

# Te Whetu Mārama

## NOVA

Spring 2020



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**AUCKLAND**  
DISTRICT HEALTH BOARD  
*Te Toka Tumai*

# Staying connected



**Ailsa Claire,**  
*Chief Executive OBE*

It feels a lifetime ago since I wrote my last column for Te Whetu Mārama. So much has happened since then!

I am extremely proud of our response to COVID-19. It shows our people at their best. We have had to change rapidly and respond to an evolving situation. Our people are embracing these changes and going above and beyond. You can read more about this in the pages of this edition.

Since early this year, we have had teams working at the borders, at community testing stations, and carrying out contact tracing. Many have moved from their usual roles to provide support in these areas when it's been needed the most.

Regionally, we're engaging with our Māori community and our Pacific communities to develop pandemic responses to address inequities and reflect the beliefs, values and aspirations of whānau.

When the second wave hit in August, it was amazing to see how rapidly things were put into place, while we continued to run a busy hospital. This was through good planning and sheer hard work from many people.

We know we are in for the long haul in responding to COVID-19. We know we will experience future cases of COVID-19. We are planning for this so we can respond quickly, safely and with as little impact as possible on planned care.

In this new normal we do need to continue working differently – increasing the use of telephone and video appointments, increasing working at home and more routine mask-wearing guidelines.

We need to do this alongside providing safe, high-quality healthcare and reducing the health inequities we know exist for our Māori and Pacific communities.

This continues to be an anxious time for many, so please do make sure you look after your own health and wellbeing. Support is available if you need it – talk to your manager, contact EAP and look on Hippo for a range of resources.

Thank you again to our team of 11,000 for the amazing work you do and for continuing to keep our patients and our communities safe.

*Ailsa*

## patients' applause

A big thank you to all concerned with my stay in Auckland Hospital. I was lucky enough to be fast tracked for surgery even though there was a complete lockdown in New Zealand for the Coronavirus. A huge thank you to the surgeons, doctors and in particular the very caring nursing staff in the Cardiac Ward – you are all a credit to the medical profession, you have all given me another 20 years of living. I am very grateful.

Thank you.

*Anon*

My recent experience at Auckland City Hospital, I must say, was a great one. It was my first time receiving medical treatment. I found all the nurses and doctors were very pleasant, helpful and very informative. They all showed great professionalism and skill. The facilities were great – they were spotless and in great condition. Auckland DHB can be very proud of their entire staff who often go beyond the call of duty to ensure patients are well taken care of.

*C.P*

Having an appointment via phone was excellent! Saves time and cost! Win, win, win.

*Anon*

**On the cover:** (L) to (R) Back Row: Warwick Catchpole, Ops Manager AED CDU; Anil Nair, Service Clinical Director AEDCDU; Tracey Barley, Nurse Unit Manager AEDCDU; Tom Salmond, Clinical Nurse Specialist; Margaret Colligan, Nurse Practitioner; Hillary Whitmill, Nurse Practitioner; Bex Costello, Clinical Nurse Consultant; Emma Lawry, Emergency Medicine Specialist; Dalice Wilson, Charge Nurse Manager AED.

Front Row: Grant Chandler, Clinical Nurse Specialist; Paul Callaghan, Fire and Emergency New Zealand.

Absent : Annemarie Pickering, Nurse Director Medical; Emma Hill, Charge Nurse Manager CDU; Claire Preston, Clinical Nurse Consultant.

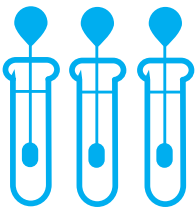
# COVID-19 by the Numbers at Auckland DHB

A snapshot of how we responded during the first outbreak of COVID-19 in New Zealand. Stats recorded represent the time period 28 February to 8 June.




**Over 11,000**  
of us in the Auckland DHB whānau

**4 Values** Haere mai  
Manaaki  
Tūhono  
Angama



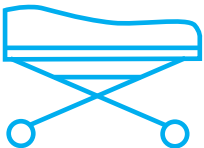
**63,000** COVID-19 tests  
done in our labs

**9571** in-house flu  
vaccinations for  
our people




**31,542** bottles of hand sanitiser  
used around the hospital

**111,000** visitor-  
screening stickers  
printed



**24,371** patients attended our  
Emergency Departments

**8466**  
surgeries  
took place

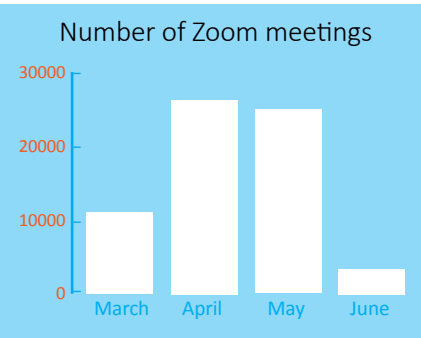



At alert levels 3 and 4\*  
**70%** of our team worked on-site  
**21%** of our team worked from home  
and **8%** did both.

**101** media  
requests to the  
Communications team



**17** CE webinars  
**200,000** hits on COVID-19  
related content on Hippo  
**113.8%** increase in our  
Facebook page reach



\*Source: Learnings from COVID-19 staff survey. June 2020.



We've got this

*Te Whetu Mārama* caught up with Emma Lawrey, Emergency Medicine Specialist and Tracey Barley, Nurse Unit Manager. They are both part of the team who drew on disaster-response training to run the COVID-19 screening tent outside the Adult Emergency Department.

