

Monthly Update

May 2015



An Update from the G.M.

As we head towards the end of this financial year, I would like to acknowledge the ongoing efforts that the South Island Alliance Service Level Alliance and workstream members and the SIAPO staff are making towards delivering services that are 'Best for People, Best for System'. I am aware that many of the team members have very busy day jobs and the SIA activity has to be fitted around other priorities.

I often reflect on how the alliance approach encourages the positive relationships across the South Island and supports us to achieve outcomes towards our vision. We are starting to support both better experiences of care and outcomes for our people through the alignment of our systems and processes including:

- consistent models of care for stroke, acute coronary syndrome and a dementia framework
- healthPathways (primary to secondary and secondary to tertiary)
- aligning of information systems
- single service – multiple sites e.g. bariatric surgery, fertility services

- meeting of health targets including wait times and faster cancer treatment
- working to align radiotherapy fractionations in line with best practice and allowing us to defer purchasing the next linear accelerator
- workforce training, including: 'dementia support - walking in another's shoes', gerontology acceleration programme, advance care planning, allied health assistants
- savings through joint procurement and sharing of other initiatives

Thank you to everyone for your hard work thus far. I am looking forward to the opportunities and challenges we face in the next financial year. Please feel free to contact me at anytime with questions or comments.

Jan Barber
General Manager
South Island Alliance Programme Office

Staff Get Cooking to Help Families at Ronald McDonald House

Staff from the South Island Alliance Programme Office (SIAPO) have been providing a helping hand to families with sick children staying at Christchurch's Ronald McDonald House recently as part of its "family dinner programme".

During March and April groups of up to 12 staff visited the House twice to prepare and cook dinner for families staying there. The House has as many as 26 families staying at any one time, some for just one night, while others might be there for weeks or even months.

John Coleman, South Island Emergency Planning Co-ordinator for SIAPO, also donated torches which were bought by staff and together with further donations raised \$100 towards the purchase of a trampoline for the House.

Kathryn Goodyear, Project Facilitator for South Island Alliance Regional Training Hub coordinated the event and said, "It was a great night, despite me nearly setting off the smoke alarms and sprinklers! Thanks again to all who pitched in to help out for this worthy and important cause. We look forward to doing it again in the future."



New Roles Support Earlier Dementia Diagnosis in South Island

The South Island Alliance's Health of Older Peoples group (HOPSLA) has announced the recent appointment of two new part-time Primary Care Dementia Education Co-ordinator roles, a move which looks set to support improved diagnosis and quality of life for dementia patients living in the South Island.

The new roles are in response to the fact that many people with dementia are receiving a diagnosis late in their illness as Jenny Keightley, Chair of HOPSLA explains, "Helping GPs to make an early diagnosis of dementia and providing links to support services can make a real difference to the patient and their family. It can reduce stigma and enable people with dementia to understand their condition, access treatments that could help relieve their symptoms and improve their quality of life. It can also give them time to plan for the future. The new positions are an exciting development as they will specifically focus on primary care settings, looking at the education resources and the implementation of a dementia education programme across the South Island, so that we can help promote better, earlier diagnosis of dementia and continuity of care."

One of the new appointees is Carole Kerr, a registered psychiatric nurse with an extensive career related to older people, in particular mental health services for older people, people with disabilities, and Planning and Funding. Carole is currently the Walking in Another's Shoes Dementia Educator for Nelson Marlborough DHB. Carole will be on secondment from 18 May 2015.

Carole will share her role with Rebecca Winsor, a registered nurse who works as a Clinical Nurse Specialist (CNS) for Older Person's Health and NetP Nurse Educator for the Princess Margaret Hospital, Canterbury DHB. Rebecca's post graduate diploma study has focussed on patients with dementia or delirium, or patients with depression. Rebecca will commence on 11 May 2015 and will be based at the South Island Alliance Programme Office.

The work programme is being led by HOPSLA and positions are fixed-term until 30 June 2016. "We are delighted to have such excellent, experienced new recruits to join our team and look forward very much to working with them in the future," says Keightley.

Super Users share SI PICS solutions

The experts in the South Island Patient Information Care System – SI PICS Super Users – run a session in Nelson Marlborough DHB. Pictured are from left Rachael Lane, Ryan Papps, Grant Pownall, Tom Wheatley and Ginni Denmead

These sessions enable further input into development. Many of the questions and answers from these sessions will be posted on the SI PICS website as well as on the individual DHB's SI PICS intranet sites.





