



australian nursing federation

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> Practice Nurse Campaign

ANF has served claims and invitations to bargain to selected medical practices and clinics in New South Wales, Victoria and Tasmania. These employers, a combination of corporate and stand alone facilities, have each been asked to respond to the terms of the claim and indicate whether they are prepared to reach a collective agreement with their practice nurse employees. In the absence of an acceptable response, it is expected that an application seeking low paid bargaining authorisations will be made later this year.

> Preservation of existing long service leave entitlements

On 17 June 2011, Fair Work Australia handed down a decision preserving the current long service leave entitlements previously contained in awards in Queensland and in New South Wales. The application was filed in response to aged care employers in both states claiming that nurses whose award conditions were transferred to the federal industrial arena as a result of the state referral process lost any long service leave entitlements were better than the relevant State Acts. The tribunal agreed with ANF that such entitlements should continue until at least 1 December 2014 or alternatively a national long service leave arrangement is legislated. A copy of this decision is available at <http://www.fwa.gov.au/decisionsigned/html/2011fwafb3732.htm>

> Medibank Health Solutions Division

Federal Office will shortly meet with Medibank to discuss the establishment of designated work groups across the various Medibank enterprises including tele-health, Health Solutions and Travel Doctor. Medibank falls under the Comcare legislation.

> Occupational Health and Safety laws

Harmonised occupational health and safety (OHS) laws agreed between the Commonwealth and States and Territories are currently being legislated by each jurisdiction and are due to take effect from 1 January 2012. These laws will replace the separate OHS schemes currently operating in each State and Territory and the Commonwealth scheme Comcare.

NSW and Queensland have already passed legislation to introduce the new laws, while SA, the ACT and the Commonwealth legislation are currently before their respective Parliaments. The other jurisdictions are expected to introduce their own legislation in coming months. The Commonwealth legislation, introduced in July, will mainly apply to Commonwealth public sector employers.

NSW has retained a watered down version of the right for unions to prosecute employers where the OHS regulator fails to act to ensure health and safety. This important right has been in NSW legislation for many years and has led to some significant improvements in health and safety, for example for bank employees. The agreed model laws did not include a right to union prosecution however the NSW opposition and minor parties combined to force amendments to retain a version of the right to prosecute.

> Labour mobility in the Pacific

ANF was invited, to represent the nursing and midwifery professions at the Commonwealth Foundation Regional Consultation held in Sydney recently.

The purpose of the regional consultation was to provide input into the draft communiqué that is to be provided to the Commonwealth Foreign Ministers at their meeting (the Commonwealth People's Forum) in New York on 22 September 2011 and to the Commonwealth Heads of Government Meeting (CHOGM) on 28-30 October 2011 in Perth.

Those present at the consultation were representatives of Pacific Island civil society organisations (CSOs) from Fiji, Tonga, Samoa, the Solomon Islands, Australia and New Zealand. The Department of Prime Minister and Cabinet were also represented.

The regional consultation was organised by the Commonwealth Foundation, in collaboration with the Pacific Islands Association of Non Government Organisations (PIANGO).

The meeting discussed and identified key issues affecting Pacific peoples in the areas of democratic governance, the environment, vulnerabilities of Small Island Developing States (SIDS), climate change, human rights, trade, gender, health, education and culture. Findings from the Eminent Persons Group (EPG) were reported on and delegates assessed the importance of civil society to the future of the Commonwealth. The meeting articulated ways in which Commonwealth institutions, governments and CSOs could effectively respond to the priority concerns of Pacific peoples.

Our role at this consultation was partly to raise the necessity for health issues, in particular the health workforce, to be given higher priority on the Commonwealth agenda. Of note, there were no health related themes proposed for the Commonwealth People's Forum. Obviously this is a major issue for Commonwealth accredited health organisations where health has such a low profile.

During the course of day two of the meeting, the ANF was able to raise the issues of nursing, midwifery and the health workforce. Commonwealth countries in Africa, South Asia, the Caribbean and the Pacific are struggling with a chronic shortage of nurses and midwives. This is compounded by the migration of nurses and midwives to more affluent countries.

Pacific Island CSOs expressed concern with the lack of priority, funding and access to acute and primary health care for people living in the small island states of the Pacific. The shortage of health workers was identified as an acute problem. Concerns were raised about the emigration of the skilled and unskilled workforce and the implications that this has on Pacific communities and the provision of essential services.

A call will be put forward by the Pacific CSOs to the Commonwealth Member States to hold tripartite annual meetings of Commonwealth Labour Ministers to discuss the role that labour mobility will play in broader development strategies that reflect the unique needs of each country.

