

From the Chairperson

I am delighted to be the new Bay of Plenty District Health Board chairperson. Since being appointed I have been researching all the previous year's newsletters and meeting minutes and have been impressed by the significant activity that has been undertaken across the region.

I would like to thank Mary Hackett and her Board for the commitment and work they have done during their tenure to ensure that the people of the Bay of Plenty will have access to modern high quality health services into the future. I am really pleased that Mary has agreed to continue her work with the Art Committee which has done much to enhance the beauty of our buildings.

Looking forward to the next three years there will be many challenges ahead for the new Board.

It is our commitment as a Board to continue to lead the development of health services for the people of the Bay of Plenty. I encourage you to take the time to read the Board member profiles in this edition so you know the calibre of the people governing this organisation for the next three years.

We are committed to ongoing improvement against the Governments health targets and want the Bay of Plenty to move towards being one of the highest performing District Health Boards against all the targets. While meeting the targets themselves is important, what

is more important are the improved health outcomes that are a result of focusing on the target.

As 2010 comes to a close I want to thank all the health providers across the Bay of Plenty for the dedication, commitment and high quality service they provide. I look forward to working with them all over the next three years as we continue to develop service for our communities.

Finally I want to wish everyone a happy and safe Christmas. Enjoy you families and celebrate being together at this special time of the year.

*Sally Webb - Chairperson
Bay of Plenty District
Health Board*



Meet the new Board

Following recent elections, the Bay of Plenty District Health Board has a few new faces and a few 'old' faces around the table. Here are the people who will be governing your health services for the next three years.

Sally Webb

Sally Webb has extensive experience in the health sector with a public health nursing background and many years involved in governance and management across the sector. Sally was a former Chairperson of the Bay of Plenty Area Health Board, deputy Chairperson of the Midland Regional Health Authority Board, a member of the Health Research Council, the Health Funding Authority, and was Interim CEO of the Health Funding Authority. Group that reported in July 2009.

Sally runs her own Executive Coaching/Consulting business focused on supporting individuals and organisations to develop leadership, improve performance, change behaviour and achieve results. She brings a broad perspective from coaching, nursing, management, governance and community health care roles to the Bay of Plenty DHB Chair role.

Yvonne Boyes

This is Yvonne Boyes fourth term as an elected member on the Bay of Plenty District Health Board.

Yvonne brings comprehensive knowledge of geographical needs, community nursing, governance experience, and a strong commitment to community to the Board table.

Working in the community has been a vital part of Yvonne's nursing background which includes public health, district nursing and primary care.

She was the deputy chair of Project Hope Whakatane and a trustee on the Bay Health Foundation.

Mogens Poppe

Mogens Poppe was re-elected to the Board for his second term and is a general practitioner working in Ohope Beach.

He is a Fellow of the Royal NZ College of General Practitioners, has a Fellowship from the American College of Anti-Ageing Medicine.

Mogens also has a Royal NZ Navy dive medicine certificate and postgraduate diplomas in emergency medicine, paediatrics, obstetrics and gynaecology.

Fluent in English, German, French and Spanish he will begin Maori lessons in the New Year.

Jeff Williams

Jeff was first appointed to the Board in 2009. He

is currently chair of the Audit Finance and Risk Committee.

Jeff has engineering qualifications and an extensive commercial and governance background. He was Chief Executive of Trustpower Ltd from 1992 through 2001. Prior to that he was Managing Director and Country Manager for ABB. He is currently a director of Comvita Ltd, a director of Waipa Networks Ltd, as well as several private companies and serves as chair of the Whakatane District Council Town Vision Advisory Board.

Jeff has a business consultancy company that works with a wide group of organisations including a number of Eastern Bay of Plenty and Rotorua based Maori land trusts and incorporations.

He lives on a large avocado orchard, of which he is a part owner, in the Katikati area.

Tamarapa Lloyd

Tamarapa Lloyd's tribal heritage is from Ngati Tuwharetoa (Ngati Turumakina) and Te Arawa (Ngati Whakaue). He has a legal background and has been the general counsel at Te Ohu Kai Moana Trustee Limited (the Maori Fisheries Trust) for six years.

