



Excellence

CE Newsletter

Simon Everitt – Interim Chief Executive

4 Feb 2020



New Mental Health and Addictions facilities at Tauranga and Whakatāne

By now I'm sure you will have heard the news, announced by the government last week, that our DHB is to receive funding for two new Mental Health and Addictions facilities. We will be getting \$30 million for a Tauranga facility and \$15 million for one in Whakatāne. It's wonderful news.

First and foremost it's wonderful news for our patients, their whānau and the communities we serve; as they will be the ones who will benefit from these new facilities in the future.

It will give us the opportunity to create two purpose-built, future-proofed, facilities with the needs of patients and their whānau and our staff at the forefront of the design. We will be able to take a fresh look at the way we provide care, taking greater account of the cultural appropriateness of our services, and design these new facilities accordingly. That's a unique opportunity.

The demand for mental healthcare in the Bay of Plenty is ever increasing. Acute mental health services are for those patients who are in need of urgent inpatient care. Acute mental health services include access to specialist

BOPDHB Board Chair Sir Michael Cullen (back row, second from right) alongside staff of the current Mental Health and Addictions inpatient facility (Ward 8) at Whakatāne Hospital.

psychiatric care, intensive psychiatric care and detoxification facilities. All of these will be enhanced within the new facilities."

Our Board Chair Sir Michael Cullen has also warmly welcomed the news.

"In the Eastern Bay, the funding there gives us an opportunity to upgrade our inpatient mental health and addiction facility to one which more appropriately reflects modern care practices, is built around modern design principles and the needs of our patients and their families. Importantly, with our high Māori population in the Eastern Bay, this facility needs to better reflect their needs.

"In Tauranga, our rapidly expanding population means that bed capacity is an issue we will now be able to address. We are also caring for an increasing number of patients locally who have a greater complexity of need. This means we are able to care for these patients closer to home in the most appropriate care setting to support them. This new mental health and addiction facility will more readily enable that.

Construction on the two facilities is expected to get underway in the next 12-18 months.



Innovation and Improvement team formed



Above: Members of the newly-formed Innovation and Improvement Team.

In my last newsletter, I shared with you our strategic priorities for the next 12-18 months.

Whilst achieving these priorities is everyone's responsibility, we are aiming to have more of a co-ordinated effort that will deliver tangible, sustainable and whole system health improvement for our Bay of Plenty communities.

To support this, two teams – the Service Improvement Unit in the Provider Arm and the Service Development and Delivery team in Planning and Funding - have joined together their resource and expertise under the banner of Innovation and Improvement. Their purpose is to provide an organisational focal point to enable, lead and support innovation and improvement efforts across the health network. They will work across the whole system, as a change engine, helping us to coordinate action around our strategic priorities.

"It's a privilege to work with people who have knowledge and experience in leading and enabling large scale change efforts and a track record in building organisational capability to support continuous quality improvement," says Manager Innovation and Improvement Sarah Davey.

"We are aiming to apply a collaborative and integrated approach to improvement. One of our first tasks will be to help the organisation to map out specific actions and activities to support each of the strategic priority areas."

If you are interested in finding out more and networking with others who are undertaking improvement work, there is a Quality Improvement Network Meeting each Monday morning at 9.30am, which is video-linked between both sites.

At Tauranga Hospital this meeting is held in the Nikau Room, whilst at Whakatāne Hospital it is in the Level 1 VC Meeting

Room. Anyone with an interest in, or who is involved in, Quality Improvement projects is welcome to attend.

More information on the Innovation and Improvement Team is also available on the team's OnePlace page.

Allied Health staff education update

At the DHB we recognise the importance of helping our clinical staff achieve their highest potential and, to this end, we're supporting a number of our Allied Health staff in furthering their education.

Our Allied Health Executive Director Sarah Mitchell said: "We are keen to attract not only the best clinicians to the Bay but also to support their professional development and retain their expertise. We have deliberately identified areas of practice which are aligned to the strategic direction of the organisation."

Here's a snapshot of some of the areas those staff members are currently studying.

Jennifer Stillwell – Physiotherapist (2nd year at AUT completing a Doctorate of Health Science)



Jennifer is undertaking research to evaluate the feasibility and acceptability of a Community Orthopaedic Triage Service in New Zealand primary care.

With an ever increasing demand on healthcare services to provide timely access to assessment and treatment for patients with musculoskeletal complaints such as osteoarthritis, there is a growing need for alternative models of care.

Advanced Physios have the ability to examine, provide early conservative management strategies & reassurance to patients that are currently referred to Orthopaedic Surgeons with Osteoarthritis. The aim of the project is to evaluate this model in a NZ context.

Gary McNicholl - Inpatient Physiotherapy Team Lead & Informatics Programme Lead (2nd year at AUT completing a Doctorate of Health Science)



Gary's research is looking into the Care Capacity Demand Management programme (CCDM) for Allied Health.

This is important as Allied Health teams across New Zealand are capturing activity data to show the value-add of Allied Health, and how they can contribute this activity to patient outcomes and improving system level measures.

The overall goal is safe and effective staffing levels for Allied Health which will ensure happy, healthy workplaces, quality care and optimal patient outcomes.

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Emma Green - Project Coordinator

Emma is engaged in research focussed on Allied Health and nursing inter-professional practice and the tools that can be used to progress workforce models from hospital centric/discipline specific to community centric, transdisciplinary ways of working.



This links in with strategic health objective 2 which seeks to strengthen community resource by 'promoting and progressing interdisciplinary community teams to enable people to stay well, and get well', and specifically the Keeping Me Well initiative within the Integrated Health Strategic area.

