ACN launches white paper at Parliamentary Breakfast

Getting it right – nurse informatics and enhanced patient outcomes

Nurses performing the remarkable in the AOD sector

More than just weighing babies...
Welcome

Adjunct Professor Kylie Ward FACN, CEO of ACN

Snapshot

In the news

Snapshot @ACN

ACN update

In focus @ACN

ACN deeply concerned about nurse suicide rates

In focus @ACN

ACN welcomes new Key Contacts

Events @ACN

Community & Primary Health Care Nursing Week

In focus @ACN

ACN voices – meet our Emerging Nurse Leaders

In focus @ACN

Getting it right – nurse informatics and enhanced patient outcomes

Events @ACN

ACN launches white paper at Parliamentary Breakfast

In focus @ACN

Nurses performing the remarkable in the AOD sector

Events @ACN

National Nursing Forum

NMBA update

Registration standard: Recovery of Practice
Welcome to the October edition of NurseClick. It has been an extremely eventful month for the Australian College of Nursing (ACN), as we continue to advance nurse leadership and drive transformational change across the Australian health care system.

Bringing together nurses from all around the country to explore where we are as a profession and how nurses are leading necessary reform, the National Nursing Forum was held at Melbourne Park Function Centre from 26–28 October. The Forum was a great success and a fantastic opportunity to celebrate the passion, innovation and energy across all generations of nursing through a series of exceptional keynote speeches, concurrent sessions and master classes.

In a momentous achievement not only for our organisation but for the entire nursing profession, ACN launched its Nurses are Essential in Health and Aged Care Reform White Paper at a Parliamentary Breakfast on Tuesday 11 October. It was an honour to have the Australian Prime Minister, The Hon Malcolm Turnbull MP, launch our white paper, as well as many parliamentarians speak at this highly anticipated event. The success of the launch validated our profession and highlighted that the collective voice of nurses cannot be ignored in the health and aged care reform agenda.

Another recent success for our organisation and profession was Community and Primary Health Care Nursing Week, running from 19–26 September. With events held across the country in support of this incredibly important initiative, ACN was able to raise awareness of the current and potential contribution of community and primary health care (CPHC) nursing to the health care system.

In her winning article from our 2016 Community and Primary Health Care eBook, Kristy Kepu perfectly captures the vital role CPNC nurses play in our communities. Drawing from her experiences as a child and family health nurse, Kristy outlines how nurses make a difference in the lives of their patients.

The immense impact nurses have on individuals and communities is further explored by a registered nurse and health care consumer in his article, Nurses performing the remarkable in the AOD sector. Reflecting on his personal journey to overcome addiction, this refreshingly honest profile piece highlights how AOD nurses inspired him to join our profession.

Finally, in answer to questions about ACN’s Emerging Nurse Leader (ENL) Program, one of our exceptional ENL’s Evan Casella MACN offers insights into his own experiences as an early-career nurse. Reflecting upon his future ambitions to advance nursing practice through developing his own professional skillset, Evan outlines how the ENL program provided him with many opportunities to pursue this goal.

I hope you enjoy this inspiring read!
In the news

Disease rate higher for Indigenous Australians

Indigenous Australians are more than twice as likely than non-indigenous people to suffer from diseases, most of which are preventable, a report by the Australian Institute of Health and Welfare has found.

The report shows that while there have been improvements in Indigenous health, there remains a wide gap in terms of illnesses and deaths suffered by Aboriginal and Torres Strait Islanders compared with non-indigenous people.

Read more

Mental health rates worse in the bush

A new report has found that the more remote the area, the higher the rate of hospitalisations for mental illness.

The report found that overnight hospitalisations for mental illness were almost six-times greater in remote areas compared with more populated areas in 2013 and 2014.

Read more

Baby deaths linked to faulty genes

A team of Perth researchers have linked a faulty gene to the deaths of seemingly healthy children whose hearts suddenly stop.

The Harry Perkins Institute of Medical Research made the discovery while solving the baffling death of a four-month-old Scottish baby who suffered cardiac arrest and died.

Read more

One in three Australians avoid eating gluten, dairy or meat

Around 30% of Australians are eliminating gluten, dairy or meat from their diets, according to Australia’s largest ever diet survey released by the CSIRO.

The CSIRO Healthy Diet Score 2016 report reveals that 12.1% of Australians aren’t eating gluten, 12% are avoiding dairy and 8.6% are eliminating meat from their diets.

Read more

Not driving makes elderly women more depressed

Elderly women who stop driving become more vulnerable to depression because it leaves them socially isolated, University of Queensland researchers have concluded.

Following a nine-year study of 4000 women aged in their late 70s and 80s, the women who stopped driving reported poorer mental health compared to those who stayed behind the wheel.

Read more

App could replace traditional ECG machine in outback Australia

A new smartphone app could revolutionise the way health care is delivered in the outback. The iECG could replace a traditional ECG machine to detect atrial fibrillation in rural Australia.