Tamarapa has recently moved back to the Bay of Plenty and is also the general manager of Ngati Whakaue Tribal Lands Incorporation.

He is looking forward to working with his fellow board members to ensure the needs of Maori and Polynesians living in the area receive attention; especially given the importance of Maori and Polynesians to the continued growth of our country over the next 25 years.

Gail McIntosh

Gail McIntosh is a chartered accountant running her own accountancy firm in Fraser Street Tauranga.

She is a member of Zonta International - an international service organisation and previously has served as the national treasurer of the National Council of Women of which she is still a member.

Gail will bring a financial and business perspective to the Board.

Ron Scott

Ron Scott is an economist. He owns Stellaris Ltd, a business school specialising in executive education and providing businesses with



Back row from left: Tamarapa Lloyd, Mark Arundel, Mogens Poppe, Gail McIntosh, Ron Scott, David Stewart and front row from left, Marion Guy, Yvonne Boyes, Sally Webb (chairperson) and Jeff Williams (deputy chair). Absent: Matua Parkinson.

training and advice. He is one of two new Board members elected in October.

He has worked in the disability sector for many years helping people who have had accidents re-establish themselves as business owners or in a new role in their business. Prior to that Ron managed a number of private training enterprises including the Tauranga YMCA Community College.

Ron is a trustee of TECT, sitting on its audit committee, and is involved in a range of community organisations. He is the author of The New Director a book detailing the skills required of a beginning director.

He will bring his expertise in management, governance, and economics and a broad knowledge of the community to the Board.

Mark Arundel

Bethlehem pharmacist Mark Arundel is the longest serving Bay of Plenty District Health Board member, having first been elected in 1999.

Last year he was the principal winner of the Community Spirit Awards for his work with the Tauranga Gliding Club.

Marion Guy

Marion Guy is a registered nurse having worked in the health sector, including at Tauranga Hospital for 30 years.

This is her third term on the Bay of Plenty District Health Board and she is also a Board member of the Western Bay Primary Health Organisation and the New Zealand Nurses Organisation.

Marion also sits on the National Health Board, a role she was appointed to by the Minister of Health.

Matua Parkinson

Matua Parkinson, has been a professional rugby and NRL player, combining rugby with his business interests and his family. He is one of two new Board members elected in October.

His rugby playing career has included selection for the New Zealand Maori team, captaining a world champion New Zealand Sevens team, and playing for the Auckland Blues, North Harbour, Sanix in Japan, and the Steamers. He also played in the NRL for the Canterbury Bulldogs.

Matua has lived in Tauranga for 17 years, is married to Cheri and has three sons. He coaches rugby and surfing, belongs to Rangataua rugby club and coaches the women's rugby team.

David Stewart

This is David Stewart's fourth term on the Bay of Plenty District Health Board. He has been deputy Mayor of Tauranga City for the past six years and was recently returned to that role by his fellow councillors.

He is a member of the New Zealand Institute of Directors, and patron of the Mount Maunganui Senior Citizens Association.

As chairman of the Tauranga Hospital redevelopment committee he has led this \$140 million building project to its delivery on time and within budget. He has also worked extensively in the private sector in project and business management both nationally and internationally.

New Board, new chair, new year

Since the last edition of Health Matters the Minister of Health Tony Ryall has announced his appointments to District Health Boards across the country.

The Minister has appointed Sally Webb as our Board chairperson. Sally

is no stranger to the health sector in the Bay of Plenty. She is a Whakatane resident, has a strong nursing background and among her achievements was chairperson of the former Bay of Plenty Area Health Board, a member of the Midland Regional Health Authority and the Health Funding Authority.



The role of the Bay of Plenty District Health Board is to work with the new National Health Board to provide the best health services for our community, within the allocated budget. A full list of the objectives and functions of the Board are set out in our annual report which can be found on our website www.bopdhb.govt.nz

This is the final edition of Health Matters for 2010 so I would like to wish you a happy and safe holiday season and look forward to sharing our stories with you in 2011.

By Phil Cammish,
CEO Bay of Plenty District Health Board

Time for tobacco to face the facts

Half of all smokers will die from tobacco related illness, one in four cancer deaths in this country are caused by smoking, and tobacco is the only consumer product that when used as intended by the manufacturer kills half of those who use it. So why are we still selling it, why are we still buying it, and why are we still smoking it?

