

# WellInformed

December 2017

**Clinical Updates**

**Long Term Conditions**

**Ngā Kupu o te Mārama**

**Mental Health**

**Health Promotion**

**Notices**

## From the Chief Executive, Ian Macara



### Health Policy Priorities of the New Minister of Health

The new Minister of Health, Honorary. Dr David Clark is supported by Associate Ministers Julie Anne Genter (Green Party) and Jenny Salesa (Labour). David Clark is a resident of Dunedin. His mother is Dr Faye Clark, a retired GP who worked in Otago, Auckland and is presently working for Diabetes South Auckland. Thus, he has good 'local knowledge' and understanding of general practice.

#### Here is a summary of the Policy that will guide the Ministers priorities

- Details of the Coalition Agreement between Labour and NZ First
- Re-establish the Mental Health Commission
- Annual free health check for seniors (age 65), including an eye check, as part of the SuperGold Card
- Free doctors' visits for all under-14s
- Teen Health Checks for all Year 9 students (first year of secondary school).
- Progressively increase the age for free breast screening to 74

#### Confidence and Supply between Labour and the Green Party

- Ensure everyone has access to timely and high quality mental health services, including free counselling for those under 25 years
- Increase funding for alcohol and drug addiction services and ensure drug use is treated as a health issue

#### Labour Party Manifesto

##### GP Fees

- Additional \$8 billion investment in health over four years. Over a billion dollars of this will go into primary care.
- Lowering the VLCA fee cap by \$10 to \$8 for adults and \$2 for teens (under 13s are already free), with a funding increase to VLCA practices to cover this
- Increasing government funding for all practices that lower their fees by \$10, lowering the average non-VLCA fee from \$42 to \$32 and the maximum fee from \$69 to \$59
- Increasing funding for GP training places, taking the intake to 300 per year

- Carrying out a review of primary care funding to further reduce barriers to primary care and ensure the financial sustainability of practices
- Extend \$8 co-payments to 250,000 Community Services Card (CSC) holders and increase CSC eligibility – a total of 600,000 additional people

### *Mental Health*

Establish a two-year pilot programme of primary mental health teams at eight sites across the country to work with GPs, PHOs, DHBs, and mental health NGOs. These sites will be selected to meet high needs populations, including Christchurch, which has seen a surge in mental health needs. The programme is expected to help nearly 40,000 people get the assistance they need for each year of the pilot. This will be an investment of \$43m over two years.

Mental health teams will be based on site with primary care providers, such as GPs, to offer free, accessible help for people with mental health issues before and after crises. Early intervention and continuing care will help people avoid significant mental health distress and assist them to live their lives fully. Each mental health team will comprise mental health service co-ordinators, who will be doctors or other medical professionals. It will be their job to help people navigate the system and integrate the care from GPs, PHOs, NGOs, and DHBs, creating a sustained programme of care for each individual. This will mean patients will deal with the same health professionals throughout.

### *The programme will provide funding for:*

- Increased capacity for GPs to conduct interventions and make appropriate referrals
- Mental health service co-ordinators to be based with primary care providers
- NGOs to provide social assistance such as help getting a job or finding somewhere to live
- Increased access to counselling
- Coordinators to facilitate shared care between GPs and DHBs
- A full review of the pilot will be taken after two years with a view to rolling out the programme nationwide over time

### *School Health Teams*

- \$40m per annum to provide School Based Health Services to all public secondary schools so all schools have a comprehensive youth health service

Minister Clark has spoken strongly for rapid progress for completion of a new Dunedin Hospital. This will require enhanced investment in the capacity of primary care for services integration to inform planning for the new hospital. We will take the opportunity to discuss this with him in the near future.

Very soon after his appointment, as Minister Clark stated he '...won't be making wholesale changes to the sector until I'm clear on what needs to happen, ...reviewing mental health and key health funding models, improving access to GPs, and ...hold a big health summit early next year to bring the sector together.' These are encouraging signals for primary care - particularly that over a billion additional dollars will be invested over four years. As always, the devil will be in the detail and we look forward to working with our service provider partners and stakeholders in developing initiatives and implementing them at the local level.

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# Clinical Updates

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## Clinical Update by Dr Stephen Graham



I hope that the GP work force are taking some time to enjoy the lengthening summer days. I am sure Christmas causes a number of different work pressures for most, particularly in holiday resorts.

