



HEALTHBEAT

NEWS FOR CANTERBURY DISTRICT HEALTH BOARD STAFF & COMMUNITY PROVIDERS

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Comment from the Chief Executive



As health sector employees, most of us are accustomed to the acronyms naming various organisations. One you might be not so familiar with is SISSAL – the South Island Shared Service Agency Limited. SISSAL was established in 2001 by the six South Island district health boards. Its role is to support our roles as health and disability service funders and to provide a vehicle for DHBs to plan and work together.

One area where SISSAL can be seen to be working well is in the Southern Cancer Network, which was set up last year. It is one of four regional cancer networks set up across the country in accordance with the national Cancer Control Strategy Action Plan.

Participants in the Network represent the spectrum of cancer care, from prevention and screening to palliative care. By bringing together stakeholders and consumers, DHBs will be able to collectively plan, fund and provide cancer services to make the best use of resources and improve the patient journey.

Volunteer Awareness Week is 15-21 June- a fantastic opportunity to formally thank the volunteers who work with us. In this issue we profile just two of the many groups working in health in Canterbury; The Hospital Helping Hands at The Princess Margaret Hospital and The Friends of Rangiora Hospital. Volunteering New Zealand figures show: more than one million New Zealanders are involved in volunteer work, contributing 260 million hours of formal unpaid work for non-profit organisations annually.

Kind regards,

Gordon Davies
CEO

Canterbury District Health Board

Canterbury
District Health Board
Te Poari Hauora o Waitaha

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Our unsung heroes

Trudy Keer-Keer

“...a senior staff nurse who’s bright cheery smile and great sense of humour brightens our ward. She is endlessly patient (pardon the pun) with patients, relatives, colleagues and nursing students. Her organisation skills help this place run like clock work.”

Margaret Burns

Re; The staff influenza vaccination campaign within the Women’s & Children’s Health Division...

“... Without your innovation, enthusiasm, wonderful sense of humour and influence, the outcome would not have been as impressive.”

Geoff Stark

“ ...Being part of the management team, Geoff is not required to be part of the on-call pharmacy roster. But do you know what? Geoff does it anyway because he enjoys the challenges of the obscure and challenging questions.”

Is there a star in your workplace? Please nominate a colleague, tell us why and send the details to fiona.bryce@cdhb.govt.nz and they could see their name in print!

Artist Doctors Concert & Exhibition

Calling all musicians, singers, artists, craft people and photographers!

The Artist Doctors Trust is holding a concert and art and craft exhibition on Friday 31 October.

Musicians- contact Karen Lamb email rko@xtra.co.nz or tim.wilkinson@cdhb.govt.nz.

Singers- if you or one of your family can sing, whatever your level of experience contact Bevan Rogers bevan@southsidehealth.co.nz.

For those wanting to exhibit paintings or craft, call Heather Muir 363 0824 or Jeanne Davies 349 9776.

For those wanting to exhibit photography, contact John Lyftogt, email johnl@activehealth.co.nz.

The Artist Doctors Concert will be held at the Repertory Theatre, Kilmore Street, 7.30pm and the Art & Craft Exhibition at Medlab South, 137 Kilmore Street 6.00pm-7.00pm.

Adult mental health service waiting lists reduced

also smoothing out the referral process. “They’re really useful,” said Mr Lockington, “Waiting times are coming down because we offer other treatment options rather than just an assessment, which probably also suits the patient better”.

The Single Point of Entry (SPOE) phone service to Adult Community Mental Health Services is achieving its aim of streamlining entry into Christchurch’s Community Adult Psychiatric Services.

The Single Point of Entry- Te Kuuwaha o te Whakaora Hinengaro telephone number (0800 920 092) and fax number (03 363 8107) were launched in November last year.

South Sector Base Clinical Manager Tony Lockington said the service has just undergone a four month review.

And the results are exciting:

- Six - eight week waiting times for assessment have been reduced to three weeks
- Fewer appointments and ‘did not attends’
- Increased consultation and liaison activity
- Greater consistency in triage decision making
- Increasing use of single point of entry
- Positive consumer feedback
- Improved communication.

“Centralising the service is having a big impact on reducing the time people are waiting to see a psychiatrist,” Mr Lockington said.

Also patient referrals are no longer made based on a community mental health team’s catchment area.