Over the last year, the Maori Affairs Select Committee has undertaken an 'Inquiry into the Tobacco industry in New Zealand and the consequences of tobacco use on Maori' and has recently presented a report to parliament with their recommendations for the future of tobacco in our country.

The toll that tobacco takes on New Zealanders, their families and our health system is extensive, with the total cost of tobacco related illness reaching a staggering \$1.9 billion a year, the emotional toll of the deaths and illnesses caused by smoking are even more staggering, with a quarter of all cancer deaths being caused by tobacco, smoking killing 5000 New Zealanders a year.

In the Bay of Plenty, tobacco use and the toll on our whanau/families as well as the health system is even more acute. In a submission to the Maori Affairs Select Committee, the Bay of Plenty District Health Board noted that within our community, and across the Midland region, smoking directly causes at least 18 per cent of all deaths – this is 10 times the annual road toll for our region. The Bay of Plenty also has the third highest population of Maori in any district health board with almost 50 per cent identifying as smokers. Half of these will die from a smoking related illness.

The recommendations to parliament, from the Maori Affairs Select Committee include aiming for a tobacco free New Zealand in 2025, reducing the availability of tobacco, making sure that plain packaging is used (as in Australia 2012), banning shops from being able to display tobacco packages and banning vending machines.

Tauranga MP, Simon Bridges is a member of the Maori Affairs Select Committee who have made the recommendations. He says that he was proud to be a member of the Committee

looking into the tobacco industry.

"We heard from hundreds and hundreds of people all over New Zealand, and as a result have produced a far reaching and hard hitting report on tobacco." He says, "I feel confident that the government will pick up on a lot in the report and make a commitment to moving towards a smokefree New Zealand." He adds that "the report has an aspirational goal of a smokefree New Zealand by 2025, while that is ambitious I feel that with commitment it can be achieved."

The government has already made a commitment to working towards reducing the burden of tobacco by introducing excise tax increases on cigarettes and roll your own tobacco over a three year period. From 1 January 2011, the price of cigarettes and loose tobacco will go up another 10 per cent as the second of three scheduled tobacco tax increases takes effect. Currently, an average smoker will spend \$2,475 dollars a year on buying cigarettes or tobacco; this is almost \$50 a week and set to increase next year by at least 10 per cent.

Liz Spence, smokefree coordinator with the Bay of Plenty District Health Board says that aside from the health costs of smoking, the financial costs are a real burden.

"The cost of smoking is going up, but the cost of quitting hasn't changed. An eight week supply of gum, patches or lozenges that work as a replacement for smoking and to help people to quit is just \$3. Over a month, that's going to give you roughly \$200 to do something else with."

Liz adds that it's never too late to give up smoking, some people think that because they have been a smoker for so long, there is no point to giving up – that's absolutely not true. Even within the first three months of being a non-smoker there are huge benefits to your health, and your pocket!"

If you would like to make quitting smoking one of your New Year's resolutions, and would like some help to have a healthier (and wealthier) 2011, you can contact our local FREE Quit Smoking services on (07) 573-4846 (Western BOP) or (07) 307-1472 (Eastern BOP) or the Quitline on 0800 778 778 for free advice and support, or find them online at www.quit.org.nz.

Time since last cigarette	Benefits to health
20 minutes	Heart rate and blood pressure drop
12 hours	Carbon monoxide levels in blood drop to normal
2 weeks – 3 months	Circulation and lung function increase
1 – 9 months	Coughing and shortness of breath decrease; cilia (the tiny hair-like structure that move mucus out of lungs) regain normal function, increasing ability to handle mucus, clean the lungs and reduce the risk of infection
1 year	Excess risk of coronary heart disease has halved
5 -15 years	Stroke risk reduced to that of non-smoker
10 years	Lung cancer death rate is half that of a person who continues smoking. Risk of mouth, throat, oesophagus, bladder, cervix and pancreatic cancer decreases.
15 years	Risk of coronary heart disease is the same as that of a non-smoker.



