

## Hooray! We made it to Alert Level 1!

Firstly, we would like to thank everyone in the community for their incredible support during the various alert levels. It is a great relief to be at alert level one, which is the result of everyone's collective efforts. On behalf of our health care workers, thank you!

We would also like to thank our amazing healthcare workers for their tireless efforts and hard work during this uncertain period.

Under Alert Level 1 we expect health services will return to pre-COVID levels over the coming days and weeks, though there will be an increased vigilance with regard to patients and visitors coming into our facilities if they are unwell.

If you have

- a cough
- a sore throat
- a runny nose
- sneezing
- aches
- fever
- diarrhoea
- vomiting

you will be asked to visit when you are well or your procedure may, if appropriate, be postponed until you are well.

It should be noted our delivery of care may have changed for some services. For example, some services are not resuming outpatient clinics to the same extent because patients and clinicians found that telephone and videos were better than travelling into the hospital.

### Getting tested for Covid-19

Call your general practice or 0800 VIRUS19 for advice or getting tested.

### Need support?

Please reach out. For free counselling, anytime, call or text 1737

## Bowel screening up and running again

The National Bowel Screening Programme is advising those who received test kits in the mail before or during lockdown, to complete and return their kits as soon as possible.

The programme – which is free for those aged 60-74 who are eligible for publicly-funded health care – was paused during the COVID-19 response, but is now resuming regular activity.

Programme Manager for the Southern DHB, Emma Bell says the test kits have a six month expiry date, so it's important that those already sent out are completed and returned soon.

Despite the pause in the distribution of invitations and test kits, results were processed throughout the lockdown, and those who returned positive results are now being offered colonoscopies.

The DHB is working to offer timely colonoscopies to everybody who returns a positive test result. Of these people, approximately 8% will have cancer.

The National Bowel Screening Programme is an excellent way to detect bowel cancer early.

“We know sometimes people put off doing the test because they are scared of getting a positive result, but early diagnosis increases the chances of having straightforward and successful treatment,” says Emma Bell.

According to the Ministry of Health, those who receive early treatment have a 90% chance of long-term survival.

## Visiting hours at our hospitals

Visiting hours are resuming as normal with Dunedin and Southland Hospitals now open from 2:00pm to 8:00pm for visitors. These hours apply to immediate family (whānau), extended family and friends of the patient.

Please note Dunedin and Southland Hospital Emergency Departments are allowing one support person per patient.



### Dunedin Hospital

- The Neonatal Intensive Care Unit, Adult Intensive Care Unit and High Dependency Units have visiting by appointment only.
- The Adult Intensive Care Unit has a designated quiet time between 12noon – 2:00pm.

### Southland Hospital

- Critical Care Unit allows immediate family only to visit at any time except between 2:00pm – 4:00pm.
- Inpatient Mental Health Unit 7:00am – 8:00pm.
- Children's Ward allows parents / caregivers to visit at all times. Visiting hours for friends and other relatives are 2:00pm – 8:00pm daily.
- Surgical and Medical Wards visiting hours are 8.00am - 8.00pm daily.

### Wakari Hospital

Wards 9A and 10A are by appointment only. All other mental health, intellectual disability (ISIS) visiting times are: 3:00 – 8:00pm or other times by arrangement. Long-term rehabilitation ward: 2:00 – 8:00pm with special arrangements for families, telephone: (03) 476 2191.

### Lakes District Hospital

11:00am – 12noon. 2:00pm – 8:00pm. Children are not to be left unsupervised on hospital grounds.

## Clear the air to stay well this winter!

### Better air quality.

Burn dry wood and no coal. For more information visit: [www.orc.govt.nz/clean-heat](http://www.orc.govt.nz/clean-heat)

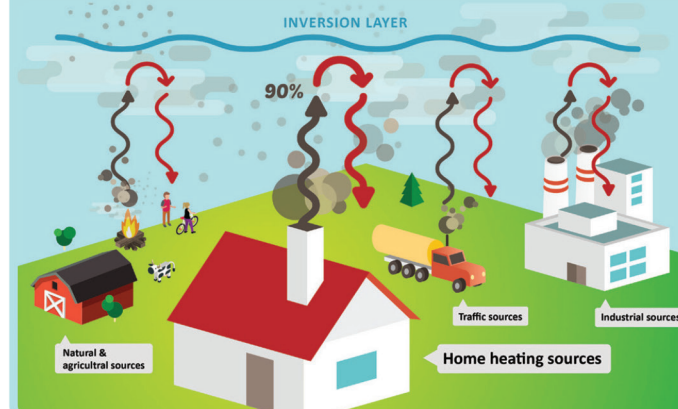
In winter, cold calm conditions trap the emissions created by burning. Alexandra, Cromwell, Clyde, Arrowtown, Milton, Gore and Invercargill are most affected.

### Warmer homes.

Insulate, ventilate, control moisture, use clean heat options. For more information visit: [www.cosyhomes.org.nz](http://www.cosyhomes.org.nz)

### What can we do?

- Keep homes warm and healthy
  - Insulate, ventilate, control moisture
  - Use cleaner heating options
- Reduce vehicle emissions
  - Keep all engines well maintained
  - More walking, cycling, ride-share and public transport
  - Electric vehicles are the future
- Be a good neighbour and reduce the smoke from your chimney
  - Use clean, dry fuel
  - Use electric heating where possible
  - Phase out older burners and open fires
  - Stop burning coal
- Reduce outdoor burning
- Make your home and car smokefree



Cervical cancer can be prevented, if you're 25 and over, book in to have your cervical screening, visit [starttoscreen.co.nz](http://starttoscreen.co.nz) or ring 0800 729 729 to find out if you are due for your cervical screening.