> Nursing and Midwifery Stakeholder Reference Group meeting

The ANF Federal Office is a participant of the Nursing and Midwifery Stakeholder Reference Group which is convened by the Commonwealth Chief Nurse and Midwifery Officer. A meeting of the Group was held on 10 June 2011 in Canberra, with discussions primarily on the following issues: a general overview of Federal Budget 2011/12 measures relating to health and education; Federal Budget 2011/12 initiatives which are specifically targeted to aged care; nursing and midwifery registration; and, nursing and midwifery workforce strategy, particularly relating to the primary health care workforce.



> National Rural Health Alliance

The NRHA Council met on Thursday 16 June 2011 via teleconference. The 31 national organisations in the Alliance work collaboratively to improve the health and wellbeing of people in Australia's rural and remote areas. Issues for discussion at the June meeting of Council included: plans for the annual face to face meeting of Council (Councilfest) in Canberra in September; follow up on the 11th National Rural Health Conference recommendations; the watching brief on the National Rural Health Plan and Regional Development Australia Committees and Plans; engagement with Health Workforce Australia; latest developments with Medicare Locals; and a range of requests for support and applications for alliance membership. The next meeting of Council will be held on Monday 15 August 2011.

> Fifth Community Pharmacy Agreement Programs Reference Group

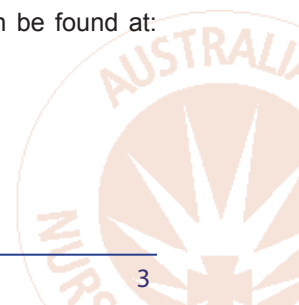
The PRG meeting for the Fifth Community Pharmacy Agreement (5CPA) was held in Canberra on Friday 17 June 2011. The Fifth Agreement between the Australian Government and the Pharmacy Guild of Australia commenced on 1 July 2010. Julianne Bryce, ANF Senior Federal Professional Officer, was nominated by the ANF and invited by the Minister for Health and Ageing to serve as a member of the PRG representing nursing and allied health until 30 June 2015. The PRG consists of a number of representatives from peak groups and experts, both within and external to the pharmacy sector. The role of the group is to provide advice on the policy dimensions of the pharmacy programs, including their scope and evaluation requirements. Issues for discussion at the June meeting included: 5CPA Medication Management Programs, the Home Medicines Review Program and the 5CPA Evaluation Framework. The next two PRG meetings for this year will be held on 1 September and 11 November 2011.

> Australian Commission on Safety and Quality in Health Care (ACSQHC) Health Service Medication Expert Advisory Group (HSMEAG)

The Australian Commission for Safety and Quality in Health Care (ACSQHC) Health Service Medication Expert Advisory Committee (HSMEAG) met in Adelaide on Friday 24 June 2011. This national committee was previously known as the National Inpatient Medicines Chart (NIMC) Oversight Committee. The change of name and terms of reference reflects the enlarged scope of work undertaken by this committee. The role of this committee encompasses advising on health service-based medication standardisation initiatives as well as on health service-based medication safety and quality. Issues for consideration and discussion at the June meeting included: the charting of nutritional supplements and enteral feeds; the Venous Thromboembolism (VTE) Pilot; requested NIMC versions/amendments; the NIMC 2011 National Audit; the hospital to RACF interim medication chart; medication safety alerts; labelling recommendations; the High 5s Concentrated Injectable Medicines Project; the NIMC Audit System; the NIMC 2009 National Audit Report; and reports from other ACSQHC medication safety meetings. The HSMEAG will meet again on Friday 28 October 2011 in Adelaide.

> Expert Panel Consultation Forum on National standards for elective surgery and emergency departments

An expert panel is currently involved in reviewing the implementation of the elective surgery and emergency service targets which form part of the Federal Government's reform agenda. The ANF Federal Office was invited to attend a consultation forum held in Canberra on 8 June 2011 to meet with the Panel members and receive an update of work to date on the reform initiative. The ANF has an interest in the development of national standards for elective surgery and emergency departments as our members will naturally be involved, wherever these initiatives are implemented. Following the forum, the ANF submitted a letter response to the Panel. Information on the membership and work of the Expert Panel can be found at: www.yourhealth.gov.au.



> **HWA: Expert Reference Group (Nursing and Midwifery) Short term Employment Demand Project**

Health Workforce Australia (HWA) commissioned KPMG to undertake a project to develop a national approach to the management of employment demand for 2012 arising from increasing medical and nursing graduate numbers for 2012. ANF participated as a member of the Expert Reference Group (ERG) convened for two meetings to advise the consultants and HWA. The ERG met in Melbourne for a half day face to face meeting on Thursday 2 June 2011. The aim of the project was to review and analyse the size, scope and dimensions of the employment demand for medical interns and graduate nurses and develop solutions to address capacity issues. The ANF is aware that in excess of 2,300 newly graduated nurses did not get immediate employment in the health sector last year. A range of strategies are needed to address this issue. More funded and supported transition to practice programs offered across a range of practice settings and geographical areas are required.