Atrial fibrillation is responsible for one third of all strokes in Australia.

Read more

Wearable device leads charge against insomnia

A new wearable device is set to join the frontlines in the battle against insomnia.

Developed by tech company, Thim in collaboration with researchers from Flinders University, the lightweight, tracking ring is worn on a finger and re-teaches people how to develop a longer, deeper sleep pattern.

Read more

Breast health awareness alarmingly low, survey finds

A worryingly low proportion of Australian women understand breast health and the full risk factors for breast cancer, according to a new survey by the McGrath Foundation. The foundation’s inaugural Breast Health Index Survey found while almost three quarters of women considered themselves ‘aware’ of breast health, only 15% met all four criteria for breast health understanding.

Read more

If you are a nurse working in a general practice setting, the Nursing in General Practice (NiGP) Handbook is essential reading, and it’s FREE.

The handbook contains details about employing and supporting RNs and ENs, the current regulatory environment, how to maximise the benefits, including the Practice Nurse Incentive Program and the range of MBS items that support nursing services in general practice.
ICN CEO wins top alumni honour

Chief Executive Officer of the International Council of Nurses (ICN) Dr Frances Hughes has been awarded the prestigious University of Technology, Sydney (UTS) Chancellor’s Award for Excellence.

The UTS Alumni Awards recognise the university’s most outstanding and inspiring alumni for achievements in innovation, leadership and compassion that are changing the world for the better.

ACN would like to congratulate Dr Hughes on this fantastic achievement.

Read more

New test identifies ovarian cancer patients most at risk of death

A new computer test is helping doctors work out how long women with advanced ovarian cancer might survive. Developed at the Institute of Cancer Research in London, the test highlighted a staggering difference between those patients who would live for five years or more and those who would die before then. The computer test examines the cell ecosystem around secondary tumours.

Read more

UN Commission on Health Employment and Economic Growth releases report

The United Nations High-Level Commission on Health Employment and Economic Growth (HEEG) has submitted its report to the Secretary-General of the United Nations at the 71st session of the UN General Assembly in New York.

The report sets out a powerful, evidence-based economic case for investing in the health workforce, including 10 recommendations to advance an intersectoral agenda across the finance, labour, education, health and social sectors.

The International Council of Nurses (ICN) have published a media release in response to the report.

Read more

Introducing eggs and peanuts early in an infants’ diet can reduce the risk of allergies

New research published in the Journal of the American Medical Association shows that the early introduction of eggs and peanuts in an infants’ diet is linked to lower rates of egg and peanut allergies in later life. They also found that early introduction of gluten (wheat) was not associated with an increased risk of coeliac disease.

Read more

No proof fitness trackers promote weight loss, study finds

Wearing an activity device that counts how many steps you have taken does not appear to improve the chances of losing weight, a two-year long study published in the Journal of the American Medical Association has found.

Read more

Most dangerous place to drink alcohol is at home, study finds

Researchers from the University of New England (UNE) have found that the most dangerous place to drink alcohol is at home. An analysis of data from emergency departments over a 10-year period, showed 36% of alcohol-related injuries happen at home, with 13% on the street and just 10% at licensed premises.

Read more

Long daytime naps are a warning sign for type-2 diabetes, study finds

Napping for more than an hour during the day could be a warning sign for type-2 diabetes, Japanese researchers suggest. Their research found that there was a link between long daytime naps of more than 60 minutes and a 45% increased risk of type-2 diabetes, compared with no daytime napping.

Read more

Watching sad movies can bring people closer together

Watching emotional films and plays brings us closer together and can even boost our physical pain thresholds, scientists from Oxford University have shown.

The researchers studied the effects of fiction on human emotions by comparing levels of endorphins released by people who had watched a sad film and those who had watched a less hard-hitting documentary.

Read more

Research Review

Helping nurses keep up to date with clinical research

Visit www.collegianjournal.com

Read the latest in nursing research and practice in ACN’s digital journal, Collegian.

Access to the peer-reviewed publication is free for all ACN Members via the My ACN member portal, members.acn.edu.au

Visit www.collegianjournal.com
ACN launches new Nurse Informatics COI

ACN is proud to announce the introduction of a new Nurse Informatics Community of Interest (COI) to our suite of special interest groups. This new COI will be for nurses interested in the use of information and communication technologies to enhance health care. It will be a place of high-level, active discussion and a crucial repository of highly skilled people who are passionate about raising the profile of this innovative area of nursing practice.

Members of our COIs help inform our policy and position statements, and ultimately, influence health and aged care debate and policy. ACN COIs advance the nursing profession by taking the lead, collaborating about key issues and working together to develop nurse-led solutions.

If you work in health informatics or have a professional interest in e-health technologies, please contact us at membership@acn.edu.au to join the Nurse Informatics COI.