“If a person needs seeing quickly but their catchment team can’t see them quickly enough, then we’ll find another team,” said Registered Nurse Robin Kay, SPOE Team member.

The team has three clinical roles and an administration role. The clinical roles are broken into ‘triage’, ‘duty’ and ‘flexi’. The flexi-role picks up the phone call over-flow.

Regular triage meetings involving community teams are

Mr Kay agreed. “The meetings make it inclusive- not just SPOE making all the decisions. We really value community representatives coming in to meet and take part in the clinical decision making,” he said.

Mr Lockington said there was overall awareness and understanding of what the service aimed to achieve.

“One hundred per cent of GPs knew about SPOE in the short time it’s been operating. They’ve already figured out what we are and what we do. Generally speaking, the feedback so far has been mostly positive and we’re feeling pretty good about it all at the moment”.

What is SPOE?

The Single Point of Entry (SPOE) system prioritises patients into emergency, urgent and routine bookings and identifies referrals for opinion only. Features of the service include:

- Qualified staff available to discuss referrals
- Patients contacted directly for further information, support and bookings
- Relatives and support people may be contacted and can approach the service for advice or further information
- Self referrals to Psychiatric Emergency Service (PES) go through the SPOE in the first instance
- Referrers, patients and their support people continuing to be redirected to other community resources where appropriate.

SPOE is a CDHB Service covering referrals to all urban general adult services; (North, South, East and West), Totara House and the PES.

The front page photo features SPOE’s Robin Kay, Erika Duggan and Tony Lockington.

Health careers on show



Pley Tovanante attended a CDHB WorkChoice Day in his final year of high school.

“I came along with a couple of my friends to check out the booths and I took a tour... it was really good to see the range of careers on offer.”

Mr Tovanante (pictured with a patient) is now a sixth year medical student carrying out his trainee internship at Christchurch Hospital.

CDHB Human Resources General Manager Craig Shaw said the CDHB has participated in WorkChoice Days for many years.

“Last month there were 12 Canterbury Secondary Schools attending and 21 clinical displays on show. Fourteen young health professionals were available to speak about their experiences of working at the CDHB.”

Mr Shaw said WorkChoice Day was just one example of

how the CDHB was actively recruiting new people.

Figures show more than 1,000 people are recruited annually to the CDHB. According to Mr Shaw, this has been consistent for the past seven years.

“While we continue to have some difficulty recruiting in some parts of the workforce, due to current low levels of unemployment and in some cases world-wide shortages, the CDHB is seen as an attractive place to work,” said Mr Shaw.

University of Otago, Christchurch, Communications Advisor Ainslie Talbot said WorkChoice Day gave students the chance to talk with young health professionals.

“This direct hands-on guidance is critical when young people are facing difficult career choices. CDHB staff get right behind WorkChoice Day and have always been extremely helpful,” he said.

Role play for Hospital Helping Hands



Volunteer Bernadette Kernick with Clinical Assessor Philippa Farrant



Clinical Assessors are being trained in a new system called interRAI—a secure web-based clinical assessment and care planning system, which is accessed while working in the community.

InterRAI facilitator Kaye Gilhooley said having volunteers act as clients made the transition from the classroom much smoother.

“The volunteers are as close to a real patient as they’re going to get really,” she said.

Helping Hands Volunteer Bernadette Kernick said she based her role playing on two of her elderly friends.

“The whole experience made me think quite hard about what it must be like to be elderly and in your own home and slowly losing your independence,” she said.

Clinical Assessor Philippa Farrant said she found training with a volunteer helpful.

“This is something quite new for me – it’s a real learning curve.”

InterRAI is an evidence-based assessment and care planning methodology developed by the interRAI group; a not for profit, collaborative network of researchers in over 20 countries committed to improving health care for persons who are elderly, frail, or have a disability.

An innovative use of volunteer time is helping to train staff better and cultivate acting talent on the side.

Some of the Hospital Helping Hands volunteers for the Older Person’s Health Service at The Princess Margaret Hospital are providing their time to act as clients for needs assessment interviews.

Community participation in health services planning



Health Services Planning Consumer Council Committee members, from back, left: Elizabeth Miller, Jackie Girvan, Richard Davison, David Lamb, Keith Gibb, Donald Pettitt. Front: Jill Waldron, Robyn Rainey, Gloria Weeks and Bellamy, Beth McIlveen Nobes. Absent: Amelia Dalley, Seulata Fui-Moagutuuli, Charmaine Wilson.