I am happy to see that a review of health funding is being undertaken by the new government. It is not news that there is a definite feeling in general practice of funding pressure and that costs for patients have become a significant barrier to many seeking general practice care.

I wish to raise the profile of a couple of subjects:

### Diabetes/Pre-Diabetes

A free (to the patient) formal education programme is offered to diabetic and pre-diabetic patients. This consists of a programme run by WellSouth nurses, dietitians and clinical pharmacists. It is based on a programme run in the UK and in Australia and has a good research base behind it.

- Walking Away is a three hour education programme for patients with pre-diabetes (or impaired glucose tolerance/impaired fasting glucose)
- DESMOND is a six hour education session for patients with type 2 diabetes
- Referrals can be made through ERMS. If you do not have access to ERMS you can refer using a [form from WellSouth](#)
- You can refer directly to a WellDouth dietitian. Once again this can be done through ERMS or the [form available from WellSouth](#).

### Bowel Cancer Screening

Bowel cancer screening will be beginning in our area at sometime early in the New Year (provisionally April at this stage). To prepare for this there will be the opportunity for all of the GP work force to attend local CME on the subject. These CME sessions will be held in February. I am sure there are many questions about the target group, the implementation and other related subjects. I am confident that everyone supports bowel cancer screening in principle but suspect that many will have questions about the details. I have attached this link before, but here it is again [www.nsu.govt.nz/healthprofessionals/national-bowel-screening-programme](http://www.nsu.govt.nz/healthprofessionals/national-bowel-screening-programme)

I value any feedback. I hope that the holiday period allows time with family and time for rest and recreation.

*[Dr Stephen Graham](#)*

*Medical Director, Wellsouth PHO*

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## Casual Practice Nurse Required – Amity Health Centre

Amity Health Centre is looking for an experienced Practice Nurse to work on a casual basis. We are a small, friendly team, with Cornerstone accreditation, and strive to provide a high quality service to our patients. This position is to cover staff leave, and would suit a nurse looking to increase their working hours on an ad hoc basis. Must have up-to-date Vaccinator Certificate and Annual Practising Certificate. Experience with Medtech would be useful but not essential.

If you are interested or would like to discuss further, please contact Catherine Daly-Reeve, Practice Manager, on 464 0041 or by email: [manager@amityhc.co.nz](mailto:manager@amityhc.co.nz).

## GP, Palliative Care Workstream, South Island Alliance

The South Island Alliance is looking for a GP with palliative care interest or experience to join the Palliative Care Workstream.

The Palliative Care Workstream brings together palliative care stakeholders from across the South Island in support of its vision for "High quality, person centred, palliative and end of life care available to all the population of the South Island, according to need and irrespective of location."

The group is made up of representatives from across the health sector – primary care, hospice, community care, aged residential care, secondary and specialist care, as well as members with paediatric, consumer and Māori health perspectives.

This is an opportunity to help shape the development and delivery of palliative care services across the South Island.

Meetings are held monthly, either face-to-face in Christchurch (quarterly) or by video or teleconference. The membership term is three years with the option to extend.

[Click here to apply.](#)

Applications close at 5pm, Friday 5 January, 2018.

More information: <https://www.sialliance.health.nz/our-priorities/palliative-care/>



## Southern Bowel Screening Programme coming in 2018

The new national bowel screening programme will be rolling out across the Southern District from April 2018, with over 51,000 people aged 60 – 74 years of age eligible to participate in the programme.

Bowel screening every two years can help save lives by detecting bowel cancer at an early stage, when it can often be successfully treated. With rates of bowel cancer in the Southern District amongst the highest in the country, the introduction of the bowel screening programme will help to reduce cancer related deaths in the South and improve health through early detection.

Primary care providers will have an important part to play in the overall success of the national screening programme as GPs and practice nurses will be funded to discuss positive test results with their patients, and to support and encourage them to undergo a colonoscopy.

If further treatment is required, providers will work in partnership with Southern DHB to ensure prompt and appropriate treatment is provided to their patients. No primary care action is required for negative results.

Primary care providers will also help to encourage ongoing participation in the bowel screening programme through the display and sharing of information about the programme with their community.

Screening is free for those who are eligible, as are any follow-up tests or treatment with all patient contact being funded by Southern DHB.

