Comment from the chief executive

Innovation key to working smarter, not harder

Whether it is an innovative technology, piece of research, service, or way of working, ADHB is often at the forefront of leading some exciting innovations in health care. This month in NOVA we highlight a number of innovations being rolled out at ADHB in paediatric and neonatal services.

One such example of this is being demonstrated by nurses across Women’s and Children’s Health at ADHB. These nurses have taken up a new way of checking for potential medication errors prior to administration, which was adopted following a research study conducted by Starship Children’s Health. Read more about this on page 4.

I’m also pleased to announce that thanks to the Starship Foundation, ADHB now owns an innovative piece of world-class, ultrasound technology, which allows clinicians and prospective parents to view their unborn child through real-time 3D images. This technology will help clinicians to better identify congenital abnormalities, allowing treatment plans to be developed and actioned earlier, so that mother and baby receive the best possible treatment.

What’s great about these innovations is that they allow our staff to work smarter, not harder, by providing them with tools and resources to help them improve outcomes for patients and service users.

In the current economic climate, ‘working smarter’ is a motto that we are truly going to have to live by, as health priorities will need to be met within existing resources.

ADHB is committed to living within its means and the Senior Leadership Team has introduced a number of initiatives to increase our productivity and reduce our costs. These include improved clinical resource utilisation, improved overall productivity and reduced management and administrative costs.

Unfortunately these processes mean that we are having to review some non-clinical administration roles and we are working closely with those staff affected to support them through this process.

As an organisation we also need to look at how we can work more closely with our regional colleagues. Increased regional collaboration will provide significant benefits for long-term planning, capital planning and workforce management and development.

Going forward we need to maintain strong financial management – particularly in terms of reducing discretionary spending.

I appreciate that these are challenging times for us all. Your commitment to providing high quality health care within our financial parameters is valued and I ask that we work together to weather the tough economic times ahead while preserving healthcare services.

Thank you for your continued dedication.

Garry Smith
Chief Executive

Book brings to life history of Cardio-Thoracic Nursing at Greenlane

A new book that will delve into the history of cardio-thoracic nursing at Greenlane Hospital is being brought to life by past and present ADHB nurses.

Beginning in the 1950s when the Cardio Thoracic Surgery Unit (CTSU) was first established, the book will document the different stages of the Greenlane CTSU until its transfer to Auckland Hospital in 2004.

“This book will record how the Cardio-Thoracic nursing profession and the CTSU has changed over the past 50 years and more, and will recognise the many and diverse roles nurses have had in the development of the Greenlane CTSU including paediatrics, surgery, theatre, cardiology and intensive care”, says Heather Spinetto, Nurse Specialist, Paediatric Cardiology at ADHB.

“What will make this book extra special though will be the personal experiences and stories as told by the nursing staff and patients who worked and stayed on the unit”, she adds.

Anyone interested in supporting or contributing to this project, or who may be willing to share their personal story about their time at the Greenlane CTSU can contact Heather Spinetto on Ext 23629 or 021774606 or email HSpin@adhb.govt.nz

RECOGNISING ADBH STAFF

Adrianna van Vonno (known as Jeannette) trained as a Medical Laboratory Scientist in the Netherlands prior to her arrival in NZ. Jeannette had always been interested in travel and after meeting a NZ nurse in Greece, who offered her a place to stay in Auckland, she was soon on her way.

Jeannette joined the Auckland Hospital Microbiology Department in September 1979 working in the general microbiology section. About 5 years later she began to work with the STD clinics where she spent much of her time. Latterly Jeannette has focused on the laboratory diagnosis of Chlamydia infection.

Jeannette loved working with handcrafts and was known for beautiful embroidery works, handmaking cards and painting flower pots to decorate the work area. In April 2009, Jeannette retired after almost 30 years service.

The NOVA Values Recognition Award

The NOVA Awards were introduced in 2005 as one way to recognise employees and teams whose own values align with the four ADHB adopted values: Integrity; Respect; Innovation; and Effectiveness.

The NOVA Award works by nomination – anyone can submit a story about an individual or team who has demonstrated our values ‘above and beyond’ that expected in the workplace. Nominations are then reviewed by a committee, and worthy nominations are put forward to receive an award at one of the six monthly State of the Nation addresses.

By encouraging stories to be told, ADHB hopes to uncover the stars that glow within our midst. NOVA is the name given to a star when it is born, and its Maori translation Te Whetu Marama means ‘Bright Star’.