Nurse Retention now more important than ever

ACN welcomes the findings of the recent study by Monash University, What Nurses & Midwives Want: Findings from the National Survey on Workplace Climate and Well-being, as an opportunity to open the discussion on addressing the issue of retention in the nursing profession. The study found a quarter of those surveyed said they were either likely or very likely to leave the profession.

The nursing profession faces many challenges in the very near future. These challenges include an ageing workforce with a majority expected to retire in the next decade. There is also the challenge of an ageing population with increasing levels of chronic disease that will require more nurses over the same period.

The new study has found that many nurses feel over-worked and undervalued, leading to thoughts about leaving the profession. ACN will work tirelessly for its members, as it always does, to raise these issues at the most senior levels to ensure the nursing voice is heard in the pursuit of advancing nurse leadership.

Read the full media release.

ACN's 'Nurses are Essential in Health and Aged Care Reform' White Paper highlighted in a statement at the House of Representatives

Following his attendance at the launch of our Nurses are Essential in Health and Aged Care Reform White Paper, The Hon Tony Zappia MP, Shadow Minister for Medicare, made a statement at the House of Representatives, calling for inclusion of the nursing voice in health reform on Wednesday 12 October.

"Nurses are amongst the most highly-regarded and valued professions in society. Nurses make up about half of the health workforce and are in the frontline of the provision of health services.

"...Nurses have a unique insight into and direct impact on the success of programs, yet governments fail to adequately consult them or include them in strategic policy debates when developing health policy.

"The nursing white paper offers a way forward for doing that and calls on the government to: recognise the nursing profession’s role; invest in policy platforms that enable the full participation of the nursing profession; ensure the nursing voice is heard in strategic policy debates and reform developments; recognise the value of nurse led innovation; support nurses to work to their full scope and expanded scope, where necessary; and acknowledge the pivotal role of nurses in setting standards of care.

"The government cannot be serious about health reform without genuinely including nurses in the process,” said Minister Zappia.
ACN deeply concerned about nurse suicide rates

By Stacie Murphy MACN
ACN Policy Officer

The Australian College of Nursing (ACN) is alarmed about recently reported suicide rates amongst nurses and seeks to raise awareness of this concerning issue.

The findings of a newly published national study, ‘Suicide by health professionals: a retrospective mortality study in Australia, 2001-2012’, by researchers led by Deakin University’s Dr Allison Milner, revealed that the rate of suicide for female nurses and midwives was almost three times higher than in females in other non-health care occupations. The suicide rate for male nurses and midwives was almost twice as high as males in other non-health care professions.

The objectives of the study were to report ‘age-standardised rates and methods of suicide by health professionals, and to compare these with suicide rates for other occupations’ (Milner et al 2016). The results are of particular concern to the nursing profession, as the suicide rates amongst women and men in the nursing profession were statistically significant. The study showed:

- The rate of suicide among male nurses and midwives was 22.7 per 100,000 person-years compared with 14.9 per 100,000 person-years for men in other non-health occupations.
- The rate of suicide among female nurses and midwives was 8.2 per 100,000 person-years compared with 2.8 per 100,000 person-years for women in other non-health occupations (Milner et al 2016).

The suicide rate for male nurses and midwives was almost three times higher than females in other non-health care occupations. However, when comparing men in other occupations, the rate of suicide was only reported as being higher among male nurses and midwives (Milner et al 2016).

ACN CEO, Adjunct Professor Kylie Ward FACN expressed deep concern about the profound impacts of nurse suicide, “the results of this study are alarming. Suicide affects many people, first and foremost the person who tragically takes their own life. Nurses also have families and friends who love them and communities who rely on them, and to lose them in this way is deeply saddening,” she said.

The study stated that reasons for the higher rates of suicide by female and male nurses and midwives include the particularly demanding nature of their jobs. Contributing factors such as long hours and work/life balance play a prominent role, with anxiety also a potential risk factor for suicide.

The study outlined several ‘stressors’ contributing to the high suicide rates reported. These included ‘sex-related stressors’ suggesting that female nurses can experience ‘gender role stress’ as they try to fulfill child care and household roles in addition to their professional roles (Milner et al 2016). The study also concluded that occupational gender norms may contribute to the higher suicide rates amongst male nurses and midwives, as ‘...some male nurses experience anxiety about the perceived stigma associated with their non-traditional career choice,’ (Milner et al 2016).

The study also pointed to ‘work-related stressors’ and highlighted that there is evidence to show people working in care professions, including nurses, are likely to be exposed to trauma. Whether experienced first-hand or vicariously, the study suggested these psychosocial pressures are associated with anxiety and depression amongst nurse and other health professionals (Milner et al 2016).

The study also concluded that there is strong evidence showing higher rates of suicide amongst health professionals with ‘ready access’ to prescription medicines, and highlighted that this finding is consistent with other studies (Milner et al 2016).

