



## Enjoy your summer lighter and brighter.

Lose weight without losing your lifestyle! DHB Staff have collectively shed hundreds of kilos since the "Weight Watchers @ Work" sessions started in August 2008.

### The next "At Work" Weight Watchers block of 13 weeks will start on Friday 5th February.

The meeting Leader, Bernadine McGruddy, will be on site between 12.00 – 1.30 pm on Fridays, running half-hour sessions. You can attend at any time.

We need at least 12 people to register in order to run the course.

The "At Work" series means that you must sign up for all 13 sessions. Your subsidised cost is \$15.95 per meeting (Total of \$207.35). Payment can be deducted fortnightly from your salary for 6 paydays.

To register or for more information, please contact:

Sue McAuley (06) 946 9892 or ext 5892  
Email [sue.mcauley@wairarapa.dhb.org.nz](mailto:sue.mcauley@wairarapa.dhb.org.nz)

Anna Stuart (06) 370 5020

Email [anna.stuart@wairarapa.dhb.org.nz](mailto:anna.stuart@wairarapa.dhb.org.nz)

## Walking the talk



June Rosingreave and Jill Trower are well known around the hospital as our Cardiac Rehab nurses.

Over the last year, they have shed more than 30kg between them, by taking part in the [weightwatcher@work](mailto:weightwatcher@work) programme. They both say that working together has been a big support, as they vied to have the biggest 'skite' after each weekly weigh-in.

"The timing was just right," says June "We'd both put on weight, and we both wanted to do something about it. We were really uncomfortable standing up and delivering sessions on food and nutrition to the cardiac rehab

classes - now we can do that with confidence, speaking from personal experience."

"We're both grandmothers now," says Jill. "We wanted to be fit, lively grandmothers. Now I can run round and bounce on the tramp with my grandchildren."

June agrees. "I can get down on the floor easily with my littlies - a year ago I couldn't do that," she says. "It's also brought my blood pressure under control."

Both say the journey was hard at times, but that they now have new tools that will last them for the rest of their life. "I don't ever want to have weight swings and be that big again," says Jill.

## Small town, big sounds

Social Club Event - Saturday 27th February 2010, 1 – 8.30pm

Tui Brewery is opening for an epic day of music and entertainment from some of NZ's finest performers, Evermore, Supergroove, The Beat Girls, Cassius, Deaf Lemon and Skaper.

Stretch out on the green in the summer rays, surrounded by good mates, family, Tui Brewery Girls, sweet beats and a thousand other Tui lovers. Mix this all together and you get an epic day not to be missed for 2010!

"Small Town, Big Sounds" is a fully licensed event. Strictly no BYO.

Cost: \$65 social club members (non members \$80)

This cost includes: Transit bus to and from event, entrance ticket and one free beer on arrival.

Money to Gillian in Quality or Julia in Mental Health.

Tickets are limited.



## Wairarapa DHB SOCIAL CLUB ACTIVITY

(In conjunction with Masterton Tramping Club)

## Day trip to Mount Reeves

Mt. Reeves is a peak on the eastern side of the Tararua ranges, it has a modest height of 899m but an old fire has opened up the bush on the summit. There are good views over the patchwork of farmland in the Wairarapa plains and west into the hills. It has the distinction of being part of the original route over the southern Tararuas, first pioneered in the 1930's.

When: Sunday 31st Jan 2010

Meet: Car park beside police station in Church St

Time: 8.15am for an 8.30am departure

Fitness level: Moderate (3 hours each way)

Bring: Suitable clothes, hat, sunscreen, water, food for the day, camera & binoculars.

Cost: No cost to tramp but you will need money for car pooling.

Registration: Contact Gail (email) or Ph Pharmacy Extn 4250. Register by Thursday 28th Jan 2010



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## Primary Care initiatives



Project Chair Dr Tony Becker

Last year the Wairarapa was one of nine areas chosen from over 70 different Primary Care proposals from all over New Zealand, to transform our primary health services. The opportunity arose as part of 'Better, Sooner, More Convenient' (BSMC) - a Government initiative to provide personalised primary

health care closer to home, that makes New Zealanders healthier and reduces pressure on our hospitals.

Now the DHB and PHO are working in partnership to develop that original proposal into a proper Business Case, which must be submitted to the Ministry of Health by 1 March. The Government wants the approved Business Cases to start being put into action 1 July 2010, initially improving the patient experience, and leading to improved patient outcomes where possible over time.

"This project has the power to transform the way many of us work over the next 3 years," says Project Chair Dr Tony Becker.

The changes being suggested all support achievement of the National Health Targets [<http://www.moh.govt.nz/moh.nsf/indexmh/healthtargets-targets>] by addressing areas that are seen as barriers to improving care for patients.

Ideas being considered nationally include:

- Integrated family health centres
- General practice consolidation, where appropriate
- Extended hours of opening
- Improved access to urgent care
- Better alignment of clinical and financial decision making. This may include delegated funding for referred services such as community radiology, pharmaceuticals or laboratory services
- Improved care for people with chronic conditions
- Nurse walk-in clinics
- Self-care and services in the home
- Improved care of the frail elderly
- Improved access to diagnostic services
- Progress towards primary-secondary service integration, including the shifting of some services from hospital settings to local communities
- Keeping people healthy (prevention)
- Whanau ora as appropriate

In addition to the ten work streams being developed locally, there is considerable work being done on the IT systems needed to enable work to be done differently.