#### **What was the screening tent set up for?**

**Emma:** During community outbreaks of COVID-19, the screening tent helps the Emergency Department (ED) team direct patients to the right area in the ED based on their potential or confirmed COVID-19 status.

**Tracey:** Everyone coming into the ED waiting area would increase the risk of transmission, so we use a screening tool to safely separate high- and low-risk cases. Those who are high risk are taken to an isolation room and treated there. Low-risk patients are sent into the ED. The process instils confidence that we have the right risk management in place.

### Emma, we hear you drew on previous disaster-response experience for this?

**Emma:** My previous experience working with the New Zealand Medical Assistance Team (NZMAT) was invaluable. NZMAT is a World Health Organization-verified emergency medical team skilled at setting up independent and fully functional field hospitals after earthquakes and tsunamis. I was with NZMAT in Samoa during the recent measles outbreak, which gave me great experience to draw on.

### How was the tent set up?

**Emma:** We decided to set up the tent the first time the country went into lockdown. Six amazing Fire and Emergency crew assembled their 200kg Urban Rescue tent for us to use. The tent was divided into cubicles, which allowed us to safely screen patients.

Our Facilities, Security and Technology teams made sure we were ready to go. Processes and guidelines were developed, so we were up and running by 27 March.

The second time we had community cases of COVID-19, we did not have to start from scratch because we had the benefit of past learnings. Our staff had confidence in the processes and improved those that needed enhancing.

### What facilities does the tent contain?

**Tracey:** We are able to take temperatures and check heart rates. The Technology team have provided us with a Computer On Wheels (COW) affectionately called 'Daisy', which allows us to register patients and diarise notes just like we would inside the hospital.

Water, power and technology are plugged in. Sinks are set up for hand washing with Portaloo's installed outside.

### How many employees are typically in the tent?

**Tracey:** We decided early on never to have a lone worker – there are always two clinical staff in the tent. When we first started, we began with a doctor and a nurse specialist and moved to a model with two clinical nurse specialists or registered nurses.

### What does it feel like for the team involved?

**Tracey:** When the first outbreak happened, most of those working in the tent and our ED clerks and triage nurses who are front of house were potentially feeling very exposed. Many had never worked in this sort of environment before. Some had seen colleagues die during the SARS pandemic overseas. Our priority was to reassure them by putting processes in place to keep them safe. If we did that, patient safety would follow.

The second time around, we thought here we go again. But on a good note, we were more prepared. More people were wanting to be swabbed and checked, even with no symptoms. The visitor screening process is now in the tent, which adds to the busyness. It's quite a little community now!

**Emma:** It felt like a challenge setting this up, but one we all embraced. Everyone comes to this bringing their best.

### How do patients feel about their experience?

**Emma:** The message from our staff is: 'It's ok to be here'. With a no-visitor policy, people have to hand over their whānau to our care. Our staff create a positive environment that conveys we will take the best possible care of their whānau.

**Tracey:** Patients arriving at the ED are anxious already. The tent signals that the hospital has a plan and is prepared.

*Opposite page and below: Inside the ED screening tent. Above left: The team (named on page 2). Left: Clinical Nurse Specialists Karen Garlick (L) and Janene Waye (R) with 'Daisy', the Computer on Wheels (COW) in the middle.*



*Ka pai and thank you to the team involved.*

# ‘Love Your Health Worker’ – Kiwis spread love during COVID-19 lockdown

## #LOVEYOURHEALTHWORKER

Auckland DHB’s adult health services charity, **Auckland Health Foundation**, wanted to unite everyone in helping our health workers fight COVID-19, so in March this year, the team created a place for Kiwis to go (virtually!) to share their love: [www.loveyourhealthworker.org.nz](http://www.loveyourhealthworker.org.nz).

Auckland Health Foundation CEO Gwen Green says, “We knew many New Zealanders were feeling helpless. They wanted to thank those who were working selflessly throughout lockdown and continuing to care for patients through such uncertain times. We started a #loveyourhealthworker movement and we were blown away by the love that people shared.”

More than 2,600 messages of appreciation flowed in across social media. People donated and organisations gave back to our health workers whose whānau were financially impacted by the pandemic. In total, they donated around \$130,000. Kiwis shared videos, songs, cards, artwork – all to say thank you.

To find out how you can support health workers impacted by COVID-19, call 09 307 6039 or visit [www.aucklandhealthfoundation.org.nz](http://www.aucklandhealthfoundation.org.nz).



# Our local heroes

## Congratulations to our 2020 local heroes!



### January Rangitoto Ward



“Dr Lai-Peng Tham and the rehab team on Rangitoto provided excellent medical treatment and holistic care. The whole team were caring, compassionate and instilled a sense of safety and professionalism. The excellent input from the occupational therapy and physiotherapy staff working collaboratively with our extended family was a wonderful example of how teams should function. It’s inspiring to see such a high level of teamwork and the caring, empathic way vulnerable patients and families are managed.”

### February Debbie Watkin Clinical Psychologist, Te Puaruruhau



“Debbie is an incredible psychologist. She’s energetic, enthusiastic and very hardworking. Debbie’s breadth of knowledge and thoughtful manner with children and families who have experienced trauma shows her compassionate heart. She sees children as individuals, winning their trust and understanding their perspective. She is passionate about advocating for individual needs and uncompromising about the care teams required to meet these needs.”

### March Angela Skelton Team Administrator, Dermatology Department



“Angela champions improvements in the team and across the service. Angela has embedded health and safety, including ease of access to information and better recording of processes to reduce risk. Her initiatives and efforts ensure patients are safe, receive timely care and clinical staff are supported and well placed when undertaking consultations and procedures.”