“Nothing about us, without us”, is the slogan adopted by The CDHB’s new Health Services Planning (HSP) Consumer Council.

The council of 15 consumers represents family health, mental health, chronic conditions, people with disabilities, older people, rural communities, Maori, Pacific people and Primary Health Organisation consumers.

The aim of the new council is to ensure the community and consumers have a strong say in the district’s health service planning and delivery. “Nothing about us, without us” is a well known saying that means people who will be affected by a policy should be fully involved in developing it.

CDHB Chief Executive Gordon Davies said it was important consumers participate at a high level and are close to where the important decision-making occurs.

“Participation in planning health services should be a partnership between the CDHB and consumers at all levels.

We are expecting our new Consumer Council to take an active role in influencing policy to better reflect consumer needs.”

Consumer Council committee members are:

Amelia Dalley: representing family and youth health

Richard Davison: representing Canterbury Primary Health

Organisation consumers

Seulata Fui-Moagutuuli: representing the Pacific community

Keith Gibb: representing older people

Jackie Girvan: representing rural health

David Lamb: representing people with chronic conditions

Beth McIlveen Nobes: representing people with mental illness

Elizabeth Miller: has a particular interest in child and family health

Donald Pettitt: key interest in family and men’s health and wellbeing

Robyn Rainey: representing people with learning disabilities

Jill Waldron: representing people with physical disabilities

Gloria Weeks: has a special interest in people with sensory disabilities

Charmaine Wilson: representing Maori.

*Two places representing women’s health and alcohol and other drugs on the Council have recently been vacated and the nomination process is under way to appoint two new members.

*Committee members can be contacted by emailing healthservicesplanning@cdhb.govt.nz or on (03) 337 8647.

Professional competency- small town style



could be assisting at a birth one minute then answering a bell when a patient has chest pain,” said Rangiora Hospital Charge Nurse Midwife Suzanne Salton.

She said the dual requirements of the Act were daunting at first, especially for staff who worked part time or on a casual basis.

“There was initial resistance, but we moved through this with several pot luck lunches in our homes. We went over our portfolios and how to set these up. Supporting each other has been the secret,” she said.

Kate Salmons has been a midwife 25 years; a nurse for

more than 30 years and she works part-time at Rangiora Hospital.

She said it was a challenge maintaining both competencies and a healthy working, family and social life.

“Although it’s a big commitment, overall we find the process beneficial,” she said.

“Patients benefit, because staff are keeping abreast of current research and it can be easy to fall behind. Trends come and go and come again, but you can only really go with what the current research is advising.”

Ms Salton said staff commitment to the hospital, their professions and the community made Rangiora Hospital a unique place to work.

Since 2003, the Health Practitioners Assurance Act has required all health practitioners to show evidence of competence and fit practice throughout their professional lives.

This means many hours of study and commitment within and over and above working hours.

Imagine doubling this workload!

Rangiora hospital birthing and convalescent unit registered staff are required to maintain both nursing and midwifery Annual Practicing Certificates.

“With only one staff member and one hospital aide on each shift, the sole charge role is quite varied... you

Kiwis Count Survey results

Kiwis Count is the first random national survey to ask New Zealanders about their experiences and perceptions of public services. Results from 6,000 people on what they thought of Government services, including the health sector have been published.

The good news is New Zealand health services ranked amongst the top service groupings for overall experience satisfaction. Service quality satisfaction was high, with patients stating they were treated fairly by competent staff.

Interestingly, findings suggest New Zealanders’ experiences of public services tend to be more positive than their perceptions.

State Services Commissioner Mark Prebble announced last month that a ‘Common Measurements Tool’ will be available to measure satisfaction within Government services to compare against the Kiwi Count results.

“The real value of the Kiwis Count Survey lies in us acting on the results,” he said.

CDHB CEO Gordon Davies said the survey results will provide further insight, in addition to the good work already being done on quality improvement within the CDHB.

For more information visit www.ssc.govt.nz/kiwis-count-research-survey and email newzealanders.



Volunteers Margaret Donovan, Pauline Stewart, Marion Cotter and Evelyn Cruickshank (front).

Plant cart pulls a crowd

experience@ssc.govt.nz with any questions.

Volunteers provide countless hours of support and kindness to patients and staff right across all areas of the CDHB.

