

## The PHOnetic

*For anyone interested in primary health*



TPHO's Fortnightly Newsletter, Issue 1, 24 January 2007

## Welcome to The PHOnetic!

[Click Here](#) and Enter The PHOnetic Getaway Prize Draw!!!



**TPHO provider staff can win two nights at Rangimarie Homestay!**

The PHOnetic is the new fortnightly newsletter for TPHO GP Practices and Turanga Health staff, and anyone with an interest in primary health.

**To coincide with the launch of The PHOnetic TPHO is giving away The PHOnetic Getaway Prize Draw.**

Simply enter by clicking above, write "Competition Entry" in the subject line, and be in to win two nights accommodation at the exclusive Rangimarie Homestay, Anaura Bay, with breakfast and evening meals, and petrol included. With only 249 TPHO GP Practice and Turanga Health staff eligible, you have a 1/249 chance to win!!

## TPHO's Communication Just Got Better! E

Welcome to Issue 1 of the Turanganui Primary Health Organisation's electronic newsletter The PHOnetic. It was developed after listening to you about how we can improve our communication within the PHO and with the wider local health sector. You told us you wanted regular, predictable communications, less paper and less time wasting.

So here is our response. Expect to receive this newsletter every fortnight, on Wednesday morning. Barring urgent events this is the main way we will contact you so please read it!

You need only to skim for information that is directed to you. The codes will help you do this: PN for Practice Nurse, PM for Practice Manager, GP for General Practitioners, C for Community Groups and non-governmental organisations, and E for everyone.

The Turanganui PHO Newsletter is being sent to every health provider, larger non-governmental organisation and community group, and the media. Our aim is to have it reach any person or group with an interest in primary health care in the district. To add a group or person to our mailing list please click on the link below.

[Click Here](#) and email the relevant email address.

## Welcome to The PHOnetic from TPHO Board Chair David Scott



**TPHO Board Chair David Scott**

Kia ora. On behalf of the TPHO Board I would like to welcome you to this, our first edition of PHOnetic. Our TPHO organisation would not be as innovative, energetic and successful if it wasn't for your endeavours and commitment to our enrolled people. Thank you all for this work and I trust that you will enjoy reading and participating in this electronic communication. Our thanks also go to Hayley – the energy force behind this concept as without her it would still be an idea in the minds of Board members!

David S Scott Chair TPHO.

### Community News

This section of our newsletter is devoted to you and your projects. If you would like to advertise your event, seminar or meeting email details to [The PHOnetic](#)

**Relay for Life** February 17th and 18th, noon to noon. Showgrounds Events Centre, Main Road, Makaraka. Email [Gisborne East Coast Cancer Society](#) for more details or visit the [Relay for Life](#) website.

**Taki Tahi Toa Mano** Tairāwhiti's regional smokefree group working towards a Smokefree Tairāwhiti. Bi-monthly meetings. Next meeting Friday 23 March, 9.30am, venue to be confirmed. For more information email [Taki Tahi Toa Mano](#).

**Cancer Control Group** Next meeting Wednesday 28 February, 12 noon, Cancer Society Rooms. For more information email [Cancer Control Group](#).

**Te Kete Mauriora** Next meeting Tuesday 27 February 1pm-2.30pm. Venue is Turanganui Primary Health Organisation office, level 1, Rockforte Tower Building, Grey St. For more information email [Te Kete Mauriora](#).

**Tairāwhiti District Health Board Meeting** Morris Adair Board Room, Tuesday 20 February, 9am.

**TDH Health Advisory Committee Meeting** Morris Adair Board Room, Tuesday 27 February, 9am.

**TDH Community and Public Health Advisory Committee/Disability Support Advisory Committee Meetings** Morris Adair Board Room, Tuesday 27 February, 1pm/2.30pm.

Visit [www.tdh.org.nz](http://www.tdh.org.nz) for all TDH meeting agendas.

## Accreditation Success Celebrated GP, PM, PN

□ □ Around 25 General Practice doctors, nurses and administration staff enjoyed nibbles and refreshments at the Accreditation Celebration held in Turanganui Primary Health Organisation's offices in October.