The study called for attention to be paid to better understanding the specific stressors and different risk factors experienced by women and men in health professions, including nurses, to form effective suicide prevention strategies. The research specially noted that strategies “should also pay heed to the higher rate of suicide among professionals with access to prescription medicines” (Milner et al 2016).

Adjunct Professor Ward said, “ACN strongly supports suicide prevention initiatives in hospitals and workplaces employing nurses. Nurses are incredibly good at looking after patients but we must make sure that they are looking after themselves.

Adequate and appropriate support initiatives targeting suicide prevention are absolutely critical. Suicide is preventable and we must also make sure that families and work colleagues look out for warning signs and support vulnerable individuals who may be at risk,” she said.

ACN encourages anyone who finds this article distressing and needs help to contact any of the following helplines:

- Lifeline on 13 11 14
- MensLine Australia on 1300 789 978
- Suicide Call Back Service on 1300 659 467
- Beyond Blue on 1300 22 46 36
- Headspace on 1800 650 890

Reference
ACN welcomes new Key Contacts

ACN recognises the importance of providing members with targeted networking and engagement opportunities.

Our Regions and Communities of Interest (COI) provide unique opportunities to connect with members who are located in your region or share your area of practice. They are member-led and a crucial repository of high-level, active discussion about specific health and aged care topics.

Each Region and COI is led by a Key Contact, who acts as the liaison between their special interest group and ACN. Our Key Contacts are highly skilled professionals who are passionate about raising the profile of local and national health concerns.

If you are interested in filling a vacant Key Contact position and working with ACN to organise activities for your COI or Region please contact us at engagement@acn.edu.au.

Heather Keighley, RN, RM, MACN, M. Intl. Health;

Heather Keighley has recently been appointed the Key Contact for both the ACN NT North Region, and the ACN Rural Nursing and Midwifery COI. Heather is a registered nurse and midwife with over forty years of experience in nursing and midwifery, mainly in the NT.

“My experience in nursing and midwifery has had an emphasis on primary health care particularly Aboriginal health, clinical education, clinical governance and quality improvement,” Heather said.

Heather is currently working as a Senior Nursing Advisor and is the Acting Chief Nurse and Midwifery Officer for the NT Department of Health in Darwin. Heather is passionate about nurse education and professional development, and is excited to join ACN in advancing nurse leadership through her new appointments.

“I am looking forward to working with members to promote opportunities to network, share experiences and raise the profile of rural nurses,” Heather said.

Robbie R. Haines, RN, MACN

Robbie R. Haines has recently been appointed to fulfil the role of ACN Key Contact for our WA South West Region. Robbie is a registered nurse working in a public hospital in the southern wheatbelt area.

He is passionate about our profession, committed to our organisation and keen to establish a strong network of nurses within the WA South West region.

“I’ve noticed a distinct lack of collegiate activities in our area, and I would like to aim to reconnect our region with the rest of the country,” Robbie said.

Robbie is looking forward to taking on this role and reconnecting the WA South West Region. He is calling upon Members and Fellows within this Region to join him in achieving this goal.

“If anybody has suggestions for CPD activities that you would like to have in/near your workplace, please let me know and I can work on that for you. Or if you have any ideas for a networking opportunity, we can certainly support that too,” Robbie said.
Community & Primary Health Care Nursing Week

The Community and Primary Health Care Nursing Week: Nurses where you need them national campaign ran from the 19–25 September 2016.

This important initiative aimed to raise awareness of the significant contribution community and primary health care (CPHC) nurses make to the Australian health care system.

Nurses working within primary and community care are well placed to meet the health inequalities experienced in the Australian population, especially in rural, remote and vulnerable populations.

They can help bridge the often fragmented health care system and support continuity of care.

Community and Primary Health Care Nursing Week was a great success and fantastic opportunity to promote and discuss the vital role CPHC nurses play in our local communities.

ACN was delighted that more than 18 registered events where held all over the country in support of Community and Primary Health Care Nursing Week. We also had 13 organisations register their support for this important initiative and more than 30 stories submitted for our 2016 Community and Primary Health Care Nursing Week eBook. Visit our website to read stories from CPHC nurses, researchers and organisations in our eBook.

ACN would like to thank Australian Mushrooms and the Australian Commission on Safety and Quality in Health Care for their generous sponsorship of this important campaign.
ACN Community and Primary Health Care COI Key Contact celebrates Community and Primary Health Care Nursing Week

Shoalhaven Community Aged Care Manager and ACN Community and Primary Health Care Community of Interest (COI) Key Contact Kate Partington MACN joined forces with APHC Clinical Nurse Educator Rob Beaumont on Monday September 19, to ensure that Community and Primary Health Care Nursing Week got off to a highly visible start, with their colourful display in the foyer of the Shoalhaven District Memorial Hospital.