This volunteer awareness week, many volunteers will be taking the opportunity to sit back and relax for a celebratory meal or morning tea and to enjoy each other's company.

Rangiora's Friends of the Hospital volunteer group will be doing just that.

Up to 14 volunteers coordinate a variety of fundraising activities to raise extra money for the hospital to purchase items such as hospital equipment, furnishings, DVDs, TVs and sheepskins for babies.

A small group of four volunteers (pictured) started up a plant cart three years ago, relying on plant and pot donations and an honesty box. The cart has become a well-known community attraction and raises a considerable sum... "enough so we don't have to hold a fete!" laughs Evelyn Cruickshank.

The volunteers have a propagating area to the side of the hospital where they grow donated and home-grown cuttings. They also take their work home; "I'm sure my husband would like his veggie patch back," added Marion Cotter.

"A lot of the Friends over the years have also been patients or had their babies here and have wanted to do something for the hospital and get involved. The hospital is absolutely marvellous— everybody wants to come back," said Margaret Donovan.

Charge Nurse Suzanne Salton said, "The Friends of Rangiora Hospital do a wonderful job".



New HAC member

Teresa Chalecki is the newest member of the CDHB's Hospital Advisory Committee (HAC). She brings more than 20 years clinical

and health management experience to the Committee. Currently Nurse Maude's Community Services Manager, Ms Chalecki is a registered nurse and has extensive knowledge and experience in providing health services; both hospital and community based.

She said her broad background provided an understanding of the diverse range of issues in the sector.

"This appointment provides a good opportunity to share and expand on that experience," said Ms Chalecki. "Collective experience can only be of benefit to the CDHB and the wider community".

What is the HAC?

The role of the CDHB's HAC (Hospital Advisory Committee) is to monitor the financial and operational performance of the CDHB's hospitals and related services.

The group also assesses strategic issues relating to the provision of hospital services provided by or through the DHB. Through monitoring and assessment they can provide advice and recommendations to the Board.

The Committee also analyses reports made to it and makes recommendations to the Board based on this information.

Public HAC meeting agendas, minutes and papers are available on the CDHB website www.cdhb.govt.nz/Corpbrd/HACMeetings/HACMainPage.htm. Dates and times for public meetings are also advertised in local newspapers.

The meetings are open to anyone to attend, subject to the right of the HAC to remove particular item(s) of business for public excluded sessions. Copies of the agenda and papers are available at the public meetings.

The agenda and associated reports of any CDHB public meeting are available for inspection (two working days prior to the meeting) at the CDHB's Corporate Office, Level 2 H Block, The Princess Margaret Hospital, Cashmere Road, Christchurch.

Right place at the right time

Thanks to inclement weather, Ian Dampier never made it to the Hurunui River for a Sunday fishing trip in April.



Intensive Care Unit Technician Ian Dampier helped save a life on the road.

Instead, he helped save a Darfield woman's life.

The ICU technician, his wife Melissa and friends decided on a 60km cycling trip around Horarata, cutting through to the Dean's Estate at Homebush.

"... I could see a car stopped in the middle of the road and some activity. As we got closer we saw a car embedded in a gorse hedge and wedged up on a forty five degree angle. The co-driver of a rally car had stopped in the middle of the road and was cradling the driver in her arms."

Mr Dampier could not find a pulse and the woman was not breathing. "Without discussion I started mouth-to-mouth and Melissa started CPR."

Mr Dampier said a first aid unit then arrived from a local rally sprints event, followed by a Paramedic unit, the Darfield GP, Police and Fire Service. The Darfield GP then took over.

Mr Dampier said the experience had left him 'very humbled'. "We were but one link in a chain of care that commenced with the rally car driver and his partner, St John Ambulance Services, Darfield GP Johan Vlok, the Darfield Police, two local volunteer fire services, the Canterbury WestPac Trust Helicopter Service, and staff at Christchurch Hospital," he said.

"The real reward is in watching a lovely lady being reunited with her family and receiving a second chance at life."

The Patient, Marlene Cleland, said she was incredibly grateful to everyone involved. "It was a totally amazing coincidence of events. I just can't think of how on earth I can thank someone for saving my life," she said.

I feel sick! Should I go to work?

Staff who are infectious at work risk making other staff, patients and visitors sick.