## Integrated Family Health Centre

The two largest GP practices in the Wairarapa are to merge over the next 2 months, forming a single integrated care facility in Masterton. "This is the beginning of the establishment of a larger Integrated Family Health Centre model for the Wairarapa. These comprehensive Health Centres are a major feature of current Government health policy and Wairarapa will be one of the first off the block." said Elaine Brazendale, Chair of the Wairarapa Community PHO.

The merged practice is the outcome of the Chapel Street Family Doctors "Expression of Interest" process to find a permanent operator, initiated by the PHO in October. This followed the PHO temporarily taking over Chapel Street Family Doctors, when the practice owned by Dr David and Caroline Nixon, went into liquidation at June 30th, 2009.

The PHO Board had appointed a panel to consider all options. A nationwide call was made for interested parties. Only a limited number of organisations were able to respond effectively, given the shortage of General Practitioners nationally, and the tough economic times impacting on all businesses. Masterton Medical came up with a proposal which is now being progressed.

Chapel Street Family Doctors will continue to deliver services out of their existing premises until the end of the March and full integration onto the current Masterton Medical site is planned by the beginning of April.

Masterton Medical Practice Manager, Jeff Ryan, says "Masterton Medical was originally formed by the merger of four GP practices, and that staff are delighted to welcome the new practice into the organisation." There is the opportunity for most staff to make the transition to the new organisation, and the final details will be worked out over the next 2 months.

Next week a letter will be sent to all enrolled patients at Chapel Street Family Doctors asking them whether they wish to transfer to the new Masterton practice or enrol somewhere else.

Over the next 2 months staff on both sites will be assisted to swap sites and undertake visits so they are familiar with the way each practice operates on a daily basis. "We are looking forward to sharing systems and ideas, implementing

## Primary Care continued

the best of both current operations," says Masterton Medical Practice Manager Jeff Ryan. "We are creating 5 new clinic spaces, and exploring the options around extended opening hours, which will benefit all the community. Both practices already use the same IT system, so that makes the technical side of integration easier," he says.

In parallel to this merger, the DHB and PHO are also considering how the Outreach Clinics at Te Rangimarie and Cameron House are being provided and how the comprehensive services provided by Whaiora may be expanded to include General Practice sessions also. The Masterton Medical Directors have already indicated support for progressing these developments through sharing clinical expertise and leadership. A partnership approach is already being discussed.

Wairarapa District Health Board have been involved in the decision making process over recent weeks and fully endorse this new development. Wairarapa DHB CEO Tracey Adamson says, "We are very pleased to come up with an option that will ensure the continued provision of high quality primary care health services to the population of the Wairarapa. We really appreciate the commitment of the Chapel Street Family Doctors staff who have continued to provide services through some difficult times and uncertainties over the past 6 months. We are excited about the opportunities that the merger with Masterton Medical will bring towards developing a larger Integrated Family Health Centre model for the Wairarapa - which is all about a wider more convenient range of primary care services in the community."

The Wairarapa PHO and DHB would like to reassure the public and Chapel Street patients in particular, that there will be no loss of services. "In fact, this merger creates some opportunities for service development, as we look at how to share the best ideas and systems from both practices and how to integrate other community services with General Practice. The South Wairarapa may also benefit on an outreach basis, from new services developed in Masterton."

## HDC Commissioner visits DHB

Mr Ron Paterson, Health & Disability Commissioner visited Wairarapa DHB late last year, and held a series of interactive meetings with staff. Chief Medical Advisor Alan Shirley would like to thank the clinical staff who attended the Clinical Society meeting, particularly those who led the valuable discussions at the meeting. Mr Paterson spoke to the Board about "vicarious liability" and his desire to avoid "defensive medicine". He developed this further at the Clinical Society meeting, with a focus on the need for clinicians to communicate with and develop meaningful rapport with patients about their clinical

## E-Referrals

Phase 1 of the electronic referrals project is now well underway. This first phase focuses on providing a mechanism for GPs to send an electronic referral to the Hospital Outpatients team. This will improve the referral process from General Practice to the Hospital.

The project aims to improve communication between the hospital, GPs and patients. In particular, the objectives are to improve the quality and relevance of referral information, the speed and reliability of the referral and to improve the level of certainty for GPs around the delivery, receipt and acknowledgement of the referral. There will be regular status updates for those referring the patients and ultimately will improve the service to our patients.

Phase 2 of the project is to support redesigned referrals management workflows within the hospital. This will commence within the next two months. We hope to have the first electronic referral form available for use by March 2010.

A team consisting of representatives from the DHB and primary care will have a plan to ensure there is adequate testing and that training and implementation support is provided.

The project team working on providing this new streamlined electronic referral system includes Alan Shirley, Annie Lincoln, Jeff Ryan, Mair Moorcock, Angela Rowland, Gary Ireland, Alex Marsh, Deb Butterfield and Jessica Hinz. Please feel free to contact any of them if you have any queries.