The celebration capped off months of hard work by practice staff as they completed one of the country's most testing health audits. Accreditation assessors visited practices between March and August this year. The cost of achieving accreditation was met by Pinnacle Incorporated and is valid for three years.



**Ken McFarlane picks up TPHO award on behalf of Mangapapa**



**Dr Peters is speechless after picking up the award!**

In a TPHO media statement issued the same day as the celebration Mangapapa Medical Centre GP and TPHO Board member Dr Ken McFarlane was quoted as saying he and the other GP Practice staff knew that the medical centres already provided high quality care. "But getting accreditation is the official recognition we needed to prove it. It's like signing up for a voluntary warrant of fitness and we have all passed."

"We were already focusing on doing the best for our patients but during the accreditation process, if we found a problem, we fixed it, and now we have been able to make our best even better."

[Accreditation Success Media Statement](#)

## A Bit of Chronic Illness is Character Building! E

**Just over six months ago Kaiti Medical Centre GP Johan Peters had a nagging feeling that all was not well. Not long after he was diagnosed with Waldenstrom's macroglobulinemia, a type of non Hodgkins lymphoma.**

**Here, written in his own words for The PHOnetic, and capturing that waggish droll style many of you associate with Jo, is his story.**

Well, some or all of you have probably heard rumours about me. I thought this might be a chance to explain what's been happening to me, and maybe also, what I've learnt! I've got Waldenstrom's macroglobulinemia, which is a type of non Hodgkins lymphoma.

I'd been very slowly and imperceptibly going down hill, not in any specific sort of way, but, as I put it to the doctor "just getting to feel older". I had to struggle more to get things done. The teenage kids got me down more. Everything became more of an effort.

But most of all, my athletic performance was lagging! I ride my road bike a lot, and like to think I'm at least competitive with other broken down ex-runners with grey hair peeking through their helmets. But on my last race, when Frances Rowland overtook me riding up Gentle Annie hill, there had to be something wrong. I couldn't possibly be getting that soft.

I arranged a visit to my favourite GP, but I knew that Dr Dave Somerton (who never prescribes Amoxil for viruses!) might just try to get specific and appropriate with his tests. Of course I knew best, so thought I'd have the tests done first, ticking every box. It was for me, after all!

The answer was in the blood tests and there was something very obviously amiss with ESR>130, and all the rest. It was a strange experience looking up my results and working it out for myself - there was really something bad going on. I thought, from now on I might just let the docs be in charge and not long later I even got a home visit from Dr Dave. That's when I really knew there was going to be bad news.

Since then, things moved quickly. A bone marrow biopsy (which doesn't hurt at all if they fill you up with drugs), and a visit to Palmerston North, to see my old classmate, Bart Baker. He'd already given me a whole lot of websites and my head was spinning with information.

Treatment consists of chemotherapy to knock it back. Then I can expect a remission, and do it again when it comes back. In the long term, there will probably be a stem cell transplant, or a bone marrow transplant. But hopefully, by the time that's needed, I'll have old man's disease.

As far as cancers, go it's a sort of a prissy little low grade thing, which makes you sort of unwell and tired, but refuses to try and kill you with any sort of determination. As far as prognosis goes, half the patients with my disease are alive after ten years. Nobody's told me what happens to the other half.

I'd always understood pretty clearly that life ends, and I had no illusions that somehow, out of all the millions of people wandering the earth, I was going to be the special and immortal one. But I had in mind a major operation, traumatic medical treatment, followed by either death or rising phoenix like from the ashes, a bit like Lance Armstrong. He can ride his bike a bit as well.

But I wasn't prepared for this, just sort of feeling crappy, being able to do less, having to tolerate the whole treatment thing with lots of needles, and unpleasant drugs, and on top of that the whole thing not going away either.

It also surprised me that while I thought an illness such as this would belong to me, it isn't really mine on my own at all. The kids have found out that maybe I won't be able to fix everything forever after all. That's not a bad thing for them to learn, but it came as an obvious surprise to them. Within the family now, I can do no wrong. Most bad things must be Julie's fault. I can live with that a bit longer, but it's fascinating to note that interest already wanes. Life goes on. No matter how big my crisis is, all the basics of life still have to be done, nothing has changed. Everyone still has their own issues.