Allied Health Assistants Conference 2015

Places still available to give our valuable assistants the opportunity for professional development.

This national conference will further enhance our AHA workforce to become a more sustainable resource, to work more flexibly and efficiently; thereby ensuring we continue to provide our services in better, sooner, more convenient ways.

This year's themes:

- **Working with others**
- **Working with technology**
- **Working differently.**

The themes of this conference are intended to build on recent progress in provision of training for the AHA workforce through presentations and practical workshops. The content of this conference will be appropriate for AHAs supporting all of the AHS&T professions; who work with people and their families/whanau across hospital, community and home settings.

Michael Keown, an AHA at CDHB who has just completed his National Certificate for Health Assistants Level 3, says "As Allied Health Assistants we all need the time to learn something new; re-ignite the passion in what we do and to share and celebrate what we do really well".

Abstracts are still welcome until 29th May. Please showcase the work of your assistants and share your innovations, learnings and knowledge.

Please refer to www.sialliance.health.nz/AHA_Conference_2015 to view more details, and flyer, registrations and abstract forms.

New Group Targets Child and Youth Diabetes Care in the South Island

A new working group has been established which brings together a team of professionals from the South Island health sector with a focus on child and adolescent diabetes care.

The aim of this group is to improve care across the South Island for young people with diabetes, in particular, Type 1 diabetes. Its establishment is part of a wider strategy overseen by the South Island Alliance's Child Health group to establish a Regional approach to diabetes service planning, and to achieve consistency in standards and provision of diabetes care.

The group will produce a work plan that will align with strategies already in place - such as those being delivered by the National Clinical Network for Children and Young People with Diabetes.

Members of the group met for the first time in April, recruited from the five South Island DHBs and primary care providers, plus a consumer representative, to discuss the terms of reference, and identify any professional gaps within the group's membership.

Dr David Barker, Clinical Leader for Children's Health SDHB, and Chair of the Child Health South Island Alliance Group, said: "We are thrilled to be able to bring together a group with expert knowledge of issues relating to diabetes care in a new forum to enable work across the Region. This will help to ensure that young diabetes patients receive high quality, accessible and equitable care."

The group plan to meet monthly. For more information about the group contact jane.haughey@siapo.health.nz

Lippincott Procedures “Go Live” in South Island DHBs

From Tuesday 5th May Lippincott Clinical Procedures will be available online at all South Island District Health Boards, a move which looks set to support the better delivery of evidence based nursing practice across the region. Access to the online resource by those in the wider health system, including primary care, NGOs, community health, the aged care sector and relevant tertiary education providers, will be made available in the following months.

Lippincott Procedures is an online evidence based resource that provides real-time access to step-by-step guides for over 1,300 evidence-based procedures and skills in a variety of specialty settings on-line. The South Island Executive Directors of Nursing and the South Island Regional Training Hub (SIRTH) have supported the implementation of Lippincott in partnership with Midlands region where it has been in place for over three years.

Lippincott procedures can be accessed from any hospital workstation or via a mobile iPad app, both online and offline. Offline access will enable nurses in remote regions or with unreliable internet connections to still retrieve procedures and information. When fully implemented access to Lippincott will be available 24 hours a day, seven days a week to all nursing staff across the South Island health system.

The standardisation of clinical procedures utilising the latest evidence based practice will ensure optimum patient safety throughout the South Island. This will mean that a clinical procedure is being delivered in the same way whether it's in a hospital or community setting.

The South Island Executive Directors of Nursing recognise that having an up-to-date, centralised, online distribution of procedures can improve clinical practice and patient care, as well as contribute to the professional development and retention of a highly skilled nursing workforce.

Bottom of Form

“Our nurses can open Lippincott Procedures at any time from any computer terminal eliminating the need to search for those policies elsewhere on the unit. This technology has improved access for our nurses to the most current health care information supporting the growth and expansion of evidence-based nursing practice in our organization.” Jennifer Graham Powers, RN, CN IV, BSN, CCRN.

South Island Directors of Nursing Position Statement is available [here](#).

South Island Stroke Nurses Prioritising Collaboration

A South Island Stroke Nurse Key Contact Networking group has recently been established.