As the ACN Community and Primary Health Care COI Key Contact, Kate is in full support of Community and Primary Health Care Nursing Week. She sees it as an important campaign to raise awareness of the current and potential contribution of CPHC nursing to the health care system, and to highlight its impact on the wellbeing of individuals in local communities.

Kate and Rob are already planning to build on this worthwhile event for next year.
More than just weighing babies...

September 2016 marks my one year anniversary as a child and family health nurse. A year full of new, challenging, inspirational, emotional and reflective moments when I had the privilege of being invited into the lives of the families we work with. This has reinforced the impact that we as child and family health nurses can have on the community we partner with. It is a privilege to be able to empower and build the confidence of parents and carers as they bond, nurture and raise children through the first five crucial years of their growth and development.

Making the transition from acute care hospital nursing to the community and primary health care arena of child and family health nursing has been one of the greatest transitions of my twenty-year professional nursing career. This transition was made possible with the support of an amazing team of highly skilled, knowledgeable health care professionals, that I have the privilege to call not only my colleagues but my friends.

There is no typical ‘day in the life’ of a child and family health nurse. The first contact a family has with the child and family health service is often when we visit for their Universal Health Home Visit, within two weeks after their baby is born. When we are invited into the homes of families, we see and explore some of the most intimate areas of their lives - their relationships, mental health, emotional wellbeing, personal childhood experiences, pregnancy, postnatal and birth experiences.

This contact with our service extends into our community-based clinics and Family Care Cottage, providing an ongoing opportunity to build relationships with families within our community.

By working in a professional, partnership-based model we are able to provide a safe, secure place for people to disclose and seek support during some of the most vulnerable times of their lives.

Recently when the mother of a six month old baby girl attended our Family Care Cottage for sleep and settling strategies she disclosed wanting to leave her verbally and emotionally abusive husband. After further exploration, we found out that she herself had been abused both emotionally and physically as a child. Now having had her own daughter, she did not want her daughter to experience the childhood she herself had experienced.

Attending our Family Care Cottage provided this mother with the reassurance that her baby was meeting all age appropriate developmental milestones by performing an age appropriate developmental assessment. We were also able to provide the appropriate advice and referrals to empower this woman to make positive changes to her domestic situation that had the potential to escalate and negatively disrupt her child’s right to grow and develop in a safe, secure environment.

“By working in a professional, partnership-based model we are able to provide a safe, secure place for people to disclose and seek support during some of the most vulnerable times of their lives.”
ACN EMERGING NURSE LEADER program

ACN’s new and improved Emerging Nurse Leader (ENL) program empowers current and future nurse leaders to achieve their goals and aspirations through personal and professional development.

This prestigious program will raise participants’ profiles as high achieving nurse leaders and allow them to enhance their confidence, develop their leadership skills and establish a strong career foundation. Emerging Nurse Leaders are provided with the tools to succeed, including access to webinars, workshops and the National Nursing Forum, ACN membership and personalised mentoring.

The enhanced ENL program is divided into five stages reflecting the challenges and opportunities nurses face as they progress through their leadership journey. Each stage runs for a period of nine months and applications must be made separately for each stage. The different stages cater for a range of early career nurses, from students completing a Bachelor of Nursing, Nursing Masters or Nursing Honours year to Registered Nurses with up to six years of experience.

The 2017 ENL program will run from 1 February – 31 October. Applications are open to ACN members and non-members and close on 7 November 2016. For more information and to apply visit www.acn.edu.au/enl or contact engagement@acn.edu.au.

“Being selected to be part of the ENL program has changed my career direction and opened so many doors for me. I believe the recognition associated with this prestigious program contributed to me gaining the graduate position I wanted.”

ENL Sonya Wallace MACN

“The networks I have formed and the knowledge I have developed because of this program will be fundamental in enabling me to shape the future of Australian healthcare.”

ENL Jenyfer Joy MACN

NEW

Empowerment through LEARNING, GROWING, REACHING, ACHIEVING and LEADING

- Are you a high achiever?
- Do you want to take the lead and make a difference?
- Are you driven to advance your career?
- Do you want to be an exceptional nurse?

THEN YOU SHOULD BE ONE OF ACN’S EMERGING NURSE LEADERS!

1. Empowered to LEARN
2. Empowered to GROW
3. Empowered to REACH
4. Empowered to ACHIEVE
5. Empowered to LEAD
ACN’s Emerging Nurse Leader (ENL) program recognises leadership demonstrated by high achievers in the Australian nursing profession. These individuals are driven to take the lead and make a difference wherever they are, from the point of care to national policy. They are proud members of the nursing profession and passionate about advancing nursing to improve health care outcomes.