> **HWA: Consultation workshop on the National Training Plan for Residential and Community Aged Care**

The ANF Federal Office Professional Team was represented at the National Training Plan (NTP) Residential and Community Aged Care workshop in Sydney on Wednesday 8 June 2011. Health Workforce Australia (HWA) presented on the recent workforce supply and demand trends and the NTP model inputs, assumptions and data sources. Early workforce projection estimates were provided as a basis for discussion. Participants were asked whether the baseline projections for the health professions being modelled in the NTP represent a true picture of Australia's workforce requirements and what the limitations were of modelling health workforce requirements in aged care with allied health professionals not in the scope. Workshop participants undertook to identify and specify a limited number of alternative (or 'what if') scenarios for further projection work. Feedback from the range of NTP Consultation Workshops will be presented to the HWA NTP Governance Committee at their next meeting scheduled to be held in Melbourne on Thursday 21 July 2011.

> **HWA: Consultation workshop on the National Training Plan for Nurses and Midwives**

Federal Office representatives attended the consultation workshop on 16 June 2011 in Melbourne which outlined preliminary work on the National Training Plan for Nurses and Midwives. The national database which is now available through the National Registration and Accreditation Scheme (NRAS) is a major building block for the training plan. The information for the national database comes from the labour force survey which nurses and midwives complete at time of registration renewal. Completing the survey is voluntary and falling rates of completion amongst nurses and midwives diminishes the reliability of the data being used for workforce planning purposes. The ANF will join with other nursing and midwifery organisations to highlight the importance of every registrant completing the on-line survey form to improve the national collection of information on our professions. An overview of the National Training Plan can be found at: www.hwa.gov.au.

> **AGPN Medicare Locals National Stakeholder Consultation Roundtable Forum**

The Federal Office Professional Team was represented at the Australian General Practice Network (AGPN) Roundtable Forum on Medicare Locals (MLs) held on Wednesday 29 June 2011 in Canberra. There were 96 participants in attendance. The aim of the roundtable was to inform national organisations of the vision for MLs; the value for national organisations and their members of engagement; and to identify opportunities for engagement in the development and operation of MLs. A series of information sessions, panel discussions and a partnerships case study were provided, followed by group work to identify and discuss the barriers that may arise and ideas and actions required to facilitate effective engagement. The groups reported back with a focus on collective actions and recommendations.



> Rural Health Workforce Australia

On 3 June 2011 the CEO of Rural Health Workforce Australia (RHWA), Kim Webber, met with Federal Office Professional Team staff to outline a current Department of Health and Ageing funded project being undertaken by RHWA. This project, known as the Rural Health Professionals Program (RHPP) is a “new national program designed to recruit more nurses and allied health professionals into rural and remote areas”. The stated outcome is to “improve the health of people in rural and regional communities by increasing their access to primary health care professionals”. Support services will be put in place to help with the retention of health professionals in rural and remote settings. Discussions with RHWA included feedback from ANF members on issues relating to recruitment and support requirements for relocating to, and working in, rural and remote areas, such as: relocation costs, secure housing, release from the workplace for professional development and personal time out, and the ability to rotate out to regional or metropolitan centres for clinical updates. The ANF also pointed out that there needs to be a broader approach taken to considering how places can be developed and supported for newly graduating nurses and midwives, in rural and remote health settings. RHWA will deliver this program in partnership with the state and territory Rural Workforce Agencies. More information on RHWA and the program can be found at: www.rhwa.org.au.

> Lead Clinicians Groups Consultations

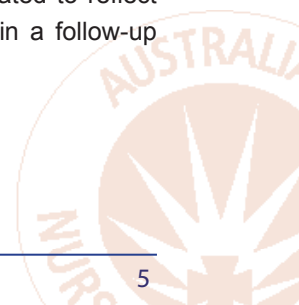
The Federal Office Professional Officers met with Tony Sherbon, Deputy Chief Executive Officer, Health Reform Transition Office, via telephone, on 15 June 2011. The purpose of the meeting was to discuss the Department of Health and Ageing’s current program on developing Lead Clinicians Groups. The ANF had made a submission to the Australian Government’s discussion paper on *Lead Clinicians Groups: Enhancing clinical engagement in Australia’s health system* in February of this year. This consultation found that overall stakeholders were supportive of the idea of local Lead Clinicians Groups spanning the ‘gap’ between Local Hospital Networks and Medicare Locals. Principle points of discussion in the meeting were: the national lead clinicians group, local lead clinicians groups, and recruitment of clinicians to the groups. The ANF provided advice on these issues and followed up with a written response. More information on this program can be found at: www.yourhealth.gov.au.