For more information on the Nova Awards, or to make a nomination, visit the Nova Awards page under CEO News on the intranet.
TravelEzy Week

Did you know that Auckland vehicles release 820 tonnes of CO2 into the environment every day? That’s equivalent to the weight of 135 elephants.

In order to help save the planet many ADHB staff are using greener transport options – saving time, money and even getting fit.

This month we profile three colleagues who have ditched their cars. Get inspired and give it a go yourself during ADHB’s TravelEzy Week, 15 to 19 June.

Paula Snowling, Team Support Administrator, Cardiology

Paula Snowling has been leaving her car in free parking in Waitakere and catching the train to work for the past four years. “I can read a book on the train and don’t have to worry about parking hassles at the hospital,” says Paula.

“The train commute takes 45 minutes and because the ADHB passes on the agent margin to staff, a full priced weekly ticket for $43 only costs $36.60 - it’s much cheaper than driving. Add to that the fact I don’t get stressed out during rush hour traffic and it’s a great option.”

Peter Le Cren, Legal Counsel (Medico-legal)

Rain, hail or shine, Peter Le Cren runs to work every day. Based at GCC, Peter says he is not just keeping fit. “Running takes the stress out of my commute. I step out the door and know exactly when I’ll be at work. Jogging home gives me head space and is the most relaxing part of my day.”

Peter lives 4.5km from work and the run takes 20-25 minutes. Arriving after a workout isn’t a problem, “It’s great having shower facilities at work - it doesn’t matter if I’m soaked through.”

Carl Clifford, Test Lab Technical Support Engineer

Saving money, carbon and time thanks to the T3 Transit Lanes, Carl Clifford says car pooling works for him.

From the North Shore, Carl and two others rideshare to Greenlane Clinical Centre, which takes approximately 25 to 35 minutes.

“With our car pool of three, that’s two less vehicles on the road and a few less kilos of CO2 in the atmosphere. And less petrol means more money in our pockets as well,” says Carl.

Note: Check out the new TravelEzy Website for the ACH Rideshare Car Pooling six month trial with guaranteed parking.

ADHB has partnered with Auckland City Council (ACC) and Auckland Regional Transport Authority (ARTA) to prepare a travel plan designed to ease access to ADHB facilities and encourage staff to leave their cars at home.

Facilities Manager Ian Harper says there has always been a transport challenge at ADHB due to the spread of employees across two sites. “As a responsible employer, ADHB is keen to assist employees to adopt more sustainable transport options, especially public transport.

“As part of this vision, we’re launching TravelEzy Week to highlight the various transport options and we’ll be showing staff how to use online tools to find their best public transport option for their commute,” he said.

ARTA will run travel clinics at ACH, Level 5 Reception, 16 June and GCC, Building 4, 17 June from 9.30am to 3.30pm.

As well as offering advice, ARTA will be giving away hundreds of free bus and train passes plus some special giveaways. The passes will be valid for travel until the end of June for employees who currently drive to work.

The benefits of adopting more sustainable travel options are tangible. For employees taking public transport, for example there are significant parking and car-maintenance related savings plus the ‘feel good’ factor of making a difference to our environment - less traffic, congestion and pollution.

TravelEzy Intranet

Visit our revitalised TravelEzy Intranet Site dedicated to informing employees about various travel options. You can find the site by clicking on Travel and Parking @ ADHB.
New dimension in fetal service

National Women’s Hospital now features one of the most sophisticated ultrasound systems available dedicated solely to its Fetal Medicine Service, thanks to generous sponsorship from the Starship Foundation.

The IU22 ultrasound system was introduced in April. It offers 4-D imaging technology allowing clinicians and patients to view the unborn child in 3-dimensional, clear, life-like images. The video image of the foetus appears in real time (the fourth dimension), showing the foetus as it moves helping clinicians to better identify any congenital abnormalities and prepare treatment plans.

Obstetrician and gynaecologist, Dr Renuka Bhat, says the IU22 ultrasound is assisting clinicians to manage high risk and referral patients where a congenital anomaly is suspected during a routine scan.

“We aim to see patients within 48 hours of referral,” explained Dr Bhat.

“The ultrasound has helped us to optimize care for our patients and offer high quality fetal medicine.”

Dr Bhat, who works in the Maternal Fetal Medicine subspecialty, says ten fetal medicine clinics are held per week. In addition, there are two paediatric cardiology clinics that run side by side.