These are the things I've learnt:

1. Bad things happen, but if the illness doesn't take everything away from you, it's surprising how many things you can still do.
2. Death isn't scary, but chronic debilitating illness is.
3. Nothing is that debilitating that you can't do anything.
4. Death and even illness is much easier for the individual than for family that you leave behind. They are also the ones that have to deal with your ongoing grumpiness and having to fill the roles you used to fill.
5. Get good income protection insurance. A word of gratitude to the people at Medical Assurance. None of us want to be left ill, and worrying about having to earn a living as well. Especially those of you who are working on your own. My mates at KMC gave me the room to deal with my problems, while they took up the slack, no questions asked.
6. It's surprising how many really concerned people there are, including patients, workmates, friends, and family. And it's funny how much their words of support really do help.
7. I have a new respect for the whole range of medical staff, not just the docs. You really do need all of them, and they all give you something useful.
8. Don't worry, we're all too old to die young anyway and a bit of chronic illness is character building!

## Snack Sized Bite at TPHO's Annual Report E

A Snack and Go version of Turanganui Primary Health Organisation's Annual Report has been distributed in hardcopy today to all TPHO GP Practice and Turanga Health staff.

Every year Turanganui Primary Health Organisation (TPHO) releases its Annual Report summarizing the year's activity. Snack and Go is for interested staff working for the GP practices and Maori health organization that make up TPHO.

Click below if you want to read the full-length version of TPHO's Annual Report. [TPHO Annual Report 2006 Financials 2006 Section 1 Financials 2006 Section 2](#)

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## Turanga Health Adds a City Clinic to its Services E

New clinic rooms on the corner of Derby Street and Childers Road mean Turanga Health whanau can seek treatment in the city, says Personal Health Service Delivery Manager Albie Stewart.

Opened in November, Te Whare Maire boasts five modern functional refurbished treatment rooms right in the centre of town and with plenty of parking.

Well Child clinics, as well as mirimiri, podiatry and whanau health checks are offered in the new building.

Albie said while Turanga Health staff work hard taking health and disability services out to the people, the organisation also wanted to offer whanau options. "We will still maintain marae and community based services but it's also great to offer a city clinic."

Turanga Health leases the building which is perfectly situated between Turanga Health's other facilities for ease of access by staff. It used to be home to Haumi Traders, says Albie, but with bright signage, and a soon-to-be painted exterior, the building has completely changed.

The new facility was named Te Whare Maire by Turanga Health kaumatua Charlie Pera.

"In the old days Te Whare Maire was a traditional and sacred place of instruction," explains Albie. "Te Whare Maire symbolises for us, in a contemporary way, how a tohunga would shape and mould taonga like mere, patu and taiaha to be strong. Turanga Health staff are on a mission helping shape our whanau, preparing them to be healthy, strong and well for themselves."

"We thank Uncle Charlie for the dawn opening, and the Hahi Ringatu for their services."

Albie said in the future Turanga Health will be looking at opportunities for using Te Whare Maire to extend primary health services to whanau by building relationships and partnering with local general practices.

For more information about any of the clinics offered at Te Whare Maire contact Turanga Health on **(06) 869 0457**.

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## CEO Gets Tough In Message to People with Diabetes E

TPHO Chief Executive Keriana Brooking issued a tough message to the public just before Christmas telling people with diabetes to take more responsibility of their condition.

Her comments followed the release of the Pinnacle Group Ltd report into the uptake of the Diabetes Get Checked programme in Turanganui.

[Get Checked Diabetes Media Statement](#)

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## GP Fees Published GP, PM,

The first publication of GP Fees went into the free community newspaper The Bulletin on Thursday 7 December 2006.

As predicted an article appeared in The Gisborne Herald the next day. Feedback from three General Practices, indicate the process used was positive and there has been very little response from patients or public.

Did you, your patients, any public or other staff, have anything you wanted to pass on regarding the publicity of the fees table?

Any feedback you can send us will help us with the process for the next publication, due around the beginning of March.

[Click Here](#) to email any other feedback.

[GP Fees Media Statement](#)

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