During winter influenza and respiratory viruses increase. CDHB Clinical Nurse Specialist and Infection Control Julianne Toop said if you are feeling unwell, give your colleagues and patients a break and stay in bed.

"If you have a temperature, feel lousy, ache all over and start to sneeze and cough... you are spreading the virus."

Give your colleagues and patients a break- stay in bed."

- Group A Streptococcus- return to work after 24 hours of the correct antibiotics.
- Conjunctivitis- Oozing must have stopped before you return to work.
- Scabies - return to work after 24 hours of the correct treatment.
- Vomiting and/or diarrhoea- stay at home until it has stopped for at least 24 hours

Hand washing is a standard precaution for health professionals. Ms Toop strongly emphasised the need for hand washing as part of basic personal hygiene and

to reduce your chances of getting a cold, flu or stomach bug.

Wash your hands:

- Before eating
- After going to the toilet
- After covering your mouth with your hands to cough or sneeze
- After touching your nose area and using a tissue.

Fact: Vitamin C and Echinacea help to relieve symptoms but will not prevent viruses.

Canterbury Medical Officer of Health Dr Alistair Humphrey

said using alcohol based hand rubs to clean your hands is also a good idea because they are fast and efficient.

"It's not just about protecting yourself against someone who is clearly sick, but also any surfaces they've touched," he said.

Clean household surfaces when someone at home is sick with diluted chlorine bleach (about 1 tablespoon of bleach for every litre of water).

Avoid winter germs by:

- Having an influenza vaccination
- Keeping your hands away from your eyes and nose
- Exercising regularly
- Eating a balanced diet.

Exclusive celebrity Souperlicious recipes!

This HealthBeat we've released a 'world exclusive'... the recipes that helped fuel two of Canterbury's iconic sportspeople.

Lilla Hadlee (Richard's Mum) and Bev Carter (Dan's Mum) have kindly provided two of the healthy recipes their famous sons enjoyed growing up.

Last month, the HEHA (Healthy Eating Healthy Action), HEAL

Canterbury community newspapers.

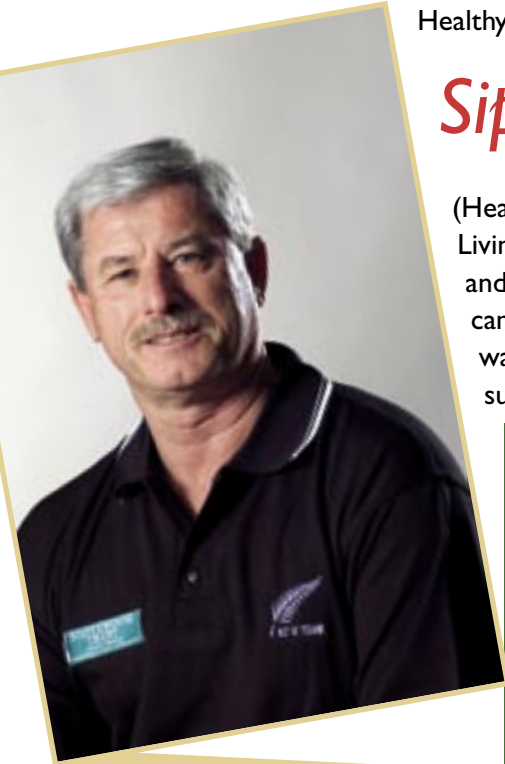
The campaign featured recipes from the Mums of well known Cantabrians and also to provide Canterbury families with nutritious and affordable soup recipes.

There were too many for the newspapers to

Sip soup like a sports star!

(Healthy Eating Active Living) and Community and Public Health campaign 'Souperlicious' was publicised with the support of the Star

choose from so here are two, as yet unseen recipes for HealthBeat readers to try and enjoy.



WIN!

To ride on the Souperlicious wave, we'd like to invite you to submit your best soup recipe. All entries go into a draw to win a 3L Maxwell & Williams Soup Tureen worth \$49.95 courtesy of The Homestore, Merivale Mall. Please email your recipe to fiona.bryce@cdhb.govt.nz by 19 June.

Sir Richard & Lilla Hadlee

Sir Richard Hadlee, MBE, is a former New Zealand cricketer. He played club and provincial cricket for Canterbury, Nottinghamshire County Cricket Club and Tasmania. His mum is Lilla.

She said "I used to make this soup for the family now the recipe has been handed down and Richard and his wife make it for me".

