

Mental Health team supporting decision-making for patients

Since their introduction at Southern DHB two years ago, over 92 Mental Health Advance Preference Statements (MAPs) have been created.

A MAP is a way to let people know what you would like to have happen if you experience an episode of mental distress. It can give you a voice when you might not normally be heard because you are too unwell or not in a position to be able to speak for yourself.

Southern DHB Nursing Director for Mental Health Addiction and Intellectual Disability, Heather Casey says she's delighted with the success of the rollout of MAPs at the DHB and the benefit to clients.

The focus now is to get many more MAPs made sector wide. We now have a team of "champions" who work both with clients and with teams and other service providers to keep the message about MAPs at the forefront.

"Other exciting work is a series of hui that are in progress to create a Māori-centred MAP which will be an important tool in addressing inequality for Māori clients. These are being led by Consumer Advisor, Johnnie Potiki and Daniel Tawaroa, Pōtātaki Pae Ora/Cultural Connector from the Māori Mental Health Directorate," says Ms Casey.

Information and the ability to complete a MAP online is available at southernhealth.nz



Southern DHB Nursing Director for Mental Health Addiction and Intellectual Disability Heather Casey with Consumer Advisor Johnnie Potiki



View North from Cadbury site

Site preparations continue at pace

A huge amount of design planning and site preparation is underway for the New Dunedin Hospital.

The project's Clinical Leadership Group Chair, John Adams, says it's exciting to be designing the facility with patient outcomes, sustainability and tikaka at top of mind.

"The new hospital will feature changes and innovations that will enhance the patient and whānau experience. For example, most rooms will be single rooms with their own ensuites, and there will be space for whānau to stay. We are also working closely with mana whenua to ensure that appropriate tikaka is in place."

John says the technology and process improvements will improve efficiency, enhance the patient experience, increase our pandemic readiness and benefit generations across the Southern district.

"It's a privilege to be contributing to a health and education hub for our region."

In parallel with the design, site preparations continue on the old Cadbury site. Old buildings have largely been demolished, and timber and steel have been set aside for re-use. The buildings facing the road have been left as a barrier to minimise disruption to the public.

This month we expect to see a new addition to the Dunedin skyline when a large crawler crane arrives on site to assist with further demolition.

Orthopaedic waitlist programme trial begins

Suitable patients with osteoarthritis who are waiting for surgery have been given the opportunity to take part in a trial of a new programme which supports patients while they wait.

Fourteen patients started the programme last month in Dunedin and are attending six, one and a half hour sessions.

The programme has been made possible by a team of enthusiastic clinicians led by Senior Physiotherapist, Martin Kidd. Martin along with six physiotherapy students are facilitating the programme.

The patient centred sessions include education about their condition, lifestyle and treatment including pain management education, consideration of environmental adaptations in the home and workplace, and the use of equipment if needed.

"Participants are given their own personalised exercise programme and continue this at home. Following the completion of the programme all assessments/outcome measures carried before the patients started the programme will be repeated, at a follow up one-to-one session," says Martin.

"There is a long wait list for this type of surgery and we want to help patients manage their condition during this time. This is the first time the DHB has run this type of programme in Dunedin, and we really want to see it make a difference to patients."



Physiotherapy student Aman Riar, patient Gerald Crawford and Senior Physiotherapist Martin Kidd



Honouring our Nurses and Midwives

International Nurses Day

Another cause for celebration was International Nurses Day last week (12 May), honouring the remarkable contribution nurses make every day to health outcomes in the Southern region.

“We have so many dedicated nurses who come to work every day to do their best by our patients,” says Chief Nursing and Midwifery Officer, Jane Wilson.

“Nurses play a vital role in healthcare, and we respect and admire the important work they do in our Southern Health system and for our community.”

“On behalf of Southern DHB, I’d like to extend my heartfelt thanks to our team of over 2200 nurses across the region. Happy International Nurses Day!”

International Day of the Midwife

Southern DHB celebrated International Day of the Midwife on May 5. The DHB acknowledged and gave thanks to our wonderful team of midwives, highlighting the important role they play in the Southern Health system.

Midwives provide care to women and their babies before, during and after birthing in a variety of settings whether at home, at a birthing unit or in the maternity wings of its hospitals.

“Each year more than 3500 babies are born across the district and every single birth has a midwife involved in caring for the mother and her baby,” says Director of Midwifery Heather LaDell.

“We are very proud of our midwives, their achievements and dedication providing high quality care for women and their families.”

Our midwives at Southern DHB work rostered shifts to provide core midwifery services and 24 hour care while women are inpatients. Core midwives work alongside their lead maternity carer colleagues and other health professionals to ensure women receive the care that meets their needs.

Quality improvement in mental health



Congratulations to Southern DHB staff Vicki Mann, George Kerr and Toni Huls who successfully completed a six-month course looking at quality improvement in mental health and addiction care.

The Health Safety and Quality Commission’s inaugural Quality in action programme was developed by its Mental Health and Addiction Quality Improvement Programme team. Nationally, 42 practitioners took part,

learning about co-design and quality improvement methods and tools. They then applied these within practical quality improvement projects in their workplaces.

At Southern DHB, Vicki worked across all inpatient wards looking at further developing Safewards interventions; George looked at how we review serious events within our services; and Toni worked on the zero seclusion project.

Board Update



Pete Hodgson, Chair

What will our new health system look like?

Health is in for a shake-up – the biggest in at least 20 years. What will our new health system look like?

I am excited by the change. Yet I have a few misgivings too.

I see two big advantages. Firstly, it is designed to make a real difference to Māori health. The life expectancy gap is seven or eight years. Non-Māori live almost 10 per cent longer than do Māori. For a nation that seeks to give all citizens an equal shot at a fulfilling live, this is a big disparity.


The new system will tackle the fact that Māori are less likely to use the health system, or use it in time. Of course, someone’s life span is not improved by just by having ready access to the health system. The social determinants of health such as employment or housing play a large role. But poor health care for Māori is a reality, and it must be addressed.

Secondly, the new national approach should help iron out differences from one region to another. We have seen the recent stories about growing waiting lists in the Southern district for some cancer treatments. These are serious issues which we must address forthwith. Other New Zealanders are currently getting better treatment than we are.

Yet there are other areas where we receive better service than other parts of New Zealand – most heart conditions as an example. Of course, ‘good news’ doesn’t make the headlines; we hear only of failure not success. Yet other New Zealanders are getting fewer of those services than we are.

My main misgiving is that I do not yet understand how the new system will hear from our communities. Some areas have locality networks – Central Otago is a good example – and it may be that they should be deployed everywhere. I know the Minister is placing a lot of emphasis on ensuring that the voice of communities is heard, but the detail of how that might best happen isn’t yet clear.

Treasured Lactation Consultant retires



After helping thousands of Southland’s mothers and babies with breastfeeding over the past 20 years, Southland Hospital’s Lactation Consultant, Baby Friendly Hospital Coordinator and Midwife, Mary Grant has retired.

Mary acknowledged the “wonderful” support from the Southland community and organisations over her 37 years at Southland Hospital.