STEP 1: TXT your name and address to 5959*
STEP 2: Receive a FREE sample of quit smoking gum
STEP 3: Start your SMOKEFREE journey today

*By texting you confirm that you are 16 years of age or older.

Go to the quitters blog at quit.org.nz to share your quitting story or talk to your local health professional for more advice on quitting.



Risky business for Gardeners and Farmers

Summer gardeners should be aware that if they are working with compost, mulches or potting mix, there is a chance that they could contract Legionellosis – or Legionnaires' disease, if certain precautions aren't taken.



Legionnaire's disease is caused by breathing in dust or water vapours containing bacteria that is naturally occurring in soils, compost and potting mix. Medical Officer of Health, Dr Neil de Wet, says that people should be aware of keeping themselves safe around these gardening products, particularly if they are buying them in bulk.

"Packaging for products such as potting mix and compost includes a health warning and advice but when you are buying in bulk, there is no packaging and people may be unaware of the risks and the precautions that should be taken."

The disease, which cannot be spread from person to person, can cause pneumonia with symptoms such as coughing, fever, chills, muscle aches and pains and shortness of breath and can result in hospitalisation.

Dr de Wet says there are some simple steps that gardeners and farmers can take to reduce the risk of getting Legionnaires disease.

"When working with compost, mulches or potting mix it is important to take measures to avoid inhaling dust. For example, opening potting mix and compost bags gently and away from your face, watering gardens gently using low pressure and avoiding working in unventilated places like closed sheds and greenhouses." He adds that "when potting plants, wet the soil first to reduce the dust and wash your hands after handling soil

or compost. Use of a face mask is recommended especially where these others measures are not practical or possible."

Legionellosis symptoms are variable and range from flu-like symptoms to more severe breathing problems. Symptoms can include fever and dry cough, loss of appetite, muscle pain, headache, abdominal pains and diarrhoea. Those at highest risk are middle-aged or elderly and those who smoke.

Anyone who thinks that they may have been affected by Legionnaires, or develops the symptoms after handling soil, potting mix or compost, should contact their doctor for advice, or call Healthline on 0800 611 116 for free 24-hour health advice.

Quick tips for avoiding Legionellosis (Legionnaires' disease) when working with potting mix, mulches and compost:

- Open bags of compost and potting mix slowly and away from your face. Use scissors to cut them open rather than ripping them open.
- Water gardens and composts gently using low pressure
- When potting plants reduce dust by gently dampening soil
- Where possible, avoid working in poorly ventilated places
- Use gloves or wash hands thoroughly after handling soils
- Use a face mask, especially where these others measures are not possible.

On the lookout for tiny mites

Toi Te Ora - Public Health Service has been receiving increasing numbers of calls about scabies and how to treat it.

Scabies is a skin infestation that can be passed easily between people. It is caused by tiny mites who are like extremely small insects. The mites burrow into the upper layers of the skin and lay eggs along the way. Small blisters, red spots and itchy red patches form on the skin above the burrows. Scabies mites prefer thin hairless skin, and for this reason concentrate in sensitive areas such as between the fingers, on the wrist, on the elbow, on the bottom and genitals, and around the waist.

There are a lot of myths surrounding scabies, the first of these is that scabies is related to hygiene. Dr Neil de Wet, Medical Officer of Health, says that this is really not the case, "anyone can get scabies, even those with the best hygiene practices. It is passed quite easily within households and among family members through direct contact, particularly close body contact such as holding hands and hugging. Contact needs to be for a few minutes so, for example, simply shaking hands will not spread scabies. It can also be passed through sharing clothing and bedding."

"The scabies mite is a small eight-legged parasite about one third of a millimetre long. The mites are very sensitive and can only live off the human body for 24 - 36 hours and do not survive in furniture or carpets. Once the mite has been passed by direct contact, they will burrow into the skin causing small red bumps and blisters. These are often very itchy, especially at night."

SYMPTOMS

Rash:

The scabies rash usually appears as small areas of red, itchy bumps and blisters most often noticed:

- Between the fingers
- On the wrist
- On the elbow
- Around the waist
- On the bottom and genitals.

Itch:

The scabies rash is usually intensely itchy. The itch is typically more severe at night, sometimes making it difficult to sleep.