### April Laura Ison Mental Health Nurse, Buchanan Rehabilitation Centre



“Laura truly lives the values of Auckland DHB with her boundless enthusiasm and clinical expertise. She is compassionate, collaborative, fun, warm and always willing to go the extra mile. Laura shares her love of what she does amongst her workmates, and it’s wonderful being around Laura and watching her do what she does in the workplace. Above all else, Laura sets the standard for excellence in all aspects of her work. She’s one in a million.”

**May Sandy Grant**  
Low Vision Coordinator, Eye Clinic,  
Greenlane Clinical Centre



"Sandy is a compassionate person who understood how difficult it was for my husband to come to terms with being blind. She talked and encouraged him to get out of bed and gave him the confidence to move forward. She put us in touch with the appropriate people, organised a white cane and an Alexa so he could listen to books. She put him on the Foundation list to get a guide dog. She's passionate about what she does and without her we couldn't have coped with this huge change. Sandy goes above and beyond."

**June Dr Kirk Freeman**  
Intensive Care Specialist, DCCM



"Kirk took on the role of the clinical lead for the PPE taskforce for our COVID-19 response. He put a huge amount of effort into researching, sourcing and supplying PPE for staff. Kirk was available to staff and was always polite and pleasant despite the frustrations. He visited the most high-risk areas many times to get an understanding of how they worked, and to supply items they were missing. This work is far outside of the scope of his normal role."

**July Duncan Bliss**  
Interim Associate Director, General Surgery



"Duncan's level of communication to the service was outstanding; he included everyone, was clear in his approach and delivery of information and had a calming influence whilst keeping morale up with his positive friendly nature. He is a fantastic leader and this was certainly demonstrated again during COVID-19. I am sure it was especially challenging given the Directorate leadership also changed at this time, yet Duncan never portrayed any difficulty, he led us all with his usual assurance and calm decision making. He is held in very high esteem across the Directorate and this was reinforced during the COVID-19 period."

**July Leva Hehepoto**  
Pacific Island Community Health Worker,  
Starship Community



"Leva is a very important member of our Starship Community team. She has worked at within child health at Auckland DHB for 14 years and the work she does within our community with children and whānau is invaluable. She is a proud Tongan woman who has provided cultural support and advocacy to many families as well as staff. She is a very humble person and her way of engaging with families should be recognised. Her commitment to some very vulnerable families has been really valued by her clients and her contribution to our Starship Community clients is making our local communities a better place."



# Our COVID-19 response

A COVID-19 Incident Management Team has been running since January 2020. The team is led by Alex Pimm, Director of Patient Management Services before COVID-19, and includes clinical and operational expertise as well as HR logistics, supply chain and advice from other experts.

At the end of February, the first New Zealand positive COVID-19 case was announced and things quickly ramped up for the team. As the changes in alert levels came at short notice, the Incident Management Team had to quickly change and communicate processes and clinical guides to keep people safe and reduce the risk of COVID-19 transmission.

COVID-19 will continue to have an impact on all of us for the foreseeable future. At Auckland DHB, planning continues so that the risk of COVID-19 can be managed as safely as possible whilst maintaining as much business as usual as we can.

An Incident Management Team can be stood up to respond to anything from a power outage to a major event in Auckland or industrial action. Led by an Incident Controller, the team brings together the people with the right skills and knowledge to respond to the incident. Using a 'command and control' process, the Incident Management Team has the authority to quickly make informed decisions relating to the incident.

## COVID-19 timeline at a glance

7 Jan	New type of Coronavirus identified by Chinese authorities.
27 Jan	Public health staff started to meet flights from China to look for signs of virus and provide health information.
29 Jan	Auckland DHB stands up a Coronavirus Incident Management Team (IMT).
31 Jan	WHO declares the outbreak of a global public health emergency.
3 Feb	Everyone who has visited, or transited through, mainland China must self-isolate for 14 days.
28 Feb	First case of COVID-19 in NZ admitted to Auckland City Hospital.
29 Feb	Supermarkets are swamped by people buying toilet paper, hand sanitiser and tinned food.
4 Mar	Second case of COVID-19 in NZ announced – a person travelling from Italy.
11 Mar	WHO declares an official pandemic.
19 Mar	NZ borders closed to all but New Zealand citizens and permanent residents.
21 Mar	New Zealand moves into alert level 2.
23 Mar	Number of cases of COVID-19 in New Zealand exceeds 100 – the country moves to alert level 3.
24 Mar	State of emergency declared in New Zealand.
25 Mar	New Zealand moves to alert level 4.
29 Mar	First COVID-19 related death in New Zealand.
5 April	COVID-19 cases in New Zealand exceed 1000.
27 Apr	New Zealand moves to alert level 3.
4 May	No new cases of COVID-19 are reported in New Zealand – first time since 16 March.
13 May	New Zealand moves to alert level 2.
28 May	New Zealand COVID-19 death toll rises to 22.
8 June	No active cases of COVID-19 in NZ – the country moves to alert level 1.
9 August	100 days without community transmission of COVID-19 in New Zealand.
11 August	New case of COVID-19 in the community in Auckland.
12 August	Auckland moves to alert level 3, the rest of New Zealand moves to alert level 2.
30 August	All of New Zealand at alert level 2, with additional measures for Auckland.
31 August	Face coverings become mandatory on public transport.