## Patient information leaflets

January heralded an initial spring-clean by Comms staff of the database of in-house patient information leaflets. These are stored on the G drive in the Projects/Leaflets/mastercopy file. Go take a look and see what is there. We produce these in-house at very low cost, as external print costs are high for such low volumes per print run. Currently there are around 450 leaflets in the directory after the initial cull - some are duplications and we are checking with departments which can be deleted. If you are storing any patient information leaflets in other directories, please transfer them to the Mastercopy file. It's part of the Communications Policy that all leaflets are stored in the one location so they can be periodically audited, updated, and the print quality can be assured. It also means other departments can look at the list, and not reinvent the wheel.

Any enquiries to Jill Stringer, x 5840

conditions and their care. He made the important point that patients cannot take responsibility for something which they do not understand.

Mr Shirley asks those who attended one of Mr Patterson's sessions to send Mary Anne Ashford two messages that you obtained from the meeting, so these can be shared with colleagues.

Mr Paterson gave a memorable oration on "compassion" and explained why he will not be recommending that the Code of Rights legislation be changed to include "compassion".



## Not-so-secret Santas





Dr Susan Perry enjoyed being Mother Christmas at the CAMHS Christmas lunch last month, delighting the staff. Team Leader Sue Willoughby sent in the lovely picture. Special mention must go to Jason from Maintenance, who nobly went where others fear to tread. The story goes like this..... Crisis Respite put on a Christmas party for their clients and the staff in Respite put in a lot of hours baking, decorating, wrapping presents. The presents for the clients were donated by staff.

"It's an awesome party and the clients really look forward to it," says administrator Julia Smout. "It's amazing what you can do on a tight budget."

As the day loomed nearer it became obvious there was no one to be Santa as last year's Santa was not available. Pressure was put on the rest of the staff to be Santa but to no avail. Even the women staff members were asked to be Mrs Claus but none were brave enough to do it.

About half an hour before the party started it was becoming quite a desperate situation and Julia drew the short straw. In a panic stricken state she rang the Hospital Volunteers but unfortunately the volunteer who actually looks like Santa had left half an hour earlier and lived down South Wairarapa. So she called Mike the orderly, desperate asking if he could think of anyone at all in the whole hospital who would play Santa for half an hour just to hand out the presents to the clients.

"Within ten minutes he arrived with our lovely Jason," said Julia. "What a relief. He was more than happy to help us out. We were all so grateful, especially me as it got me off the hook! He did a wonderful job and was full of smiles. It was great to see the clients' faces as well as the few children at the party, light up when he walked in. What an awesome guy Jason is."



**GENESIS ONCOLOGY TRUST**  
**PALLIATIVE CARE LECTURE SERIES 2010**

We are happy to confirm that again Hospice NZ has received funding from the Genesis Oncology Trust to provide the breakfast lecture series in the Wairarapa. All lectures will be held on-site at KAHUKURA at 48 Lincoln Road Masterton, phone 06)370-8436 at 7.30am on the first Thursday of every month, commencing on the 4 February 2010.  
*Anne Savage, Clinical Nurse Educator for KAHUKURA*



## launches new web site

Whaiora launched their new web site last week, and are inviting staff to click on and see how it might help make referrals to their services easier. Just go to [whaiora.org.nz](http://whaiora.org.nz). The new web site has separate sections for service users and health professionals, and an easy on-line multi-purpose referral form.

## Mastered it



*Our congratulations to Liz Fellerhoff (left) and Anna Reed.*

After years of extra-mural study Clinical Nurse Specialists, Anna Reed and Liz Fellerhoff, are celebrating the completion of their masters degrees. Anna has a Master of Health Science endorsed in Nursing from Otago and Liz a Masters Applied in Nursing from Victoria University. A fantastic effort considering they have both been working full time while studying.

"It robbed me of the good life at the time," says Liz, but I would never not have done it." Anna says she removed herself from the house every weekend for three years but "it was time limited with an end in sight. I was really disciplined but I loved it. I wouldn't change it for the world."

They both say their study has benefited them enormously and has opened up a new world of opportunities. "When I started on the journey in 2000 I would never have believed the scope of understanding and knowledge I would gain," says Anna. I have gained contacts throughout NZ, research is now so much more accessible and it has given me huge opportunities for clinical leadership and engagement in health forums. It gives you a helicopter view of the health sector."

Liz agrees and says she also looks at things differently. "I understand the bigger picture now and it has made me realize what a wonderful career nursing is. There are so many avenues and exciting opportunities."

Anna's degree is a clinical one and her dissertation was about embedding the role of the Clinical Nurse Specialist in older people's health. Papers included pharmacology, advanced health assessment and a clinical practicum with a focus on prescribing. Liz did a range of eight nursing papers including COPD, chronic disease, health assessment and palliative care. Their study involved a self-directed programme of reading, assignments and practical study as well as on campus days at the university.

Both are grateful for the support received from the DHB and the Clinical Training Agency. They were encouraged and well supported in their study.