More information about the programme will be coming in 2018, so keep a watch for information packs, resources, updates and CME events coming your way!

In the meantime, you can find out more about the programme and the role of primary care on the Ministry of Health's Quick Reference Guide.

For more information about the bowel screening programme visit [www.bowelscreening.health.govt.nz](http://www.bowelscreening.health.govt.nz)

For more information about the Southern DHB bowel screening programme contact [Emma Bell](#)

# Easier Access to Newborn Services Through Oranga Pēpi – Baby’s Care

The launch of a new initiative to support enrolment with the five key newborn health services means that no newborn should miss out on the best start in life.

The initiative called Oranga Pēpi – Baby’s Care has been jointly developed by Southern DHB and WellSouth and provides a single user-friendly source of information about key newborn services in the Southern District. It also means it is easier to identify those who are missing out, at an earlier stage.

Oranga Pēpi – Baby’s Care includes resources such as posters, brochures, postcards and fridge magnets, each of which describe a baby’s entitlement to universal newborn health services:

- Newborn Hearing Screening
- National Immunisation Register
- Southern DHB Community Oral Health Care
- General Practice
- Well Child Tamariki Ora Services

“Midwives already discuss entitlement to these key newborn services with expectant mothers, but having Oranga Pēpi – Baby’s Care resources available to them, and also to other providers, will help to support this process,” says Southern DHB Director of Midwifery, Jenny Humphries.

Ten days after birth, GPs will be notified of newborns when they have been selected by the family/whānau. Through the Oranga Pēpi – Baby’s Care initiative, the DHB’s existing electronic enrolment system will also be used to assist access across all five services, and Southern DHB staff will follow up with family/whānau if a newborn is missing out on services.

Details of the initiative have been sent to GPs. If you have any queries please feel free to email [Jenny Humphries](mailto:Jenny.Humphries@southern.org.nz)



Pictured: Baby Clytie with the Oranga Pēpi – Baby’s Care poster

## Health Pathways

HealthPathways that went live in November are as follows:

- [New Palliative Care Patient](#)
- [Acute Crises in Palliative Care](#)
- [Bowel Obstruction in Palliative Care](#)
- [Hypercalcaemia of Malignancy](#)
- [Spinal Cord Compression](#)
- [Raised Intracranial Pressure](#)
- [Superior Vena Cava Obstruction \(SVCO\) in Palliative Care](#)
- [Terminal Haemorrhage in Palliative Care](#)
- [Medications Used in Palliative Care](#)
- [Fentanyl Guide](#)
- [Anxiety, Distress, and Agitation in Palliative Care](#)
- [Cachexia and Anorexia in Palliative Care](#)
- [Constipation in Palliative Care and Oncology](#)
- [Cough in Palliative Care](#)
- [Delirium in Palliative Care](#)
- [Diabetes in Palliative Care](#)
- [Dyspnoea in Palliative Care](#)
- [Excessive or Retained Secretions in Palliative Care](#)
- [Hiccups in Palliative Care](#)
- [Nausea and Vomiting in Palliative Care](#)
- [Oral Care in Palliative Care](#)
- [Pruritus \(Itch\) in Palliative Care](#)

- [Pain Management in Palliative Care](#)
- [Sleep Disturbances in Palliative Care](#)
- [Sweating in Palliative Care](#)
- [Weakness and Fatigue in Palliative Care](#)
- [Syringe Drivers](#)
- [Last Days of Life](#)
- [Paediatric Palliative Care](#)
- [Palliative Care Service](#)
- [Palliative Care Advice](#)

Most frequently viewed pathways for November are:

1. [Deep Vein Thrombosis \(DVT\)](#)
2. [Headaches in Adults](#)
3. [Headaches in Adults](#)
4. [Tonsillitis](#)
5. [Abnormal Uterine Bleeding \(AUB\)](#)
6. [Haematuria in Adults](#)
7. [Gout](#)
8. [Infertility](#)
9. [Atrial Fibrillation \(AF\)](#)
10. [Osteoporosis](#)

## Southern DHB Palliative Care Pathways go live, 466 HealthPathways now localised to the district

The team behind Southern HealthPathways (HP) are celebrating a major milestone with the completion of 29 palliative care pathways going live in November.