Evan Casella MACN is an ACN Emerging Nurse Leader from our 2014 Cohort. Evan is a registered nurse who works in the busy emergency department in a hospital in Cairns. He is currently undertaking postgraduate studies to specialise within the emergency team. Ultimately, Evan would like to expand his scope of practice with further studies in disaster management and public health.

What led you to apply for the ENL program?
It was quite a coincidence actually - I didn’t even know the program existed until I meet with a group of ENL students at a nursing conference. Once I heard what they were doing - it just sounded out of this world - I decided that I wanted to be a part of it. I’d never thought that such a program could exist! My interest was sparked from that point on, and I investigated a little bit more before applying.

What are your aspirations for the future of nursing?
My aspirations are for the advancement of nursing practice. I also want to change the perception of what nurses are capable of. Due to a number of historical factors, social issues and so on, nurses are held back, with regards to what they can actually achieve.

If I can develop my own practice and lead by example in advancing the practice of nurses, that would be a great personal achievement.

How has the ENL program inspired you to make a difference?
The ENL program first opened my eyes to how big and sophisticated the nursing profession is as a whole. Being a person who has lived in Cairns most of their life, I had no idea there were large organisations representing nurses, both here in Australia and internationally.

Through this program I have had the opportunity to meet the people who work for these organisations and see what they were doing. For example, I’ve been able to meet Dr Rosemary Bryant AO FACN on a few occasions and hear what she has been doing around the world, which has been so inspiring.

How has the ENL program helped you achieve professionally?
I really enjoy writing and the ENL program has helped me to publish numerous articles. I have had the opportunity to publish articles in magazines and also in scientific journals. As a third-year nursing student, I published something in a peer-reviewed scientific journal, which is just an incredible achievement and quite humbling.

I was also able to co-facilitate an entire research project looking into the health effects of cyclones up here in far north Queensland. There has also been numerous presentations, and networking opportunities throughout the program.

What are your words of wisdom for people thinking about applying for the ENL program?
Don’t be afraid to dream big and articulate this dream in your application because that’s where the magic happens.

EDITOR’S NOTE
The ENL program is designed to develop skills, build confidence and provide opportunities for nurses to represent the nursing profession as leaders. Individuals who are keen to advance their nursing career, and strengthen their leadership potential, are encouraged to apply for the program. Visit our website for more information.

Are you an RMIT Nursing alumnus?
RMIT Nursing turns 40 next year. If you graduated from RMIT connect with us.
Keep your details up to date and stay informed about the latest news, special events, networking, volunteering and professional development opportunities.

> Email jane.mills@rmit.edu.au to update your details.

www.rmit.edu.au
Nurse informatics is emerging as an exciting nursing specialty. Nurse Informaticists liaise between health care IT professionals and clinical care teams, when merging nursing theory with health care specific information technology. Their expertise is valued, as the health system transitions towards electronic support systems for clinical care, best practice care planning and electronic health records.

Michelle Troseth MSN RN DPNAP FAAN, Chief Professional Practice Officer of Elsevier Clinical Solutions, is an outstanding American nurse leader and informaticist. Along with fulfilling the role of President Elect of the National Academies of Practice (2015-2016) and the American Academy of Nursing Co-chair of the Expert Panel of Informatics and Technology (2016), Michelle presents widely on the topic of nurse informatics. Michelle has been instrumental in raising the profile of nurses within multidisciplinary health care informatics working parties and is a staunch advocate for nursing research and evidence-based practice.

Last month, Michelle briefed ACN Members and Fellows on the most effective ways to harness health information technology in order to improve quality and efficiencies in health care. Throughout her presentation, Michelle utilised two case studies to highlight the impact on patient outcomes arising from health professionals not ‘getting it right’ and the necessity to have access to evidence-based information and refined medical histories.

The first was a woman diagnosed with Guillain Barre Syndrome, whom Michelle cared for as a newly graduated registered nurse. The second, was a young family involved in a serious car accident, which left the young mother-of-two an incomplete paraplegic and her husband with an acquired brain injury. In both cases, these women advocated strongly for best practice standards to be applied to their cases and deplored the care fragmentation (the need for relentless explanations and paperwork) as they traversed the American health care system.

Michelle argued that care fragmentation continues to occur in America, as in Australia, because of ‘system silos’. Silos result in poor care coordination, multiple handovers, patient safety concerns and inconsistent care standards. Informatics enables shareable and comparable research data to be integrated into practice, thereby contributing to system efficiencies and healthy work cultures.

Nursing informatics is already evident in Australia, with postgraduate courses available in this specialty. Organisations such as, Nursing Informatics Australia exist to educate nurses and midwives, and promote adoption of the language, research data and resources required, to provide evidence-based, cost-effective, outcome-driven care for patients and clients.

Michelle’s work helps determine the most effective ways to combine research evidence with clinical expertise, patient values and preferences in order to develop electronic, individualised, evidence-based care plans. Michelle reinforced the delicate balance existing between technology and practice, with reference to a Polarity Management Map. Polarity management maps graphically illustrate paradoxes and dilemmas, technology and practice, and sustainable and unsustainable transformation.