Meat and Vegetable Soup

Put 4 stewing chops and 2 litres water into a large pot. Cook until the meat is tender – cool – take off fat.

½-¾ packet dried soup mix to be added. Cook for (¾ hour).

Cool.

Take out chops and reserve.

Add any vegetable to remaining liquid. 8-10 cups of chopped vegetables – onion, carrot, parsnip, celery include leaves, leeks etc. Add salt/pepper to taste.

Cook vegetables ½ hour max. Add chopped meat in small pieces.

Instead of using chops you could use left over lamb roast bones.

Dan & Bev Carter

Dan Carter plays rugby for Canterbury, the Crusaders and the All Blacks. He is generally recognised as one of the best first fives in world rugby. His mum is Bev. She said "This was a quick lunch before rugby in the winter or after practice".

Bev Carter's Pumpkin Soup

1kg pumpkin

3 cups water

2 tsp instant chicken stock powder

2 tsp green herb stock powder

½ tsp grated nutmeg

2 medium onions

2 cloves garlic

Cut pumpkin into 6 pieces. Remove seeds but not skin. Weigh it at this stage. Place in a large pot with the water, seasonings, quartered onions and peeled garlic. Cover and cook until pumpkin is soft. Remove skin and process. Reheat, eat and enjoy!



Dramatic charity lecture

A charity lecture to raise funds for the Child Haematology and Oncology Centre (CHOC) was recently held by The SHRSET (Society of Historical Research, Stunt and Explosives Team) organisation at Christchurch Hospital's Rolleston Theatre. The fun-filled event raised \$105. Key note speaker was Professor Plopwell RSPV, DOA, FRCSNP, UTI (pictured here with Jan Millar).



Hep C - questions and answers

May 19 was World Hepatitis Day, with a focus on Hepatitis C. Within the CDHB, Gastroenterologists and Infectious Diseases Physicians at Christchurch Hospital, together with specialist nurses treat people with Hepatitis C. Nurses were answering questions on testing, treatment and the risks of Hep C on the day. Pictured are Linda Erikson, Judith McLaughlin, Neil Hellewell and Kate Gallagher.



Breast Cancer Research Award

The NZ Breast Cancer Foundation is inviting applications for clinical or basic science research funding in the field of breast cancer. Applications close 1 July 2008.

Visit www.nzbcf.org.nz/grants/nzbcf_research_fund.asp email ginnyh@nzbcf.org.nz or call 0800 902 732.

NZ Psychological Society Conference

The theme for this year's Annual Conference of the New Zealand Psychological Society is Wellbeing; individual, organisational and community.

It will be held at the Christchurch Hotel Grand Chancellor from 29 to 31 August 2008 email conference@psychology.org.nz or phone 04 4734885 for more information.



Hair today... and tomorrow!

Shirking the shears, Linda Hamilton of Christchurch Hospital's Bone Marrow Transplant unit dyed her hair green and blue- The Leukaemia and Blood Foundation's colours. So far, Linda has raised \$500 for the Foundation. To keep up with her bald buddies, Linda will patiently grow the colour out.



Good start to the day

Ward 2A at The Princess Margaret Hospital has resurrected its breakfast group. Charge Nurse Manager Andrea Mears said it was thoroughly enjoyed by patients and staff alike... "And of course it's therapeutic for the patients as well!"

Send us your pics!

Please send us pictures of what you get up to at work and at play. Email to fiona.bryce@cdhb.govt.nz (photos need to be 200dpi or greater and no smaller than 15cm).

Maori and Pacific Health Scholarships

Scholarship applications are now open to Canterbury Maori and Pacific people wanting to embark on a career in primary health care, or undertake further health related study, to make primary care their career focus.

Scholarships will be offered to people already committed to training in health (clinical or management), new students, or people in the health sector looking to enhance their skills or retrain. A work placement component is also included.

The scholarships are being coordinated by He Oranga Pounamu Charitable Trust on behalf of the CDHB. Scholarships open 1 June and close 30 June 2008. Applications are available from the He Oranga Pounamu Website www.hop.org.nz or contact Jaci Keats on (03) 353 4370.

Canterbury Webhealth.co.nz launched

Earlier this month the Canterbury Webhealth website was launched.

The website www.webhealth.co.nz has been designed to provide another avenue of access to health and social services and relevant information and is sponsored by the CDHB.