# Celebrating our people

## Auckland DHB Facebook comments



- ADHB has done an absolutely amazing job in this pandemic and my heart goes with everyone who was a part of this!
- I wanted to say an enormous thank you to everyone working at the hospital or helping with the running of it in some way! You are doing an amazing job! ... Thank you 🙏🙏
- The pre-registration health check system for those with appointments is excellent!

## Letters from children

### Excerpt of letter from Brown's Bay School

You put your lives at risk when we were in lockdown. You were our front line soldiers. You have helped us through the hard times and been there for us every step of the way. You are the equivalent of metal people flying in the sky, fighting octopus aliens, except much better. We need more people in the world like you.

### Excerpt of letter from Rosebank School

Thank you for keeping us safe from the virus. You saved people from the virus. You also kept my family safe. Thank you for testing people to make sure they do not have the virus. You saved lives.

### Excerpt of letter from Titirangi Primary

You must have been concerned about COVID-19 and the health of your own family, that if you got it, they would get it as well. Thank you very much for the work you have done.

## Hippo Shout Outs!



### All Auckland DHB staff

We will be weathering through another episode of lockdown. Hand in hand let's work together as we always do.

– *Clinical Decision Unit*

### Clinic schedulers

Thank you for rescheduling clinic appointments and changing clinic appointments to telehealth with short notice. Thank you for going the extra mile in these ever changing, stressful and exceptional circumstances.

– *Kathryn Edward, Paediatric Rehabilitation Doctor, Starship*

### Orderlies

The Orderlies took it in their stride, moving many suspected cases with good humour and treating the person in the bed as a person.

– *Aidan Lees, Orderly Services*

### Communications Team

During COVID-19 and beyond, my communication team colleagues continued to aim high, working hard to manage the continued urgent communication requirements of the COVID-19 response while balancing the many other projects and initiatives across Auckland DHB.

– *Maxine Stead, Communications*

### PPE nurses

The PPE nurses were seconded from ward roles to help all our clinical teams with PPE questions and supply issues 24/7 during COVID-19. They were all really keen to learn, quickly upskilled and became key resources for our clinicians.

– *Michael Shepherd, Paediatric Emergency*

### General Medicine

I would like to shout out to all the amazing nurses, HCAs (Health Care Assistants), Allied Health, ward clerks and medical teams in General Medicine. Everyone has pulled together and risen to the challenge when responding to the COVID-19 pandemic and has done so with professionalism and kindness.

– *Miriam De Vere Beavis, General Medicine*

### Cancer and Blood Research Nurses

During the COVID-19 lockdown our office had to work from home, leaving our research nurses to do a lot of tasks our office team would normally do in preparing for patient visits on trial. Without their willingness to help, these trials simply could not have run.

– *Sean Gaffney, Haematology Research*

# and our health care

## Patient Management Service

The Clinical Nurse Managers, Patient at Risk team, resource, transit, transition and Safe Staffing team, Bureau Nursing, orderlies, waste orderlies, chaplains, production planning and cleaners were awesome throughout the duration of COVID-19. Nothing was too hard.

– Jane Lees, Patient Management Service

## Level 4 – N95 fit testers

What an amazing job they did to get not only their own teams fit tested, but also surgeons, staff from other floors, perfusion staff and dental staff. They worked long hours to get through the work, which was difficult when masks changed and a lot had to be redone.

– Deborah Sucich, Perioperative

## Payroll team

The Payroll Team seamlessly provided the payruns from home during COVID-19 lockdown and into L3/2. This was something we never thought would be possible and they took up the challenge and did an amazing job.

– Sarah McLeod, Organisational Development & Recruitment

## Radiation Oncology Nursing and Radiation Therapists

Your compassion and empathy was appreciated by many patients. Your support, advice and information about hospital screening helped reduce much anxiety that was felt by many.

– Judy Moselen, Medical Oncology

## Occupational Health team

Thank you to our occupational health team, including valued ring-ins, who stepped out of their comfort zones and put their heart into making sure our staff were safe during the COVID-19 response.

– Alexandra Muthu, Occupational Health

**All 11,000+ of us at Auckland DHB are contributing in one way or another to our COVID-19 response. We thank and celebrate you all.**



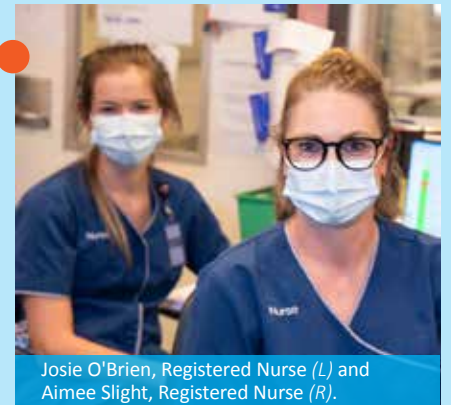
Aaron Guanlao, Health Protection Officer (L) and Chee Ling Chan, Public Health Nurse (R).

## Auckland Regional Public Health Service (ARPHS)

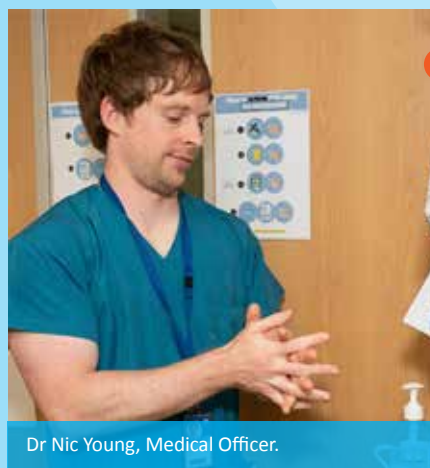
Some of the first to respond to COVID-19 in New Zealand, this team greeted and informed travellers coming into Auckland International Airport, worked closely with Customs and Immigration, and are involved in contact tracing.

