not include staff who received their vaccination through their GP or elsewhere.

Students experience theatre

Every year Hawke's Bay District Health Board provides secondary school students interested in a health career with the opportunity to gain insight first-hand through its Programme Incubator initiative.

Programme Incubator has been running for 12 years, with around 300 local students taking part each year. The experience has seen many former incubator students embark on a career in health with a number of former graduates now working at Hawke's Bay Hospital – in laboratory, physiotherapy and nursing roles.

In December, eleven students were offered the opportunity to observe procedures in theatre – from meeting with the patient through to observing the procedure itself.

Thanks to Periop Clinical Nurse Educator Amanda Martin, students were matched up with theatre teams to observe Vascular Surgeon Albert Lo undertake an abdominal aortic aneurysm procedure; and Surgical Head of Department, Grant Broadhurst, perform a thyroidectomy (complete removal of thyroid gland).

Students wrote letters after their experience, thanking the DHB for the unique opportunity. They spoke of how welcomed they felt by DHB staff, how honoured they were to sit in with the patients prior to surgery, their awe of the skill and professionalism of our clinical teams, and how the experience had made them more determined to become healthcare professionals.



Students Hena and Jayden, gowned up and ready to go!

Thanks to all involved. Hopefully we will see these students back one day as clinical professionals.

Programme Incubator aims to introduce secondary school students to the 'touch and feel' of health, encouraging development of health careers across a wide spectrum of clinical and non-clinical roles.

[Read more here.](#)

Saturday electives have begun

In a move to increase our provision of service for elective surgeries, we introduced a permanent Saturday elective operating list which began on 2 February.

The reason for introducing Saturday electives is because the demand continues to increase. There was a genuine need to provide more operating sessions, given ongoing impacts to elective waitlists due to high demand for acute surgery, coupled with more demand for electives – reflective of our growing and ageing population.

Day case surgeries are planned on these Saturday lists. However, in instances where there are no sufficient day case patients on waiting lists, liaison will occur with wards prior to Saturday bookings to discuss if appropriate resources might be available for post-operative inpatients.

I would like to thank staff involved for working hard behind the scenes to introduce this service and get it operational.

Letter of thanks

Our DHB receives many messages of thanks from patients and we can sometimes forget about this, which is why I'd like to share this one with you about care received in our Emergency Department over Christmas:

I'm sending this to you for passing on as I'm not sure how else to do so, but on Christmas night after being in a good deal of pain for 24 hours (thinking I was on track for another kidney stone), I found myself in A&E needing some assistance with a medical issue. I know how busy they are in there and I would only ever go in if I had to.

I'd rung the medical centre and was outside their coverage and after talking to a nurse on the 0800 number I was advised to come in. Anyway enough of that. I just wanted to pass on that from the time I came in I was treated with respect, empathy and with the utmost professionalism.

From the ladies at the counter, to the nurses that spoke to me initially, then Doctor Sophie in ED and the ladies at X-Ray. They were all fantastic.

I'd like to make special mention of Sophie the doctor. She was amazing and even my wife commented on the way home about what a positive experience it was with her. She actively listened to my symptoms and concerns. She asked for the relevant tests and reassured me that coming in was the right thing to do.

She then worked through a clear process to ensure she was happy that it was nothing really serious. Her manner was outstanding and she was a credit to her profession. As a patient she could not have done anymore for me and I went away feeling very relieved and reassured. I am very grateful to her for that.

I'm sorry that I didn't get her surname or a chance to thank her in more detail, but I think she was English as she had a bit of an accent.

Look, I'm sure you get lots of people complaining but after the experience I had on Christmas night I just wanted to let someone know that we felt very well cared for and I have nothing but huge respect, praise and thanks for the staff at ED. They do such an amazing job and if the service I received from them is the standard that is being delivered to the public then the HBDHB should be really proud of them because it was fantastic and I just wanted to pass that on.

I know the challenges they face in there on a regular basis and the upbeat mood that they present in there is a credit to the HBDHB. I hope they will always provide them the ability to carry with the great and often unappreciated work they do in that part of the business.

Retirements

After 37 years working for the hospital Heather Blackwell, pictured (centre), was recently farewelled. Heather commenced with Hawke's Bay Hospital Board in August 1982 as a clerical assistant in the X-Ray department. A couple of years later she moved to the School of Nursing and in 1992 became one of the medical typists for the Paediatric Department. In 2005 Heather moved to support the Ophthalmology Department as a medical secretary and concluded her career with this team as their medical typist.



The following people also recently retired from the DHB. We thank them for their service and wish them well in their retirement.

- **Dale Littley**, Team Secretary surgical services
- **Diane Rarere**, Sterile Services
- **Ellen Apatu**, Care Associate – Older Persons and Mental Health
- **Robyn Rox**, Physiotherapist – Older Persons and Mental Health
- **Ann Wallace**, Care Associate – Older Persons and Mental Health
- **Beth Danrell**, Care Associate – Operations Directorate
- **Anne Carr**, Registered Nurse – Surgical Directorate
- **Jennifer Streeter**, Family Therapist – Older Persons and Mental Health
- **Pauline Loughran**, Registered Nurse – Medical Directorate
- **Sandra Burton**, Registered Nurse – Medical Directorate
- **Helen Anderson**, Social Worker – Older Persons, Allied Health and NASC