With the addition of these new pathways there are now 466 HealthPathways localised to the Southern district. But perhaps just as significant is the collaborative and efficient approach used in the development of this latest contingent.

The palliative care working group included three GPs from different areas of the district – HP clinical editors Jenny Maybin of Wanaka and Peter Gent from Dunedin, as well as GP Pat Reid in Invercargill. Also part of the team were three district nurses, including a palliative nurse specialist and rural-based nurse, two palliative consultants – one each from Dunedin and Invercargill – as well as additional input from a community pharmacist. The group's work began in June and was completed in November and included three face-to-face meetings and a considerable amount of email communication.

"We felt it was important to have wide-representation from around the district and to cover the differences between Southland and Otago hospice services," Dr Maybin explains.

Adds Dr Gent: "Our aim is to ensure all voices are heard in the development of the pathways and these different perspectives mean pathways are more 'well-rounded' and inconsistencies and omissions are picked up."

Southern DHB HealthPathways manager Bridget-Mary McGown says the team hopes to continue to use this collaborative approach in the future: "Working together makes for better HealthPathways and it builds relationships across the district."

# Long Term Conditions



Kirsten Simonsen (Clinical Pharmacist), Emily Flett (Community Dietitian), Nicola Stout (Registered Nurse), Alice Nettleton (Community Dietitian)

## DESMOND training

At the end of October four staff from WellSouth had the privilege of attending a two-day DESMOND training course at the Rotorua Area Primary Health Services (RAPHS). DESMOND stands for Diabetes Education and Self-Management for Ongoing and Newly Diagnosed, and currently runs in several centres across Otago and Southland. The two days were enjoyed with other trainees from various North Island centres, which provided a great opportunity to meet and network with other health professionals up North.

## Diabetes Action Month

Diabetes Action month was celebrated around the country during the month of November. Currently in New Zealand almost a quarter of a million New Zealanders have diabetes in some form. This year, the theme was 'Know the Difference' – highlighting the differences, early signs and symptoms of Type 1, Type 2, and Gestational diabetes in particular.

Type 1 Diabetes, previously known as IDDM or juvenile onset Diabetes, is an autoimmune disease unrelated to lifestyle choices. It is usually diagnosed in childhood, but adults can develop autoimmune diabetes. Type 2 Diabetes (previously known as NIDDM or maturity onset diabetes) is usually related to lifestyle and typically occurs later in adulthood. There are increasing numbers of adolescents and young adults being diagnosed with Type 2 in NZ. Gestational diabetes is another type of diabetes that occurs for some women during pregnancy. Although usually transitory, gestational diabetes significantly increases the risk of developing Type 2 Diabetes later in life, and increases complications during pregnancy.

During this month, World Diabetes Day was also held on the 14th November, an international day to raise diabetes awareness, with this year's theme as 'Diabetes and Women'. Celebrated worldwide, this day aimed to promote the importance of affordable and equitable access worldwide for all women at risk of, or living with diabetes, to essential medicines, technologies and information they require to achieve optimal diabetes outcomes.



Emily Flett outside Pak n Save

Outside Pak n Save on 14 November, members of WellSouth (Marryllyn Donaldson, Lou Oldham, Emily Flett and Sophie Carty), alongside other community groups, held displays, quizzes, free diabetes checks, and a ran a smoothie bike to mark the day. It was well received by the community and also picked up several members of the public that were at risk of, or had, undiagnosed Type 2 Diabetes.

To find out more about diabetes or our services in the community such as dietitian clinics, DESMOND, and Walking Away courses for 2018, please contact [Emily Flett](mailto:Emily.Flett@wellsouth.org.nz)

# *Ngā Kupu o te Mārama*

## *Words of the Month*

**Kōpiro koromeke** - Small Intestines

**Kōpiro nui** - large intestine/colon

**Muka** - Fibre

**Hararei** - holiday

WellSouth is including Māori Words of the Month that are related to relevant health topics covered in WellInformed

# Mental Health

## Mental Health Matters Compassion Fatigue & Burnout

Anyone involved in people organisations can be especially susceptible to both compassion fatigue and burnout. Burnout can occur over a period of time and is common in most places of work. There is a continuum from stress, tiredness, compassion fatigue, burnout to breakdown (physical/mental, emotional/ spiritual). Sustained pressure leads to fatigue, leading to burnout, leading to breakdown.