“To have a dedicated ultrasound machine available for patients and procedures when necessary is a real gift,” says Dr Bhat.

“It has allowed us to time interventions such as intrauterine transfusions to suit the patients and clinician.”

Did you know?

National Women’s is currently the only national centre to offer interventional fetal procedures such as shunts, intrauterine transfusions and complex operative deliveries.

The objectives of prenatal diagnosis in most cases are:

- To help and prepare parents to cope with a congenital anomaly, including those which may require surgery post-natally
- To plan the most appropriate place, mode and time of delivery
- To arrange surgical correction of abnormalities in early neonatal life
- To plan and administer in-utero treatment where feasible.

Nurses Support Medication Checks

Nursing teams across Women’s & Children’s Health are leading the way in safer medication use by formalising their double-checking process designed to identify potential medication errors prior to patient administration.

Starship Clinical Nurse Consultant, Elaine McCall, says that while double checking medications is a strategy used to reduce the risk for error, the effectiveness of the process is improved when it involves ‘independent double checking’.

An independent double check is a process in which two nurses separately check and verify each component of the medication administration process. The critical aspect of an independent double check is that the person who is doing the ‘checking’ must form an independent judgement, without cues from the nurse doing the initial work.

Elaine says the independent double checking process was adopted following a recent research study at Starship Children’s Health.

“The study was conducted to better understand the independent double checking practice, as well as potential barriers,” explains Elaine.

“The study clearly identified that while there was overwhelming support for the practice of independent double checking, there was some confusion about what constituted an independent double check.

“Study participants identified key barriers such as uncertainty and variability regarding which medications required double checking, which we were then able to address by developing a clear standardised process,” she said.

As part of the implementation phase, an Independent Double Check campaign was launched, led by a project group made up of Women’s and Starship Children’s Health nursing leaders.

The campaign, held during March, included various resources like poster and video communication. Charge Nurses and Nurse Educators managed the campaign within their clinical areas.

“The project group was very impressed at the level of engagement and support as well as the number of creative initiatives such as quizzes and crosswords generated by clinical areas” says Elaine.

“Nurses are often the last link in the safety net to prevent medication errors. Independent double checking medication preparation is the last chance to ensure that the right amount of the right medication is given via the right route to the right patient at the right time.”
Where is the service based?
The Paediatric and Congenital Cardiac Service is a national service based at the Starship Children’s Hospital. Our service cares for anyone with a congenital heart condition from birth to adulthood.

Continued diagnosis and treatment improvements mean our patient population is growing, and with it, our service. We are the sole provider of cardiology and cardiac surgical services for infants and children with congenital and acquired heart disease in New Zealand and parts of the Pacific Basin. Inpatient care ranges from simple overnight procedures to complex heart operations over several years.

The service has a number of interrelated components including Foetal Cardiology, the Children’s Heart Ward, Adult Congenital Cardiology and Outpatient and Community Support. In addition there is an active clinical research and audit programme that includes collaborative ventures with academic groups nationally and internationally.

Describe the service
One in 100 babies is born with a heart problem and most need intervention.

In total, we see approx 1000 inpatients per year and perform between 350 and 400 surgeries. Approximately half of the children that require surgery are less than a year old.

Tell us what’s special about the service
Our people.

We are made up of health professionals from many different areas and together, we are proud to offer a world class service. We include paediatric cardiac surgeons and cardiologists, specialist nurses, ward doctors and nurses, allied health professionals, technical staff, social workers and psychologists, play therapists, teachers and administrative support and Ana Kennedy, the first Nurse Practitioner at Starship.

Tell us about your role
I am the nurse manager and it is a relatively new role. As well as the day-to-day operations of the ward and outpatients, I am responsible for facilitating a cohesive nursing approach across the service.

What would you say to someone considering a career with the Paediatric and Congenital Cardiac Service?
It’s never boring with varied medical and surgical work with care for infants through to adulthood. We have a great team and there is always something new to learn.

Contribution by: Stephanie Hlohovsky, Nurse Manager PCCS

Consensus suggests that employers, not regulators should be responsible for this process in the future. Medicine is more familiar with the use of credentialing processes, but gets confused with the role of the regulator and performance appraisal processes.

What all professions do now seem to agree on is the purpose of credentialing. Credentialing is an ongoing process for validating the competency of health practitioners to do what they say they can do and when and where they can do it.