## Adult and Child Emergency departments and Clinical Decision Unit

Working tirelessly at the forefront of our response, these teams implement screening tents for patients coming into ED and have put systems in place that can be easily adapted for future outbreaks or future pandemics.



Josie O'Brien, Registered Nurse (L) and Aimee Slight, Registered Nurse (R).



Dr Nic Young, Medical Officer.

## General Medicine

Going above and beyond, this team have to deal with complexity and uncertainty every day. A dedicated ward has been set up for patients who have, or are suspected of having, COVID-19 and need hospitalisation. A special shout out to our dedicated cleaners who keep all patient areas disinfected and clean.

## LabPlus

The team stepped up and rapidly expanded to support the unprecedented demand for COVID-19 testing. Through amazing teamwork and collaboration with the University of Auckland and Grafton Clinical Genomics, they have been able to increase testing capacity.



Dhanya Jayaraj, Technical Specialist Virology Molecular Department (back) and Pavithra Raghuraman, Medical Laboratory Scientist Virology Molecular Department (front).

## Have you seen the new escalator at Auckland City Hospital?

Every year the escalator at Auckland City Hospital travels 30,000km – the equivalent of flying to New York and back. The new quicker and quieter escalator is also a more energy-efficient escalator, so it's a win for the DHB's carbon footprint as well.

The new escalator was fitted as part of the Facilities Infrastructure and Remediation Programme (FIRP).

The Government has invested \$262 million in phase 2 of FIRP, most of which will be used to provide critical infrastructure including electrical power, water, heating and cooling systems, and emergency back-up systems.



## The Newborn Metabolic Screening Programme saving babies' lives

In the first 48 hours of life, newborn babies have their blood taken and tested. Most whānau will never hear back. For others, it can be life-changing.

The Newborn Metabolic Screening Programme (also known as the heel prick test) is carried out by midwives who collect small droplets of blood from a newborn baby's heel and send the sample card to Auckland City Hospital's LabPlus laboratory.

This is New Zealand's longest running national screening programme and involves testing the bloodspot samples collected from newborn

babies for a number of serious or life-threatening conditions. In the last 30 years, more than 1.5 million newborns have been screened. "Through screening, hundreds of babies' lives have been saved or their quality of life has been dramatically improved," says Daniel Hunt, Pathology and Laboratory Medicine General Manager.

"The programme has had such an impact on thousands of New Zealanders," he says. "In 2019, 67 babies benefitted from the programme."

Dr Dianne Webster (CNZM), Clinical

Lead for the Newborn Metabolic Screening Programme, says, "There are about 60,000 babies a year born in New Zealand and we pretty well screen all of them."

In December 2019, the programme turned 50. Astrid Koorneef, Group Manager from the Ministry of Health, says it has continued to evolve, becoming one of the most successful programmes in New Zealand. This wouldn't have been possible without the amazing team behind the scenes ensuring the programme is run successfully. Congratulations to Dianne and the team at LabPlus!



(Left) Dr Dianne Webster, Director National Testing Centre and Dr Natasha Heather, Paediatric Endocrinologist, NZ Newborn Metabolic Screening Programme at the 50th anniversary celebration of the Newborn Metabolic Screening Programme.

(Right) Ian Costello, Director Clinical Support Services; Dr Dianne Webster, Director National Testing Centre and Daniel Hunt, General Manager - Pathology and Laboratory Medicine.

*Give a colleague a hand*



Auckland Health Foundation  
AUCKLAND DISTRICT HEALTH BOARD  
*Te Toka Tumai*

# Support our Manaaki Fund

## Who does the Manaaki Fund help?

The fund helps our Auckland DHB whānau who have been financially impacted by COVID-19. The Auckland Health Foundation is appealing to raise money for the fund, and Auckland DHB CEO Ailsa Claire is encouraging those who are able to give what they can.



Together we can help to ensure no family in our DHB goes without the necessities. We are grateful to everyone who has contributed to the Manaaki Fund so far. Our goal is to offer more long-lasting support and ensure we continue to look after each other.

– Ailsa Claire, Auckland DHB Chief Executive



## How does it help?

- To provide immediate relief – supermarket, petrol and store vouchers.
- To set up and run an employee support centre for ongoing support that values Mātauranga Māori and promotes a hauora approach to health and wellbeing. The centre will encourage our people to grow and thrive through access and links to services, agencies and career development opportunities.

## If you are able to, you can contribute in one of 3 easy ways:

1. Donate a one-off amount using your credit or debit card at [www.aucklandhealthfoundation.co.nz](http://www.aucklandhealthfoundation.co.nz) (make sure to **use your Chrome browser** and **choose the Manaaki Fund** from the dropdown).
2. Donate regularly through payroll giving. Search ‘Manaaki Fund’ on Hippo to find the form.
3. Donate your excess annual leave – email [AskHR@adhb.govt.nz](mailto:AskHR@adhb.govt.nz)



Team photo: (L-R) Pauline Martin, Health Care Assistant; Lise Taisalika, Cleaning Services Team Leader; Brian Misa, Health Care Security Guard; Rae Piniata, Supervisor – Orderly Services and Sam Fuimaono, Orderly.

Rae and Sam are two of our Manaaki Fund Champions. These trusted advisors engage with staff in their areas to understand where need exists and connect them to the support being made available. There are a number of Champions across Auckland DHB.