### Stress

#### The Stress Response

This is the state of arousal consisting of a number of bodily changes that give the feeling of being stressed and the energy for tackling the stressful situation. There are usually triggers for stress which begin the stress response. The body's aim is to come back to a state of equilibrium or balance after being stressed. This return to stability is important for maintaining health and wellbeing. The stress response is known as the 'flight/fight/freeze' response. It occurs so often in its mild form that it usually passes unnoticed. Stress is cumulative and therefore it is vital to keep on top of your stress levels and recognise when they are building.

#### Is stress always negative?

Not always. Stress helps us get going in the morning and achieve what we want to do. It brings anticipation and excitement into life as with a holiday or family celebration. Stress can help you adapt to change, grow, avoid danger, and to strive for a goal. Brief and purposeful periods of over-stimulation are often necessary and good for us.

#### When does stress become a problem?

1. When your stressors are so big, occur so often or last so long that you are unable to handle them well.
2. When you have been overstressed for some time and can notice effects like nervousness, headaches and insomnia.
3. When the energy draining effect of overstress is noticed in extreme fatigue, poor judgement and low output for the effort involved.
4. When a lowering of the natural resistance to disease/infection is seen in increased illness.
5. When friends, relatives and colleagues see signs of strain and express concern.

#### Factors which keep your stress levels under control are usually dependant on the following:

- The amount of control, and autonomy you have in your role
- Creative expression
- Variety in your role and life
- Using and developing your skills and knowledge
- The amount of trust others give you

- The amount of encouragement you give and receive
- The balance you have in your life between your roles

### Compassion Fatigue

This is a process of over tiredness that has been building up for some time as a result of prolonged stress. It leads to burnout. It is common in all helping professions and roles. We can become deeply affected by the dynamics of people problems and the dynamics of relationships. We can also become victims of 'vicarious trauma,' where we take on the feelings of others in their plight. The two main indicators of compassion fatigue:

- Becoming overwhelmed by others needs
- Becoming tired over a long period

### Burnout

Sustained stress and tiredness will lead to burnout and often a person can function at a level of burnout, sometimes for years before a breakdown occurs. Burnout is an emotionally depleted state of mental and physical exhaustion.

People suffering from burnout can feel that it is as a result of weakness on their part, which increases the problem and their feelings of self-worth. This can be reinforced by attitudes of work colleagues and others who may be less sympathetic. Employers can also reinforce this further by blaming the person rather than addressing the issues that may be causing the stress.

#### People who are at risk from burnout are those who are:

- Highly motivated
- Have a sense of commitment
- Enthusiastic and dedicated

#### Types of burnout:

1. Short-Term: people may have physical effects and feel run down. This may be relieved by a break from work, such as a holiday or a change to the job they are doing. This type is reversible and short-lived
2. Long-Term: People suffer prolonged physical, social and psychological changes. Emotionally they may become very flat, accompanied by a decrease in their cognitive functioning and a gradual withdrawal from social contact. This affects both their personal and work life and the recovery period is long and difficult.

#### Three aspects of burnout:

1. Emotional exhaustion: emotionally over extended and exhausted.
2. Reduced Personal Accomplishment: Decreased feelings of competence and a growing tendency to evaluate oneself negatively with respect to work.

3. Depersonalisation: The development of negative, cynical feeling and attitudes towards the people we work with.

## Signs and Signals: Compassion Fatigue and Burnout

Often we do not notice we are heading towards burnout until others tell us or it is too late. Early signs to look for:

### Physical Changes

- Change of eating habits; eating more or less, binge eating, missing meals
- Change of sleeping patterns; can't sleep, oversleep, disturbed sleep
- Feeling low in energy and motivation; minimum effort and output
- Tiredness Indicators; difficulty concentrating; can't think clearly or concentrate for long, physically weak, making mistakes, lack of interest in people and things you once enjoyed; minimum effort or output
- Physical Reaction; your body tells you there is something wrong
- Libido changes

### Emotional Changes

- Feeling down; depressed, stressed, tense, sad, confused, irritable, cynical and hopeless
- Feeling flat; feeling like nothing matters, not caring for self, numbness
- Feeling overwhelmed by things you would usually find able to cope with; associated anxiety symptoms

## Relational and Behavioural Changes

**Social Withdrawal:** unusual intolerance of others, affecting work, family and social life. Neglecting others and withdrawal and avoidance of contact from others generally. Less empathy for people and lower tolerance for people's issues.