Ongoing integration of informatics into the Australian health care system requires strategic planning and the development of workforce competency. Actions required to progress this include: ensuring users understand the purpose and functionality of technology tools, and allocating time for education and interdisciplinary transformation work to be undertaken.
ACN launches White Paper at Parliamentary Breakfast

ACN held a Parliamentary Breakfast for the launch of our Nurses are Essential in Health and Aged Care Reform White Paper on Tuesday 11 October in Mural Hall, Parliament House.

ACN was honoured to have distinguished Members of Parliament attend and speak at the launch. It was a privilege to have The Hon Malcolm Turnbull MP, Prime Minister of Australia, The Hon Sussan Ley MP, Minister for Health and Aged Care, Minister for Sport, Dr David Gillespie MP, Assistant Minister for Rural Health, The Hon Catherine King MP, Shadow Minister for Health and Medicare, The Hon Julie Collins MP, Shadow Minister for Ageing and Mental Health, and Senator Richard Di Natale, Leader of the Australian Greens, in attendance at this highly anticipated event.

The event was also attended by key nursing leaders, industry CEO’s and academics from the health profession. ACN is honoured that Adjunct Professor Debra Thoms FACN DLF, Commonwealth Chief Nursing and Midwifery Officer, attended our Parliamentary Breakfast.

ACN CEO Adjunct Professor Kylie Ward FACN, said, “This is an exciting journey not only for ACN but for the nursing profession, a point reiterated by Prime Minister Turnbull who spoke of the important role nurses play in the delivery of patient centred care and how the utilisation of the nursing workforce needs to be strengthened.”

“Prime Minister spoke highly of the White Paper and has encouraged everyone at the launch to take the opportunity to read it. ACN is encouraged that the Prime Minister recognises that coordinated national action is needed and that the Government understands the value nurses can bring to the policy discussion.”

The Nurses are Essential in Health and Aged Care Reform White Paper focuses on the following key points:

- With a workforce of 360,000, the nursing profession is ideally placed to drive health reform in Australia.
- Ensuring the nursing voice is heard in strategic policy debates and reform developments.
- The pursuit of improved access, quality and sustainable health and aged care will only be possible if nurses are supported to allow them to work to their full scope, and expanded scope where necessary.
- Investing in nursing leadership to support systems of mentoring, professional development, resilience and capacity building.

Following the launch of our White Paper, ACN looks forward to working collaboratively with the Australian Government to understand the positive impact nurses make to Australia’s health system on a daily basis.

ACN will work with the Government to influence policy and play a role in reshaping the health care of Australians.

Visit our website to access our Nurses are Essential in Health and Aged Care Reform White Paper.

Photos: ACN Members, Fellows, VIP guests and parliamentarians at the launch of our Nurses are Essential in Health and Aged Care Reform White Paper.
Nurses performing the remarkable in the AOD sector: a consumer perspective

By a registered nurse and health care consumer

There have been times in my life when I hit rock bottom. Years of experiencing domestic violence and the suicide of my mother led me to drug and alcohol use. I knew when I lost custody of my six year-old son that my life had completely spun out of control. I had become a drug and alcohol addict.

It was a loyal friend who insisted I go to a hospital detox clinic and get ‘clean’. It was a hard seven days, both physically and mentally. I really had to push myself and wouldn’t have been able to do it without the support of staff, especially the nurses. They knew the right things to say to get me through. They had dealt with many clients like me in the past, so I suppose they were familiar with my case and I was nothing out-of-the-ordinary.

After finishing my detox program, I was picked up by a worker from the drug and alcohol rehab. I felt very nervous. In fact, I can’t remember ever feeling that nervous before in my life. The worker was very calm and friendly and gave me a sense of reassurance that it was all going to be okay.

Shortly after arriving at the rehab I was assigned a ‘buddy’ who showed me the ropes and helped me settle in. It definitely felt restrictive having to give up my mobile phone and wallet. I felt trapped. There was a part of me that already resented being there. I kept saying to myself, “this better be worth it”. I kept hearing from the other residents in the program that “rehab is hard” and to “take it one day at a time”. This was easier said than done, however. We had set times for daily routines, which was a real struggle to get used to after being an addict who lived from one day to the next. The only daily routine during that phase of my life was ensuring a reliable supply of drugs made it into my possession. If that was achieved, then the day’s objective had been met.

I remember the nurse at the rehab, she was wonderful. She managed our medication and was in regular contact with the pharmacy where I went for my daily methadone dose. The pharmacist was always welcoming and got to know all of us quite well. We asked him about his weekends and his family. He asked us about how we were going. It was always good to have a small outing every day, as apart from that we were almost exclusively in rehab 24/7.