The group will enable all South Island hospitals who provide services to a person who has had a stroke to remain connected to what is happening across the South Island and at a national level in regards to stroke best practice. The quarterly teleconference meetings will also provide an opportunity for those involved to share ideas, documents and notices; problem solve collectively; and, support the delivery of integrated stroke services.

The first meeting was held in March, with invitations extended to Christchurch Public Hospital, Burwood Hospital (Christchurch), Princess Margaret Hospital (Christchurch), Nelson Hospital, Wairau Hospital (Blenheim), Timaru Hospital, Greymouth Hospital, Dunedin Public Hospital, Invercargill Hospital, Dunstan

Hospital, Oamaru Hospital, Lakes Hospital, Gore Hospital, and the Stroke Foundation. The meeting was well attended (12 out of 15 hospitals responded), with those involved all reporting they found the meeting productive and beneficial.

The New Zealand Clinical Guidelines for Stroke Management (2010) outline that DHBs should organise their stroke services to include both a designated named Lead Stroke Physician and a designated Lead Stroke Nurse, each with assigned non-clinical hours to dedicate to the role.

In practice, however, not all South Island hospitals yet have a designated Lead Stroke Nurse. It is intended that the South Island Stroke Nurse Key Contact Networking group will assist nursing staff while DHBs work to progress development of these roles.

Safety 1st Up and Running in West Coast Health System



Safety 1st is on its way to being fully operational across the West Coast health system, with DHB-run primary practices also using the system now to log incidents.

The integrated online safety and risk system was developed for all South Island DHBs to support better patient safety outcomes and reduce risk for patients, staff and visitors across the region. It went live first in Buller and Reefton on 26 March, followed by the rest of the DHB on 30 March.

Safety 1st enables alerts of any serious adverse events within seconds of information being entered by practitioners, and this in turn means a faster response by DHB and wider health system staff.

“The ability to link all associated documents and keep a running record of work being carried out on the file is also proving useful,” DHB Quality Facilitator Vicki Piner says.

“All the quality outcomes can be tracked and monitored in the one place. It will be easier to see trends once the system has been in place for a while.”

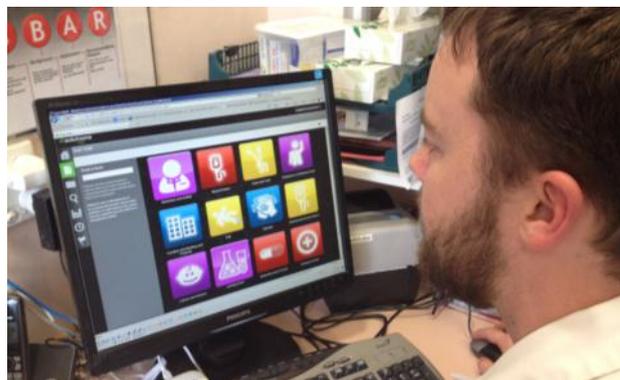
Grey Medical Centre Practice Manager Meriem Wilson says Safety 1st has made it quicker and easier for staff to report incidents.

“At this stage, we are getting still familiar with the form. But we’re starting to see some trends, which will lead to better outcomes for patients,” Meriem says.

Vicki says even though the geographical isolation of some DHB facilities can be a challenge, the Safety 1st introduction in clinics, general practices and other DHB facilities from Karamea to Haast had been straightforward.

Vicki has held training sessions in Buller, Reefton, Greymouth and Hokitika and plans to get to South Westland shortly, before starting a refresher cycle later this year.

Home-based support services without online access are filling in manual forms, which are then entered into the Safety 1st system back in the office, to allow it to be managed electronically. Falls at home are now being recorded consistently and collated with other information in the system to give a complete picture of safety and risk for West Coasters.



Buller Emergency (Foote) ward Registered Nurse Geoff Roe was the first West Coast DHB staff member to log an incident when the Safety 1st system went live.

A 41 percent increase in reporting in its first month is attributable to the introduction of an easily accessible online system rather than an increase in events, Vicki believes.

“We are really pleased with the uptake so far but need to remember that this is only our first review. As a result we’re fine-tuning our reporting and analysis. It will be very interesting to see what patterns emerge and where we might be able to focus efforts to improve outcomes for our patients – that’s what it’s all about,” Vicki says.