Perception changes; others appear different; perception that people are ignoring with you, angry with you and do not understand you; you are less inclined to see other viewpoints and new ideas.

Getting hooked on something; increase in addictive behaviours, thrill seeking, taking more risks and disappearance.

Ultra -sensitive; a person can be over-sensitive to criticism, taking things personally and be bothered by loud noise and tension.

As we rapidly head towards this holiday period, let us remember to take a break, slow it all down and give our bodies and minds time to replenish.

### Paul Reet

*Registered Primary Mental Health Nurse and Registered Counsellor, Family Mental Health Service, Mosgiel, and Mental Health Brief Intervention Coordinator, Chatham Islands*

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## Techniques to Manage Burnout and Stress by Di Noone

### Take control of situations by learning to say No, when you are feeling pressured.

Ask yourself this question, before saying yes to people: Do I feel obligated to say yes? **OR** Do I want to say yes?

### Try Relaxation Techniques

By practising simple meditation techniques, the stress hormones are automatically reduced. With regular practice, tiredness and fatigue are eliminated from the nervous system.

### Keep a Stress Diary

Monitoring your stress levels on a scale of 1-5 each day may help you to work out the main stressors, you need to address.

### Talk to someone

Talk to a friend, family member or counsellor about reviewing your life balance

### Manage Your Time

Draw a circle, divide the pie into:

- Relationships
- Emotional wellbeing
- Mental wellbeing
- Spiritual wellbeing
- Social wellbeing

Is your life in balance? Where does the balance need to shift?

### Mental and Physical self-care

- Cut down on coffee, alcohol and nicotine
- Indulge in physical activity
- Try going for a walk/run or go to the gym at lunch time or before or after work
- Get more sleep-listen to your body, if you need to rest, then rest. It is not lazy to sleep in or have a day off doing nothing!

Di Noone, Mental Health Team Leader

# Health Promotion

## Christmas Cake, Booze, and Breastfeeding

The festive season is looming; Christmas will soon be upon us and let us not forget the New Year celebrations. Breastfeeding mothers can struggle during this time, may feel like they aren't able to relax with their friends and whānau and have a glass of wine or a beer. However, with the Feed Safe app, women are able to enjoy an alcoholic beverage (1-2 standards) safely whilst continuing to breastfeed.

Feed Safe is here to help! A mother whose baby is more than one month old can insert their height, weight and alcohol intake, and the app accurately estimates when their breastmilk should be free from alcohol. Feed Safe also includes a countdown timer! Mothers are provided with a handy guide to understand how much alcohol is in common drinks, and what happens if a mother drinks more than she had planned.

FeedSafe is available on iOS:

App store [appstore.com/feedsafenz](https://appstore.com/feedsafenz)

Google Play <https://play.google.com/store/apps/details?id=au.com.rhpi.feedsafenz&hl=en>

## South Dunedin Street Festival Free from Sweetened Drinks

WellSouth's Health Promotion team worked together with the Southern District Health Board's Community Oral Health Team and the South Dunedin Street Festival Organisers to make the South Dunedin Street Festival Free from Sweetened Drinks, and a healthier family event for whānau. We also wish to acknowledge Mike O'Brien, the organiser of the event, for all his hard work to get this initiative off the ground.

Sweetened drinks contribute to diabetes, obesity and tooth decay, and multi-component interventions are recommended to address these nutrition-related health issues.

Pak'n'Save donated water bottles to sell at discounted prices during the event to help make this possible. Surveys were

conducted with vendors and festival attendees at the event. While vendors made little profit (it was also a cold day!), many acknowledged the benefit to the community. There was overwhelming positive support from festival attendees for a festival free from sweetened drinks.

The next steps will be advocating to the Dunedin City Council to adopt policies which limit or prevent the sale of sweetened drinks at festival and events, and in council-owned facilities. Please contact us if you would like your voice to be heard in our submission on 03 477 1163 or [health.promotion@wellsouth.org.nz](mailto:health.promotion@wellsouth.org.nz)



SDHB Oral team



Mike O'Brien and Sophie Carty

## Listen Yourself Well in Arabic!

WellSouth's Health Promotion Team is proud to announce the release of a new Listen Yourself Well podcast in Arabic!