Credentialing provides confidence and builds trust with patients, members of the public and employers that a practitioner is able to deliver safe, effective care. It is also a process that engages practitioners in a process of ongoing learning and quality improvement.

Now that is easy to understand in anyone’s language!

What is credentialing?
Credentialing is a general term used to indicate that an individual, product or system has met an agreed standard or level of quality. In the health sector it is used in a number of different contexts to recognise the professional standards, for example professional education and experience, of an individual.

Director of Nursing, Taima Campbell
Winter is well and truly here so it seems timely to praise the virtues of soup. Why soup? Well soup has the potential to be a tasty warming food with a range of nutritional qualities.

The benefits of soup
- Soups can be bulky and filling but contribute a relatively small amount of energy (kilojoules) to our diets, which is great for managing weight.
- Many of us struggle to eat dried beans and lentils; these are foods that have a wide array of health benefits. Soups can be a way to incorporate them into our diets. The easiest option is to open a can of beans (e.g. kidney beans, chick peas, baked beans) and add them to the pot.
- The addition of vegetables, beans, lentils and barley means that soup can be a great source of dietary fibre.
- Orange vegetables, canned tomatoes, onions and garlic all contain health protecting antioxidants and work well as the base and flavourings for soups.
- A note of caution, beware of soups with added butter and cream as they will be high in saturated fat and kilojoules. Some canned and packet soups can also be very high in salt.

Here is a twist on an old favourite

**Thai Pumpkin Fish Soup**

1 Tbsp oil
1 large onion, finely chopped
2 cloves garlic, finely chopped
1 Tbsp brown sugar
2 cups chicken stock
1/2 - 1 tsp chilli paste
Lemon rind from 1 lemon, finely chopped
1 kg pumpkin, peeled and diced
125 ml can lite coconut cream
500 g white fish, cut into chunks

Heat oil in a large pot and gently cook onion and garlic until soft then add brown sugar and stir. Add chicken stock, chilli paste, lemon rind and pumpkin. Cover and simmer until pumpkin is tender, about 20 minutes. Mash the pumpkin and stock mixture, stir through lite coconut cream and add the fish chunks. Cook for a further 5-10 minutes until the fish is cooked. Serve with chopped coriander sprinkled on top.
Lake Taupo is New Zealand’s largest lake and is a picturesque and welcoming part of New Zealand at any time of year. A four hour drive south of Auckland, Taupo offers something for everyone. For the adventure lovers among us there is skydiving, bungy jumping, mountain boarding and gliding. Kayaking is also very popular on Lake Taupo and white-water rafting is terrific on New Zealand’s longest river, the Waikato.

If nature is more your cup of tea then there are magnificent hiking tracks around Lake Taupo, including the highly rated Aratiatia and Mt Tauhara tracks. Or relax in a hot pool of natural mineral water. Perfect for those colder winter days.

There are also plenty of free things to do at Taupo other than gaze at the scenery and they include the amazing Huka Falls, the Craters of the Moon, and the Tongariro Trout Centre. Taupo is a great weekend getaway option and offers a city taste without city fumes, in the fresh mountain air.

Taupo - Think fresh

Lake Taupo is New Zealand’s largest lake and is a picturesque and welcoming part of New Zealand at any time of year. A four hour drive south of Auckland, Taupo offers something for everyone. For the adventure lovers among us there is skydiving, bungy jumping, mountain boarding and gliding. Kayaking is also very popular on Lake Taupo and white-water rafting is terrific on New Zealand’s longest river, the Waikato.

Healthy Village Action Zone success

Building healthy Pacific communities with access to quality health care is at the heart of the work undertaken by the Healthy Village Action Zones (HVAZ) programme. Acting General Manager for Pacific Health, Hilda Faasalele, says HVAZ has been working with church groups in the Auckland region since 2007 and its proactive work is paying off. Recently, more than 200 people attended an awards ceremony where 23 out of 30 church groups received a bronze award for implementing three of the HVAZ Healthy Eating goals. Some of these goals include:

- Serving drinks that are not sugared
- Ensuring fat-reduced milk is the only milk served
- Providing plenty of colourful and leafy vegetables
- Making fresh fruit available and encouraging its consumption
- Matching the quantities of food served to the number of people eating

Following food safety guidelines when preparing food

“HVAZ is about community led development. It’s about the Parish Community Service and Primary Health Organisations supporting Pacific churches, helping to set up health committees and playing a supportive role in improving the health and wellbeing of the parish congregations and their families,” says Hilda.