Webhealth District Coordinator Canterbury Tara Thomas said the aim of the site is to provide the most up to date information and to help keep the Canterbury community connected.

“The Webhealth website helps people find their own solutions to issues in their lives with the best possible information and resources. It’s also just as much a resource for health professionals as it is for the general public of Canterbury,” she said.

On the Webhealth website you will be able to:

- Find a health or social service

What’s up...

June

- 15-21 Volunteer Awareness Week
- 13 World Blood Donation Day
- 20 World Refugee Day
- 26 International Day against Drug Abuse and Illicit Trafficking
- 30-4 CCS Disability Action National Awareness Week

July

- 4 End of Term 2
- 4 University of Otago, Christchurch - Mid-Winter Dialogues 2008
“Violence in New Zealand Society” presented by Dr Rajen Prasad, Chief Commissioner, Families Commission and Dr Kate Van Heugten, Te Awatea Violence Research Centre, University of Canterbury. 12.30-1.30pm at the Rolleston Lecture Theatre, University of Otago, Christchurch.
- 6-12 Neurological Foundation National Appeal Week
- 20-26 Alzheimer’s Awareness Week
- 21-27 Women’s Refuge Appeal
- 21 Term 3 begins
- 23-29 Maori Language Week
- 31 University of Otago, Christchurch - Mid-Winter Dialogues 2008.
The Hon, David Cunliffe, Minister of Health. 12.30-1.30pm at the Rolleston Lecture Theatre, University of Otago, Christchurch.

- Find health and wellbeing information
- Check out the community notice board
- Get a website for your service.

Click on the site for more details or email: canterbury@webhealth.co.nz for further information.



How to read food labels

Nutrition Information Example - Crackers		
Servings per package: 7 Serving size: 35g		
	Per Serving	Per 100g
Energy	577kj	1650kj
Protein	3.9g	11.1g
Fat	3g	8.5g
Cholesterol	Nil	Nil
Carbohydrate		
Total	21.8g	62.2g
Sugars	0.6g	1.8g
Dietary fibre	3.9g	11.1g
Sodium	147mg	420mg

Step one: Refer to the 100g column.

Step two: Is there less than 10g fat?

Step three: Less than 10g sugar?

Step four: Is there more than 6g fibre?

Step five: Less than 450mg sodium (salt)?



Step six: If you have answered yes to all the above, this product is a good choice.

This is a general rule for reading labels but there are exceptions.

Breakfast cereals: Fat less than 5g per 100g
Fibre more than 6g per 200g
Sugar less than 15g per 100g

Milk:.....Fat less than 1g per 100g

Yoghurt:.....Fat less than 2g per 200g

How to read food labels

This table on 'how to read food labels' was very popular in our March edition of Healthfirst Magazine. We thought HealthBeat readers might like a copy. You could attach it to the inside of your pantry door or pass it to a friend. We've also added a handy wallet sized table to keep in your wallet while grocery shopping.

How to read food labels

Step one: Refer to the 100g column.

Step two: Is there less than 10g fat?

Step three: Less than 10g sugar?

Step four: Is there more than 6g fibre?

Step five: Less than 450mg sodium (salt)?

✓ **Step six:** If you have answered yes to all the above, this product is a good choice.

This is a general rule for reading labels but there are exceptions.

Breakfast cereals: Fat less than 5g per 100g
Fibre more than 6g per 200g
Sugar less than 15g per 100g

Milk:.....Fat less than 1g per 100g

Yoghurt:.....Fat less than 2g per 200g

Handy tips for grocery shopping

Look at the per 100g column on the label. Try for less than 10g/100g fat and more than 6g/100g fibre (found in cereals, breads and snacks).

Try to eat 5+ a day of fruit and vegetables, which can be fresh, frozen or canned in juice or water. Try to make half your plate vegetables at meal times.

Water and milk are the best drink choices.

Choose a breakfast cereal that has less than 10g/100g sugar and fat and more than 6g/100g fibre (allow for sugar up to 20g/100g if the cereal contains dried fruit).

A portion of meat should be the size and thickness of your palm – without the fingers! (equates to 100-120g).

Try to use low fat milk. Make gradual changes over time, perhaps moving from blue milk to light blue to green). Children over two years old can have light blue milk and green from five years old.

Margarine is better than butter.

Choose wholemeal bread where possible. Try one slice of each in a sandwich to get you started.