Many are not just supporting themselves and their families, but also members of their extended whānau. Most are shy to put up their hand for help. They are very grateful that you are thinking of them.

– Rae Piniata, Supervisor, Orderly Services, Manaaki Fund Champion



This is not just about the pandemic; it’s about giving ourselves and our children the opportunity to improve our lives and change the direction.

– Sam Fuimaono, Orderly, Manaaki Fund Champion



Thanks to your support to date, we set up a temporary support centre in mid-August offering a space where staff can relax, connect, find information and access relief, including links to external services. With your continued help we aim to create a permanent centre for ongoing support of all staff.

# Dr Raumati

## Ultramarathon Man

Dr Inia Raumati, MBCHB, BPhy,  
Registrar Emergency Medicine  
Ngāti Mutunga



Whenever someone asks Dr Inia Raumati what he likes to do with his free time, his usual response is "running." It's actually more than that. It's a pastime that's taken this emergency department doctor around the world while setting New Zealand records.

Dr Inia Raumati is an emergency department registrar working as a medical officer in the Emergency Department (ED) at Auckland City Hospital – a job that suits his resilient personality. "Emergency medicine is very front-line," he says. "A typical day is usually atypical because it changes all the time."

Inia finds the team environment the best part of working in ED. "We have fun when we can and knuckle down at other times. The relationships for me are whānau – we look after each other." He finds the work incredibly rewarding, but believes he could always do better.

"For what I do, communication is paramount. Have I told the patient and whānau everything they need to know? Have I explained enough to them and not been too medical or cold? Your patients and their whānau remember you because they're relying on you to tell them what they need to know."

Inia has been working intermittently at Auckland ED for about five years with some time off for military service. Enlisting in the New Zealand Army, he was deployed to Iraq as a medical officer, treating New Zealand soldiers.

When he's not working, Inia is running – mostly marathons. It's a pastime that suits him because marathons are commitment and challenge rolled into one. His first ultramarathon was the North Face 100km in Australia's Blue Mountains. He finished the race in 15 hours and immediately thought, what next?

Inia says it was his mid-life crisis that pushed him to sign up for the ultimate ultramarathon. The 4 Deserts Ultramarathon Series is widely recognised as the most prestigious and toughest outdoor footrace in the world. The series consists of the Sahara Race (Egypt/Jordan/Namibia), the Gobi March (China/Mongolia), the Atacama Crossing (Chile), and the Last Desert (Antarctica). Competitors traverse 250km in six days and are expected to carry all their own gear and food.

“My first race was the desert in Jordan. I thought, if I’m going to do something stupid this was the race. It was horrendous. I had no idea what I was getting into, but I finished.”

Despite completing the race, his mid-life crisis wasn’t quite over. “I thought, I’ve finished this and I’m turning 40. I’ve got leave. I may as well keep going.” He celebrated his 40th birthday in the middle of the Atacama Desert in Chile. Stretching from Peru to Chile, the Atacama is the driest place on the planet, receiving less than 1mm of rainfall per year.

Inia says it was a true desert. “There’s an area where they have big salt plains and the heat coming off them was incredible, around 45-50°C, and at night it would drop to around 4°C. And we’re carrying all our food, sleeping gear and clothes.”

After completing the Atacama, he ran the Gobi Desert and the Last Desert in Antarctica. Inia says he found Antarctica easier. “Environmental regulations meant we weren’t allowed to sleep on the ice shelf, so every night we were taken off the ice and put on a boat. We were fed and got to sleep in a bed of sorts, and then every morning taken back to run the course. In the desert you slept on the sand and rocks and you only ate what you could carry.”

By completing the 4 Deserts Ultramarathon series in one year, Inia Raumati has joined a very elite club. He’s one of 165 members worldwide, and the only New Zealander. The race has been going since 2008.

His next challenge will be in Sweden. “I was accepted to compete in the Beyond the Ultimate Ultra-Ice series in Sweden. It’s 230km inside the arctic circle running over ice, with temperatures that can get down to minus-40 degrees.”

That race was scheduled for 2021 but because of COVID-19, has been postponed to 2022. “To keep fit I’ve entered the 100-mile Tarawera Ultramarathon 2021. It has special significance because I ran it with my dad.”

Inia worked the ED during the different COVID-19 alert levels and still managed to run. Running relieves everyday stress, he says.

“The harder, longer, more tired and more alone I am while running, the more relaxed and alive I feel.”

Dr Inia Raumati competing in the Jordan Ultramarathon (main photo) and the Antarctica Ultramarathon (right).



# Creating change for Māori and Pacific patients

**Our Māori and Pacific patients will now be better supported on their surgical journeys thanks to two new teams.**

The Kaiārahi Nāhi and Pacific Planned Care Navigation teams are Clinical Nurse Specialists who walk alongside our Māori and Pacific patients on their journey to surgery. They'll work with services to support these patients to achieve the goals they have for themselves and their whānau.

The Kaiārahi Nāhi team is led by Dawson Ward. Dawson joins the team from the Cardiovascular ICU. "The rōpu and I are humbled to be in a position to create change for Māori patients," he says. "Utilising the Māori principles of whanaungatanga, kotahitanga, manaakitanga and rangatiratanga that we all grew up with, and putting them in action has been amazing."

"Things are going well for the team so far," Dawson says. "With patients valuing the initiative and asking where this service has been and why it's taken so long to be introduced."