“We are really pleased with the progress of the HVAZ programme. There are many successful stories to tell. The church leaders and elders understand the importance of a healthy community and are walking the talk in leading their community to improve healthy lifestyles.”

HVAZ will be looking to build on its achievements by expanding its work in clinical settings, therefore encouraging people to attend diabetes checks and referral to appropriate services as required.

Monthly Competition

The prize for this month will be one night’s accommodation at any Choice Hotels Australasia™.

Choice Hotels® representing the Comfort™, Quality™ and Clarion® hotel brands are ideal for business, conference & meeting or group travel – Choice Hotels has more than 30 hotels, suites, resorts and apartments throughout New Zealand. Ranging from 3 – 5 Star accommodation, Choice Hotels are ideally situated in city centre, resort and regional locations including: Auckland, Christchurch, Dunedin, Hamilton, Hastings, Kaikoura, Napier, New Plymouth, Paihia, Paraparaumu, Queenstown, Rotorua, Taupo, Te Anau, Wanaka, Wanganui, Wellington, Whangarei & Invercargill.

To find out more about Choice Hotels visit www.choicehotels.co.nz

Question: How many inpatient beds does the Paediatric and Congenital Cardiac Service have?

Mr Fuimaono, Ilaisaane Langi (Team Leader - Pacific Family Support Unit), Anaseini Kaho (Family Support Worker).

Air New Zealand will provide two economy class tickets to the Pacific Islands – Samoa, Tonga, Fiji or Raratonga for the Grand Prize for Nova for 2009. There may be peak periods when seats are not available i.e. Christmas. To be in the draw, each month simply collect the letters (supplied at the bottom of this column) and at the end of the year correctly solve the simple anagram. Then send your answer to the address supplied in the November edition.

June Grand Prize letter: I

Conditions of entry: Tickets are not exchangeable for cash; tickets will not accrue air points; tickets are not upgradeable; winner must be an employee of ADHB (show employee number) at the time of the prize draw. Valid until 30 June, 2010. Ticket is non-transferable 23 Dec 2009 – 15 January 2010.
To commemorate International Nurses Day on 12 May, ADHB held a special Nursing Grand Round and a presentation ceremony in the Clinical Education Centre, which saw 150 ADHB nurses being recognised for a variety of educational achievements.

The event ended with Taima Campbell, Executive Director of Nursing at ADHB, presenting Nurse Practitioner, Margaret Colligan with the Rotary Trophy of Tradition.

Speaking about Margaret, Taima said, “Margaret is known for her exemplary nursing care, her professionalism, her teamwork and is always willing to share her knowledge and experience to support her medical and nursing colleagues within the department.”

Margaret has worked in the Adult Emergency Department at Auckland City Hospital since 1994 in roles of staff nurse, nurse specialist and is now a Nurse Practitioner.

Celebrating International Nurses Day the Pacific way saw nearly 50 people attending a spiritual blessing organised by ADHB’s Pacific Nurse Leaders in partnership with He Kamaka Oranga.

The ceremony, which was officiated by Reverend Mele Tavelia from the ADHB chaplaincy, brought together people from diverse cultural backgrounds to participate in the blessing, as well as to witness a special candle-lighting ceremony held by student and senior nurses, which symbolised the passing of nursing from one generation to the next.

Leading tributes to Florence Nightingale and the profession of nursing were ADHB’s Executive Director of Nursing, Taima Campbell and Hilda Faasalele, Acting General Manager Pacific Health.

ADHB’s psychotherapists recently gathered to celebrate staff becoming registered. In 2007 the Ministry of Health approved Psychotherapy as a Registered Profession and over the last 2 years the vast majority of the 28 ADHB-employed psychotherapists have gone through the registration process.

Stephanie Forde, who practices at Segar House, says psychotherapy is a relatively young profession in the Mental Health Service and becoming recognised was a huge boost.

“Some of our psychotherapists have been involved in working towards this outcome for 15 years. It is hoped [registration] will help with our credibility and of course further ensure clients receive safe and effective treatment,” said Stephanie.

ADHB’s psychotherapists offer services at the Segar House Specialty Psychotherapy Service, Eating Disorder Service, Community Mental Health Centres, Buchanan Clinic, Sexual Health Service and Child and Adolescent Service.