It will explore the tools utilised with the Bay of Plenty District Health Board to facilitate workforce evolution and explore the outcome for staff around professional, institutional, system and team boundaries and the resulting impact on their practice.

Leigh Haldane, Physiotherapy Professional Leader

Leigh is currently enrolled in a Masters of Public Health through Auckland University. She is about to undertake a qualitative research piece in partnership with Professor Ngaire Kerse (Auckland University) and Dr Anna Rolleston (Centre For Health) exploring the use of technology to promote healthy aging and wellbeing among Māori living in the Bay of Plenty.



The research will specifically focus on the LifeCurve app and co-design to look at the essential components and elements to include for tangata whenua.

Yuvaraj Nagarajan - Physiotherapist

Yuvaraj is undertaking the GLAD (Good Life with osteoarthritis in Denmark) programme - a physiotherapy-led, 8-week, group-based programme focussed on delivering best-practice management for patients with hip and knee osteoarthritis. It involves using neuromuscular exercise to improve stability and sensori-motor deliceses in the knee joint.

GLAD was first developed in Denmark and has been successfully implemented in Canada, Australia, Switzerland and China. In New Zealand, GLAD's first group of practitioners attended training in November 2019.

Bike month begins



Above: Community Health 4 Kids Regional Administrator Bev McVicar and Toi Te Ora Advisory Planning & Funding Administration Support Estelle Steinmann are supporting Bike Month.

February is Bike Month and I'd encourage people to take the opportunity to get out and about on their bikes over the coming weeks. This includes the Interim CEO and I will be making an effort to get on my bike this month!

Sport Bay of Plenty has events running throughout February in both halves of the Bay. Click on the below links to find out what's going on in your neighbourhood.

Western Bay of Plenty: <https://www.sportbop.co.nz/get-active/play-in-the-bay/western-bay-of-plenty--bike-month-2020/>

Eastern Bay of Plenty: <https://www.sportbop.co.nz/get-active/play-in-the-bay/eastern-bay-of-plenty--bike-month-2020-/>

Sport Bay of Plenty's Bike Month runs concurrently with the Aotearoa Bike Challenge from 1 February - 29 February. To sign up to the bike challenge, and be in to win some great prizes, go to: <https://www.lovetoride.net/nz>

Whakaari/White Island recovery plan

The Executive team has signed off on a Recovery Plan as part of our ongoing response to the Whakaari/White Island eruption of Monday 9 December.

The Recovery Plan ensures we have resources and support in place for staff members and their ongoing recovery. This involves dedicated FTE and resources such as counselling support and access to specialist psychologists.

The plan will be in place for the next 3-12 months, with the timeframe dependent on what needs staff have moving forward.

Josephine Peters will be the DHB Recovery Manager during this time helping us to lead and coordinate efforts for this recovery plan.

Novel Coronavirus update

Novel Coronavirus is big news at the moment and I wanted to bring you up-to-date with the situation locally.

We are taking the necessary precautions in preparation for any Novel Coronavirus outbreak.

The World Health Organisation (WHO) has declared a Public Health Emergency of International Concern (PHEIC) which means all countries should activate their relevant planning documents.

For New Zealand, and our DHB, this means referring to our own Pandemic Response Plans. We have activated our local response plan and hence the DHB has set up an Incident Management Team (IMT) to direct the health service response across the Bay of Plenty district. We have a team of healthcare professionals who are experienced in working on previous events, such as the measles outbreak and the 2009 Swine Flu pandemic.

We are also closely aligned with the Ministry of Health's national response.

We will be working alongside Toi Te Ora Public Health, our primary care partners and the Ministry of Health, as we do with other infectious diseases, in response to this event and have plans in place including isolation, management and treatment for people testing positive for Novel Coronavirus.

Should cases arise, we anticipate the majority of these would be managed by way of home isolation under supervision of primary care and Toi Te Ora. In hospitalised cases, negative airflow pressure isolation rooms are available at both Tauranga and Whakatāne hospitals.

Our Medical Officer of Health Dr Phil Shoemack says fastidious attention to good hand hygiene and cough etiquette, along with the physical isolation of suspected cases, are the mainstay of measures to prevent the spread of the Novel Coronavirus.



To protect yourself and others you should always practice good hygiene by:

1. covering coughs and sneezes with disposable tissues or clothing
2. washing hands for at least 20 seconds with water and soap and drying them thoroughly:
 - before eating or handling food
 - after using the toilet
 - after coughing, sneezing, blowing your nose or wiping children's noses
 - after caring for sick people.

People with symptoms of acute respiratory infection should practice good cough etiquette (maintain distance, cover coughs and sneezes with disposable tissues or clothing and wash hands).

It's important the public have access to good clear information and reliable advice. For situation updates and the latest information about Novel Coronavirus, the public should keep informed via reliable information channels:

- Ministry of Health website - www.health.govt.nz/our-work/diseases-and-conditions/novel-coronavirus-2019-ncov
- World Health Organization - www.who.int/health-topics/coronavirus
- Toi Te Ora Public Health website - www.toiteora.govt.nz/coronavirus

Symptoms of 2019-nCoV are similar to a range of other illnesses such as influenza and do not necessarily mean that you have Novel Coronavirus. These symptoms include fever, coughing and difficulty breathing. Difficulty breathing can be a sign of pneumonia and requires immediate medical attention.

If you have a fever, cough or difficulty breathing please telephone Healthline (for free) on 0800 611 116.



“If you want something new, you have to stop doing something old.”

Peter F. Drucker (1909–2005) Austrian-born American management consultant, educator, and author.