I remember injuring my ankle from playing sport and the nurse attended to me quickly. She was always there for us, to help out with all sorts of injuries. She did so much more than just look after our physical health though. She was always good to talk to, always willing to listen and best of all was that she was non-judgemental. I had my case manager and counsellor there too. They knew what they were doing but often the nurse gave a different perspective that I really valued.

A recent Australian Institute of Health and Welfare (AIHW) report (2016) showed that 1 in 200 people in the general Australian population received alcohol and other drug (AOD) treatment in 2014-15. During the 14 months of being in rehab, I saw so many people come and go - I must have counted close to 80 people. At times it felt like a ‘revolving door’. Therefore, I am not surprised by the figure presented by AIHW.

It was disturbing to watch a recent episode of Four Corners on ABC television which showed the extraordinary lengths some families have to go through to get their loved ones into rehab (Australian Broadcasting Corporation 2016). I went through a government-funded rehab and can vouch for the services on offer. Every resident could see that there were budget constraints but everyone did the best with what was provided. The staff were dedicated, passionate, respectful and knowledgeable, and some of them had been in the same situation as me at one point in their lives. Funding rehabs is vital as it helps desperate individuals get their life on track and helps many more people than just those who are in the program. Whole families benefit and the community is better off with well-resourced and adequately funded rehabs.

I now work in the health care sector after completing my Diploma of Nursing. I think back to the nurse who helped me so much and that inspires me to be the best nurse that I can be for my patients. I can honestly say that the nurse at the rehab made a big difference to my mental and physical health, and ultimately to my life.

References


THE NATIONAL NURSING FORUM

THE POWER OF NOW

Melbourne Park Function Centre

26–28 October 2016

Held at the Melbourne Park Function Centre over three days, from 26–28 October 2016, the National Nursing Forum informed and inspired delegates through exceptional keynote speeches, concurrent sessions and masterclasses.

This year the Forum incorporated our inaugural Speed Leading Session for the first time, giving delegates unprecedented direct access to senior nurse executives, clinicians and academics who shared their advice and experience.

We are honoured that the Investiture of ACN Distinguished Life Fellows, Honorary Fellows and Fellows was presented by The Hon Sussan Ley MP, Federal Minister for Health, Aged Care and Sport.

A large number of exhibitors also travelled from far and wide to meet delegates at this event. We were especially excited that representatives of the Spanish General Council of Nursing made the trip all the way from Europe.

We love mingling with our delegates and were excited to hold a social event on each night. The social highlight of the Forum, the Gala Dinner, gave us all an excuse to frock up and enjoy a fun night surrounded by dynamic nurses from across the country.

Visit our Facebook page or website to find out more about this year’s Forum!
Registration standard: Recency of Practice

The Nursing and Midwifery Board of Australia’s (NMBA) Registration standard: Recency of practice requires nurses and midwives to maintain an adequate connection with, and recent practice in, their profession/s.

Practice means any role, whether you get paid or not, in which you use your skills and knowledge as a nurse and/or midwife. Practice doesn’t just mean direct clinical care, it can also include using your professional knowledge in non-clinical roles like research, administration, policy or any other roles that impact on nursing and midwifery services.

Nurses and midwives in Australia need to practise for a period equivalent to a minimum of 450 hours, within the past five years, to meet the recency of practice standard. These hours don’t need to be continuous, they can be accumulated over the five years.

If you’re audited by the Australian Health Practitioner Regulation Agency (AHPRA) on behalf of the NMBA, you’ll need to provide evidence that you have practised for a period equivalent to a minimum of 450 hours, within the past five years. The types of evidence you can provide include:

- a service statement from your employer;
- pay slips;
- income statement for the year, and
- other documents showing the hours and dates that you worked.

If you are a nurse and a midwife, you need to be able to show that you have practised for the equivalent of 450 hours in nursing and the equivalent of 450 hours in midwifery, over the past five years. However, if you consider an aspect of your work could provide evidence for both nursing and midwifery practice, you may make a case for that. An example of this could be caring for infants in a special care nursery.

If you hold an endorsement, you need to maintain recency of practice relevant to that endorsement. You will need to declare annually that you have practised for the equivalent of 450 hours relevant to your endorsement over the past five years.

If you have not worked sufficient hours over the past five years to meet the recency of practice standard, you need to contact the AHPRA office in your state or territory to get advice about your individual circumstances.

You may be asked to successfully complete:

- supervised practice as approved by the NMBA, or
- a re-entry to practice program approved by the NMBA.

When considering changing roles or contexts of practice, it’s important to understand that while you may meet the recency of practice standard, you still may need to undertake further education or training for your new role. For example, if you are changing your role/context of practice from a non-clinical position to a clinical position, the NMBA would expect you (and your employer) to take steps to ensure you are competent and have the education and training to practise in your new clinical setting.

For more information

You can find the recency of practice standard on the NMBA website.