The team of Pacific Planned Care Navigators is led by Pauline Fakalata, who comes from Women's Health. "It's a privilege to contribute on a bigger scale to improving the experience and health outcomes of Pacific people," says Pauline. "It's a rewarding experience to be involved in improving systems and processes to deliver true patient-focused care. This is an exciting time for the team, who are very encouraged by the support from our senior leadership, colleagues and many professionals."

Data shows inequities exist for our Māori and Pacific patients. Both groups wait longer for surgery and are more likely to have their surgery cancelled.

The teams will help individual patients navigate their path to surgery, while also identifying changes we need to make as an organisation to achieve equitable care for all.



From Pacific Planned Care Navigation: (L-R) Kaye Feyzabadi, Clinical Nurse Specialist; Lena Emami, Clinical Nurse Specialist; Vuki Nabete, Clinical Nurse Specialist; Juliet Ioka, Clinical Nurse Specialist; Emily Soapi, Clinical Nurse Specialist; Toakase Vaivevea, Clinical Nurse Specialist; Pauline Fakalata, Clinical Nurse Specialist Lead and from Pacific Health, Abel Smith, Clinical Nurse Director.



From Kaiārahi Nāhi: (L-R) Willy Bhana, Clinical Nurse Specialist; Nirvanah Streeter, Clinical Nurse Specialist; Hannah Ward, Clinical Nurse Specialist; Janene Padden, Clinical Nurse Specialist; Dardy Motu, Clinical Nurse Specialist; Mylee Gordon, Clinical Nurse Specialist and Dawson Ward, Clinical Nurse Specialist Lead, Kaiārahi Nāhi Hautū.

## Glossary

- Kaiārahi Nāhi \_\_\_\_\_ nurse group
- Rōpu \_\_\_\_\_ group
- Whanaungatanga \_\_\_\_\_ relationship
- Kotahitanga \_\_\_\_\_ unity
- Manaakitanga \_\_\_\_\_ support
- Rangatiratanga \_\_\_\_\_ self-determination



# Starship supporters rally to provide care packs for Auckland DHB whānau

As New Zealand went into lockdown in April this year, the Starship Foundation launched an emergency appeal to provide care packs for our healthcare workers working tirelessly in preparation for the challenges that lay ahead.

As many worked long hours and juggled additional challenges to be prepared for what might come, the Starship Foundation put out a call for support. The response was phenomenal and heart-warming.

More than 2500 care packs, stocked with essential and practical items, were distributed to staff at Starship and Auckland hospitals. Healthcare heroes working in wards throughout Starship, in Allied Health, in the community, cleaners and orderlies, and in the Māori and Pacific support centre were among the grateful recipients of this generosity.

Together with cash and goods, hundreds of messages, like this one below, poured in from supporters who wanted to show their appreciation for essential healthcare workers.



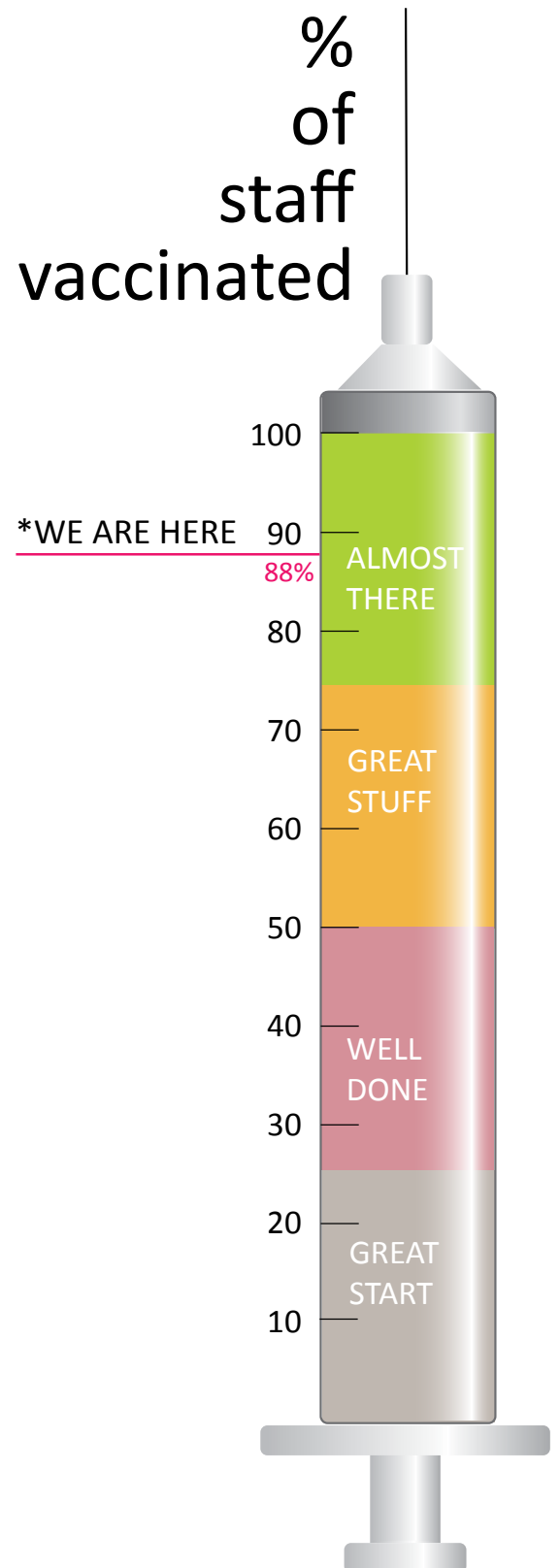
Thank you for all that you are doing. It takes courage and big hearts to be on the frontline. Know that you are truly appreciated and loved.