**GIVE YOUR CERVIX SOME SCREEN TIME**

Being healthy includes protecting what you can't see – your cervix



Speech Language Therapist Amy Rosenfeld with stroke patient Ian and his wife Gaynor who was able to continue his follow up care during lockdown by telehealth.

## Telehealth means distance, and lockdown, less of a barrier

Southern DHB patients have had the benefit of consultations in their own homes during the COVID-19 lockdown and the aim going forward is to make it the new normal for the Southern Health system.

Southern DHB Acting General Manager, Medicine, Women's and Children's Health, Simon Donlevy says over the past few months in response to the COVID-19 outbreak, there's been an increase in the use of telehealth at the DHB as an essential way of continuing to deliver patient care and to minimise staff and patients exposure to the virus.

"We've received very positive feedback from staff and patients, many who have not used this technology before. This has provided us with an opportunity to look at how health care professionals across the southern district can continue to use telehealth."

Following this success, a steering group and an interest group with over 70 representatives from across the Southern Health system has been set up to look at how to use telehealth in the best possible way in the future.

Instrumental in getting the group up and running are Endocrinologist, Professor Patrick Manning and Physiotherapist and Hand Therapist Miranda Bühler, who both successfully used telehealth during the COVID -19 lockdown.

They say going forward there is no reason for every patient to be physically present for every appointment, and if a patient can be safely and effectively managed at a distance, then telehealth should be used.

**"Telehealth doesn't have to be used only by patients who have to travel several hours for**

**an appointment, anyone should be able to use it. We want to make it as easy as possible even to having a consultation during someone's lunch hour."**

The group are looking at improving access for health care professionals and patients wherever they are in the district. In the long term they want to see patients able to talk to their clinician from home, the office or a clinic nearer to home.

Do you have an appointment coming up? Ask if telehealth would be right for you.

## Board Update



Dave Cull, Chair

Tēnā koutou katoa

We're at Alert Level 1! Thank goodness.

I feel I need to express another round of appreciation, to our health workers, our community, and for our great fortune to be New Zealanders. Thank you all.

Southern DHB can now resume planning for the coming year, albeit with a raft of new factors to take into account. The immediate focus is naturally on the Annual Plan, which will necessarily be different from that envisaged only three months back.

In that regard it is interesting to reflect on what has changed, and what directions are reinforced.

Certainly, our thinking needs to be informed by the reality of the pandemic encircling the globe, and the possibility of worse to come. We have learned that we can mobilise and adapt, but it was a stretch, and we need to lift our Public Health capacity, not just to combat epidemics, but across the preventative health spectrum.

At the same time, the experience has confirmed much of our already-stated direction for the future of health care in the South, and if anything has lent greater urgency to achieving our goals.

The Southern health system's model of care needs to integrate primary and secondary provision to improve patient access and flow, right from diagnosis through hospital treatment to follow-up. Much of that will be increasingly via telemedicine.

This is not only essential for achieving improved health outcomes for our communities. It is also critical if the new Dunedin hospital is to be utilised to its fullest potential.

To achieve those ambitions, Southern DHB – both clinicians and management – will need intense, good faith collaboration with WellSouth PHO, the Alliance Leadership Team and all our NGO and Iwi based health care partners.

Now, more than ever, the health and well-being of all our community depends on us truly working as a united Southern Health system. I can't speak highly enough, of the contributions of all our health care partners. That includes WellSouth PHO, general practices, rural hospitals, midwives, pharmacists, aged residential care and the many organisations (Iwi and NGOs) that provide important primary health-care services in our communities every day, as well as the Community Health Council, which continues to provide constructive advice and feedback as a voice for patients and whānau.

The past months have surely tested us, as a health system, as a community, and as individual health workers of all stripes. We know that supporting equity of health provision across our diverse populations, and delivering services across our vast geographic area, remains a pressing challenge.

But these last months have also taught us much and revealed latent strengths. We are committed to drawing upon these to deliver the very best health system for our patients and their whānau in the Southern district.

### Disability Strategy for Southern DHB – have your say



Southern District Health Board is developing a strategy to make sure they are responsive to disabled people and their healthcare needs.

We want your feedback on the draft strategy to make sure we've reflected what you have told us.

Find out more and give feedback via a short survey at:

[www.engage.southernhealth.nz/disability](http://www.engage.southernhealth.nz/disability)

Don't have access to a computer? Please telephone (03) 479 2162 so that a printed copy of the survey can be sent to you.

### There's no better time to support Smokefree than now!

Join the 85% of New Zealanders who are currently smokefree and give stopping smoking a go.

Contact Southern Stop Smoking Service on 0800 925 242 for FREE Stop Smoking coaching services.

#### Did you know?

- 5000 New Zealanders die every year from a smoking-related disease. That's 13 people every day!
- Cigarettes are more widely available than bread, milk, postage stamps and medication! You can buy many basic groceries to feed your family for the cost of a pouch of tobacco.
- Currently there are no limits on who can sell cigarettes and where they can be sold. On average there are six shops selling cigarettes within a 10 minute walk of a secondary school.
- Giving up smoking is like getting a pay rise. In a year you can save over \$8,000 if you smoke 20 cigarettes a day.



Smokefree South  
Like us on Facebook at Smokefree South.