In collaboration with May Taha and Marwa Othman, Cross Cultural Navigators from WellSouth's outreach team we have made eight podcasts (topics and schedule below) to help former refugees learn about New Zealand's health system and keep themselves well. The podcasts are in Arabic, in a Syrian conversational language style. Tune into Otago Access Radio 105.4 FM or 1575AM, on Tuesdays 1pm and Wednesdays 9pm; and Radio Southland 96.4 FM, on Wednesdays 6pm and Sunday 12.30pm.

OUT NOW! The first two episodes are all about New Zealand's health system and how to stay well. Please feel free to forward this email on to your networks, colleagues, friends, and whānau who might be interested.

Podcasts are available via our Books on Prescription website here or via the Otago Access Radio website here.

## Upcoming shows:

### November

- 14 Wellness and the health system
- 21 Wellness and the health system – guest interview with Hasan Abdel Rahman, Pharmacist
- 28 Oral health – guest interview with Amal Alnabhani, student dentist

### December

- 5 Women's health
- 12 Men's health
- 19 Emotional health
- 26 Healthy eating and physical activity

### January

- 2 Smoking – guest interview with Hasan Abdel Rahman, Pharmacist

## Decembeard



Kiwi men are being called to ditch their razors for Decembeard to raise awareness for Bowel Cancer. New Zealand has one of the highest incidence of bowel cancer in the world. Each year 3,000 people are diagnosed with the disease and more than 1,200 people will die.

### What are the symptoms of Bowel Cancer?

- Bleeding from the bottom without any obvious reason. Or symptoms such as straining, soreness, lumps and achiness
- A persistent change in bowel habit – going to the toilet more often or experiencing looser stools for several weeks
- Abdominal pain, especially severe
- Any lumps or mass in the tummy
- Weight loss and tiredness

### How can Bowel Cancer be prevented?

- Eat plenty of vegetables, legumes, fruits, and wholegrain cereals
- Include lean meat, fish and poultry
- Include low-fat dairy
- Limit saturated fat, red, and processed meat
- Limit alcohol intake
- Don't smoke

So get behind this great cause, it is also a great excuse for men to continue growing the moustache from movember! #beardsbeatbowelcancer

# Notices

## Police Vetting



### Vulnerable Children's Act 2014

From 1 July 2015: **new core workers** must be safety checked before they start work

From 1 July 2016: **new non-core workers** must be safety checked before they start work

By 1 July 2018: **existing children's core workers** (ie those currently employed or engaged as a contractor) must have been safety checked

By 1 July 2019: all **existing non-core workers** must have been safety checked.

### Definitions

**Child** – a person who is under the age of 14 years

**Young Person** – a person who is aged between 14-17 years

**Children's Workers** – people providing a regulated service and whose work may involve regular or overnight contact with children, taking place without a parent or guardian present.

**Core Workers** – a children's worker whose work requires or allows them to be the only children's worker present, or has the primary responsibility for or authority over, children (section 23 of the VCA)

**Non-Core Workers** – those who are not registered medical professionals, eg courtesy van drivers, receptionists, office workers, foster carers

Although there is a national rollout period, WellSouth would like all practices to start completing the new police vetting as per the Vulnerable Children's Act 2014 before these dates and preferably this year.

Please send police vetting forms via email, fax or post to [Lizzie Ross](#).

Tel: 03 477 1163

Fax: 03 477 1168

Post: WellSouth, PO Box 218, Dunedin 9054

For further information about the Vulnerable Children's Act and police vetting, please see: [health.govt.nz/our-work/health-workforce/childrens-action-plan-childrens-worker-safety-checking-and-child-protection-policies](http://health.govt.nz/our-work/health-workforce/childrens-action-plan-childrens-worker-safety-checking-and-child-protection-policies)

## News Tips



Laura Starling is our in-house Administration and Communications Advisor and roving reporter.

If you have any news items or are starting a new initiative that you would like to see in WellInformed, please contact [Laura](#) on 03 477 1163.