TREATING SCABIES

Scabies will not go away by itself, and needs to be treated.

Because it is easily spread and it may take a few weeks for symptoms to become obvious, it is important that everyone in the household is treated at the same time whether or not they currently have the symptoms.

Your pharmacist or doctor can give you advice on treatment of scabies. Scabies is usually treated with a cream or lotion that can be bought from the pharmacist or prescribed by your doctor. Your pharmacist or doctor can advise you on which scabies treatment is best for you, how to apply it, and how much you will need to treat all the people in your house.

It is best to use the cream or lotion just before going to bed in the evening.

1. First have a bath or shower then cover the whole body with the cream or lotion, from the jaw down to the soles of the feet, especially in between fingers, toes, under the nails and on the genitals
2. The cream and lotion must be left on overnight
3. If you wash your hands within this time it is important to put the cream or lotion back on your hands
4. The next morning have a bath or shower and put on clean clothes.

Some creams need to be reapplied after seven days. The itchiness will not go away as soon as the treatment is done; it may in fact take a few weeks for the itching to stop.

STOP SCABIES SPREADING

To stop scabies from spreading or recurring:

- All people living in the household, and other close contacts, should be treated at the same time whether or not they have symptoms of scabies.
- On the same day as applying the treatment, all clothes worn against the skin in the last three days must be washed in hot water and dried.
- Sheets, pillowcases, towels and face-cloths should also be washed in hot water. It is not necessary to wash blankets, duvets or quilts; you can just hang them out in the sun for a day.

Information about scabies is available on the Toi Te Ora - Public Health Service website at www.toiteorapublichealth.govt.nz.

If you think that you may have been infected with scabies, see your doctor or pharmacist for advice on treatment.

Shellfish in Bay may cause illness

Shellfish in the Bay of Plenty area are still showing high levels of Paralytic Shellfish Poison (PSP) and may be a risk to health.

Paralytic Shellfish Poison may affect all types of 'bi-valve' shellfish, which means that mussels, pipi, tuatua, cockles, oysters, scallops, catseyes and kina collected between Tairua and the Whakatane River SHOULD NOT be eaten. Pua, crayfish and crabs can still be taken but the gut must be removed before cooking.

Eating shellfish collected on the coastline from Tairua south, including Whiritoa, Whangamata, Onemana, and east along the Bay of Plenty coastline from Waihi Beach up to and including the mouth of the Whakatane River in the Eastern Bay of Plenty (including all inshore islands within this area and all harbours) can cause numbness and tingling around the mouth, face or arms and legs; difficulty in swallowing or breathing; dizziness; double vision; paralysis and/or respiratory failure. If you experience any symptoms or become ill after eating shellfish, you should seek medical advice immediately.

If you want to check on health warning updates call free phone 0800 221 555.

For more information go to www.toiteorapublichealth.govt.nz

And the awards go to...

The Bay of Plenty Clinical School Allied Health Awards were held in Whakatane on 9 December 2010. Staff were nominated by colleagues for their contribution in the following areas:

- Commitment to clients /patients
- Commitment to profession
- Commitment to DHB
- Achievements
- Function as a team player
- Going the extra mile

All staff nominated were acknowledged for their valued contribution and the difference they make to their patients and service.



The 2010 recipients of the Bay of Plenty Clinical School Allied Health Awards.

The awards went to:

Category	Name	Position	Service
Therapy assistant	Hilary Corbett	Rehabilitation assistant	Community Therapy
Leader/manager	Pip Percival	Manager	Child Development Service
Administration	Katie Goodman	Administration support	Physiotherapy
Practitioner < 5yrs	Suzanne Laird	Addiction clinician	Community Alcohol and Drug Service
Practitioner > 5yrs	Leona Bowman	Social worker	Health in Aging

Patient Partnership

Orthopaedic patients are contributing to health care in Tauranga with the help of the Tauranga Orthopaedic Research Society Inc (TORSI).

TORSI, a charitable society, was established five years ago by the orthopaedic surgeons of Tauranga for the purpose of studying outcomes, trends and results of the orthopaedic surgeries that they were performing.