- Linda.



# Fighting the flu

This year we've had one of our highest turnouts ever, with more than 88% of our team getting their flu vaccination. Ka pai! Your efforts will help to reduce the spread of seasonal flu.



\*As of 14 July

# Lockdown reflections

The Alert 4 lockdown from March to April this year was different for so many of our workers. Many had to continue commuting to work as normal even as their lives were thrown upside down. Family life and friends were put on hold, some jobs and ways of working changed. These are the reflections from members of our organisation during that time.



## Sosaia Tautalanoa

Healthcare Security Officer

I felt very anxious when we first went in to Level 4. It had a huge impact on my job. As a team, we were asked to work 12-hour shifts to make sure the hospital ran smoothly.

In some ways I enjoyed the challenges of lockdown as it tested my de-escalation skills and my strength of communication to explain to people the new processes in place.

Lockdown had a huge impact on my personal life, as my family is so important to me and I was unable to see them during this time. I made a special effort to keep in contact through social media, especially on video chat to my closest family.

## Victoria Cuthers

Nurse Educator  
Paediatric Orthopaedics

During lockdown it was great to leave home at a normal hour, travel into work with no traffic and get a car park – even if it was like being in a scene from *The Quiet Earth*.

The uncertainty of my husband's job and pressure of still managing outgoings was stressful. The positive of this was that our children got to spend quality time with their dad, and I got dinner cooked for me when I got home.

## Lindy Lely

Manager Volunteering Services

I really enjoyed working from home during COVID-19 but I missed the volunteers and the buzz of the Volunteers Centre.



## Kati Wilson

Child Protection Co-ordinator

For me it was a completely different way of working. The amazing thing was I could start the day while eating breakfast and there was no travel time. There were challenging times when both adults had important meetings with a pre-schooler to keep occupied. But we managed it by taking turns, having a special box with lots of arts and crafts – and by subscribing to Disney +.

Towards the end of the lockdown we added a puppy to the madness – which I think was a very popular idea!



## Kathy Lowe

Nurse Specialist | Auckland DHB Violence Intervention Programme (VIP) | Te Puaruruhau

Working during lockdown was a mixed bag! I loved having the freedom to bike ride every day on empty roads! Evie the long-haired miniature dachshund loved the trips too!

The Family Violence Intervention team had to work out how to support staff remotely. We were worried as overseas experience taught us that people were being abused in their homes during lockdown and were unable to leave or get help. As a team we were very pleased when we were allowed back into our office.

## Michelle Knox

Associate Nurse Director  
Policy and Practice | Manawa Awhi  
Nurse Development Unit (NDU)

During lockdown I was asked to help work a shift at the border. I remember greeting some very scared-looking travellers coming home, and I wondered how I must look to them wearing my mask and gloves, armed with a thermometer. So I would say to them:

“Kia ora, welcome home. My name is Michelle. I am a nurse, and you might not be able to tell, but I am smiling at you behind my mask right now.” I'd like to think that it helped put them a little more at ease.

## Tracey Barley

Nurse Unit Manager AED

I was really tired one day after working through lockdown and took a walk to the beach. When I saw this beautiful drawing some local children had painted to thank essential workers, it was so heartening to see.

## Anne Silva

Organisational Development  
Practice Leader, People Team

Lockdown was a unique experience and I would pause daily, huddled with my whānau, to hear the daily updates from Jacinda Adern and Dr Ashley Bloomfield. Originally from Zimbabwe, I felt very grateful to be in New Zealand. One thing I will always cherish is the quality time and precious moments I shared with my family over this period (although I deeply missed my daughter who was in the UK).



# WELLBEING TIPS

THESE TIPS ARE DESIGNED TO HELP GET YOU THINKING ABOUT WHAT WILL HELP YOUR MENTAL WELLBEING AT THE MOMENT. THESE SIMPLE ACTIONS ARE BIG MOOD BOOSTERS – FIND WHAT WORKS FOR YOU AND KEEP AT IT!



## TAKE NOTICE – ME ARO TONU

Notice the things that make you feel good and do them more often! It could be your morning coffee, a walk around the block or playing games with your tamariki/children.



## GIVE – ĀWHINA

Think about a skill you have you could share with your whānau, offer to pick groceries up for elderly neighbours or simply give a compliment to a loved one!



## GET MOVING – KIA KORI

Regular movement and exercise helps release tension and stress and gives you an energy boost!



## CONNECT – TŪHONO

Keep in touch with your friends, whānau and colleagues on the phone, through social media, video chats and text.



## STAY CURIOUS – ME WHAI WHAKAARO

Learning new things helps to focus your mind and gives you a sense of purpose. It could be learning a language, a craft, or even mastering a tricky recipe.



## STICK TO A ROUTINE – WHAI MAHERE

It will help you get through each day and adjust to regular life when it goes back to normal.



## RELAX – MAURI TAU

Find ways to rest, switch off and recharge. Reading, mindfulness, yoga and deep breathing are all great ways to unwind.

# GETTING THROUGH TOGETHER

WHĀIA E TĀTOU TE PAE TAWHITI

# ALL RIGHT?



If you have a story to share with the Auckland DHB team, please contact the Communication Team on ext 26556 or [communication@adhb.govt.nz](mailto:communication@adhb.govt.nz).

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 **Mental Health Foundation**  
OF NEW ZEALAND  
*mauri tu, mauri ora*