### Invercargill

Wed 13 Dec 5:30pm – 6:30pm CPR (Level 2 – 4)

### Dunedin

Thu 07 Dec 8:00am – 4.30pm NZRC Core Advanced Rescuer Course

### Education Early 2018

29 Jan 2018	International, Multidisciplinary Rehabilitation Conference	Christchurch
22 Feb 2018	Medico Legal Forum Informed Consent	Dunedin
23 Apr 2018	Professional Development and Recognition Programme Workshop	Dunedin
16 Feb – 22 Nov 2018	Professional Development and Recognition Programme Drop in Sessions	Dunedin

### Study Opportunities

Asthma and COPD Fundamentals e-Learning via Whitireia Polytechnic. Register before 31 January 2018 and receive a 25% discount. Discounted price is \$135. For more information [www.cpd.whitireia.ac.nz](http://www.cpd.whitireia.ac.nz)

### 2018 Training Calendar

WellSouth is currently putting together a training calendar for 2018. We hope to have all planned and known events available on the link below by early January so practices can plan education and development needs in advance. The Calendar is a live document so will continue to be updated throughout the year as new opportunities arise.

NB: Did you know that you can search for education opportunities by clicking on the link below and then clicking on the green 'Topic' button. To register interest in a particular topic just click on the topic and then click on the green link which says 'register your interest now'. If we have enough people interested then we may be able to facilitate or locate training on your topic of interest.

Please note that these dates can change, so please check the [website](#) for times, dates, registration details and upcoming training

### Southland GP Survey

The Southland Faculty are working with the College of GPs and WellSouth to plan CME events for 2018. All Southland General Practices will be receiving a survey. Your feedback is invaluable for us arranging your learning opportunities for 2018. The survey needs to be completed and returned by or before 08 December 2017.

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## IT Helpdesk

Where possible, all IT jobs must be logged through the WellSouth portal. Doing so automatically logs your query on our ticketing system and supplies you a ticket number to query us on.

WellSouth portal: Accessible from your PMS or [directly](#)  
Email: [support@hss.net.nz](mailto:support@hss.net.nz)  
Ticketing system: [support.hss.net.nz](http://support.hss.net.nz) - allows you to check on the progress of your ticket and send replies to any queries.  
Free phone: 0800 935 575, option 1

Please include as much information as possible about the issue/request, including any screenshots and attachments that may assist with the job. [Remember to remove/cover/blur any patient identifiable data when corresponding with us.](#)

*NOTE: Please do not email IT staff directly as then your job will not be tracked on our ticketing system.*



# HEALTH WORKFORCE NEW ZEALAND

## HAUORA MĀORI TRAINING SUPPORT FUND 2017

### ***Mā te rongō, ka mōhio; Mā te mōhio, ka mārāma; Mā te mārāma, ka mātau; Mā te mātau, ka ora***

Expressions of interest are invited from community health providers for funding to support study in the 2018 academic year. The funding is available for approved training qualifications at NZQA levels 2 – 7 on the National Qualifications Framework. [excluding degrees].

The purpose of this fund is to improve access to relevant training opportunities for Māori health and disability workforce, with an emphasis on non-regulated workers, by supporting them to obtain entry into and through relevant education opportunities.

### **HWNZ fund pays or contributes towards:**

- Course fees charged by accredited training providers.
- Travel subsidy if required to travel more than 50kms one-way to attend.
- Accommodation subsidy
- Cultural Supervision/Support
- Course related resources

**Whāia te matauraka**  
Seek the knowledge

### **Who is eligible?**

This funding is for the Māori health and disability workforce. Therefore, allied health staff, cultural workers, managers etc. can apply if they are:

- Employed by a District Health Board or by a health and disability service (NGO) that is funded by the District Health Board or the Ministry of Health.
- Iwi/Maori providers, primary health care, aged care (community, all levels of residential care facilities) and rural health care.
- Have whakapapa and/or cultural links with Te Ao Māori and Māori communities.
- Depending on demand for support a priority focus will be for non-regulated workforce development.

### **Trainees are not eligible for this funding if:**

- They receive scholarships or other funding from the Ministry of Health.

### **Contact us to:**

- Discuss anticipated study and request an application form.
- All enquiries to

Name: Richard Rongen  
Phone: (03) 2181949 extn 8340  
Email: [Richard.Rongen@southerndhb.govt.nz](mailto:Richard.Rongen@southerndhb.govt.nz)

**Closing date for round 1 applications Friday 15<sup>th</sup> December 2017**