Patients are asked to complete 'patient generated surveys' where they have the opportunity to respond in writing to questions about their specific joint problem as well as make comments on medications and the impact that their orthopaedic problem is having on their quality of life. The forms are sent out prior to the elective surgery, then at one year following the surgery and again at five years' post surgery.

The system, which was the first of its kind in New Zealand, uses a scoring system that allows for long-term follow ups and surveillance of the lifetime of the artificial joint.

Jan Caudwell, research coordinator with TORSI says that there is real value in orthopaedic patients participating in the survey and that it is completely safe for them to do so.

"It is important scientific data, collected with the purpose of enabling the best care for current and future patients in the Bay of Plenty. The privacy act applies to all the information collected and names and personal details are not shared in any reports made from the data unless it is directly for the patient's treatment and benefit."

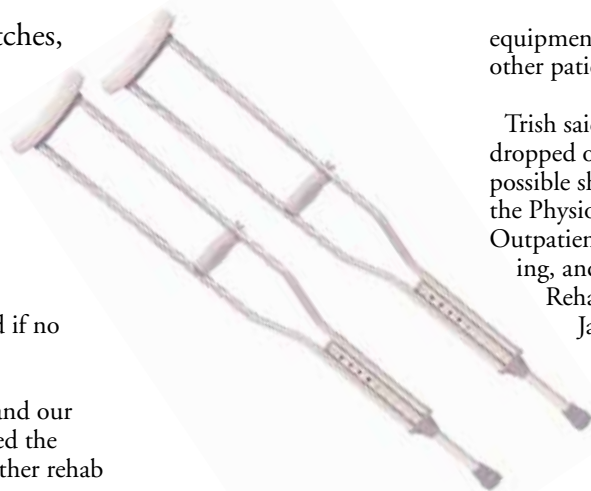
If you are an orthopaedic patient and would like more information about the Tauranga Orthopaedic Research Society and the patient generated survey, contact Tauranga Orthopaedic Research Society Inc (TORSI) Private Bag 12506, TAURANGA 3143 or telephone (07) 543 1864.

Crutches at your house that aren't yours?

If you have any equipment – crutches, walking frames, shower stools, commodes or wheelchairs - on loan from Tauranga Hospital that you don't need any more, can you please return them.

Physiotherapy team leader Trish Wrigley said it would really make her Christmas if hospital loan equipment could be returned if no longer required.

"We are heading into a really busy time and our cupboards are bare. Please, if you don't need the crutches, walking frames, wheelchairs or other rehab



equipment we lent you, return them because other patients need them."

Trish said the equipment just needs to be dropped off at Tauranga Hospital. If it's at all possible she asks that crutches be returned to the Physiotherapy Department which is in the Outpatients Department in the main building, and all other equipment be taken to the Rehab Equipment store which is behind Jacaranda House.

Should you need equipment to be picked up please phone (07) 579 8624.

Fresh Future Appeal gives \$76,000 to hospital

Staff and customers of Progressive Enterprises raised \$760,000 through their Fresh Future Appeal in the last three months to give to 10 District Health Boards.

To raise the money 19,000 staff from Progressive Enterprises (Countdown, Woolworths, Foodtown, Fresh Choice, SuperValue and Dick Smith) organised hundreds of events, and in 160 supermarkets and other stores, customers put loose change in donation boxes and bought specially marked hot cross buns and lollipops.

In Whakatane 1100 locals paid for a slice of the (soon to be declared) world's longest cake baked by Whakatane Countdown.

Progressive Enterprises area manager Keith White-man presented \$76,000 to the Bay of Plenty District Health Board's chief executive officer Phil Cammish, and paediatrician Dr Hugh Lees to purchase equipment off their wish list for the paediatric ward.

Keith also handed to the men, hundreds of hand knitted baby items for the neo-natal unit made by staff and customers, and some toys for children in hospital.

In accepting the gifts Dr Lees said during harder times it is the most vulnerable who are the most affected, and it's our children who are our most vulnerable. "While it's great to receive equipment, our children still need toys, because play is important for them."



BOPDHB CEO, Phil Cammish (left) with DHB staff, Progressive Enterprises staff and the 'big cheque'.