> Medication Management in Residential Aged Care Facilities Project

A team from Australian’s Health Pty Ltd has been funded by the Department of Health and Ageing to undertake the Medication Management in Residential Aged Care Facilities Project. Essentially the project will develop:

- a revised version of the *Guidelines for Medication Management in Residential Aged Care Facilities*;
- a plain language Summary which explains the implications of the Guidelines for consumers (residents) and carers (family, friends or advocates who support the consumer (resident));
- an implementation and education strategy for the revised Guidelines and plain language summary.

The Federal Office Professional Officers spent over an hour meeting with the Project consultants via telephone, working through a broad range of questions about the *Guidelines for Medication Management in Residential Aged Care Facilities* document. The ANF welcomes this Project as we have been reviewing the *Nursing Guidelines for the Management of Medicines in Aged Care* document, which is currently embedded in the document being reviewed by the consultants. ANF members who work in the aged care sector inform us that the nursing guidelines are regularly referred to in their daily practice. It is critical that this important reference source on medicines management, last reviewed in 2002, is updated to reflect current legislation and evidence based policy. The ANF will be providing written advice in a follow-up submission to the Project team by mid July.



> Working Safe in Rural and Remote Australia Project

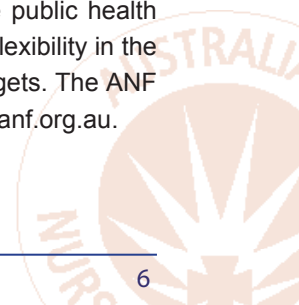
In October 2010, the Rural Doctors Association of Australia (RDAA), the Australian College of Rural and Remote Medicine (ACCRM), the Police Federation of Australia, the Queensland Teacher's Union, CRAN*Aplus* and the ANF submitted a funding proposal to the Australian Government to conduct the Working Safe in Rural and Remote Australia project. RDAA, on behalf of the above mentioned organisations, has received funding from the Department of Health and Ageing (DoHA) to conduct Stage 1 of the Project. The project aim is to establish a national framework for building safer workplaces for people delivering key services in rural and remote Australia. The first meeting of the Project Steering Committee was held on Tuesday 21 June 2011 by teleconference to discuss project governance, the work plan and the process of selection of a contractor. The next teleconference meeting of this group is scheduled for Wednesday 6 July 2011.

> National standards for elective surgery and emergency departments

The ANF has provided written advice to the work of the Expert Panel charged with reviewing the implementation of elective surgery and emergency service targets as part of the Australian Government's health reform agenda. The development of national standards for elective surgery and emergency departments aims to improve access to necessary health care by the community. The ANF is aware through our members that delayed access to appropriate and timely treatment, not only causes gross inconvenience for the public but in some cases has detrimental effects on quality of life and health outcomes. The ANF supports the proposed introduction of elective surgery and emergency department targets but with a caution around the manner in which this reform is implemented. That is, the targets should be seen as a tool by which to drive the initiative of providing greater access to care, and not as a punitive measure. The focus of these targets must be on:

- the overarching benefit to consumers of health care services in terms of greater access, more timely treatment, and therefore vastly improved outcomes of care;
- benefits to staff in terms of improved working conditions with improved patient movement through the system;
- building capacity within staffing structures for beginning and sustainable ability to meet the targets. This will include attention to skills mix and adequate numbers of staff for the work required. The ANF contends that Nurse Practitioners are effectively contributing to patient flows in emergency departments. Facilities across the country should invest in the provision of such positions and in financially supporting experienced emergency nurses to attain this level of practice qualification;
- investment in building and material infrastructure (including information technology), especially in emergency departments where this does not currently exist, to facilitate improved patient care outcomes (examples include purpose built areas for the very young or the elderly, which have been instituted in some facilities);
- involvement of all levels of nursing, medical, allied health and bookings clerk staff, as well as the community, in the local level implementation, monitoring and evaluation of the initiatives. Engagement of the major every day players – nursing and medical colleagues – is critical to the acceptance of, and commitment to, the success of local implementation;
- improved staff satisfaction from knowing that they are able to deliver quality care to the community; and
- ensuring measures and targets are genuine to give staff a greater sense that the aim of the process is continuous quality improvement.

While the ANF endorses the introduction of processes which drive improvement, we have stressed in our response that we cannot support a system of targets which has perverse incentives. The public health care system bears the brunt of responding to unpredictable demand. There must be inbuilt flexibility in the new system to accommodate the many variables encountered in attempting to meet the targets. The ANF submission is available from the Federal Office website under 'Submissions' at: <http://www.anf.org.au>.



> Lead Clinicians Groups Consultations

The ANF Federal Office has reviewed the latest discussion paper from the Department of Health and Ageing on *National Health Reform: Lead Clinicians Groups* and provided additional advice to the development of this reform. Given comments in our previous submission the ANF was pleased to see that the work of the National Health and Medical Research Council (NHMRC) and the Australian Commission on Safety and Quality in Health Care (ACSQHC) will be firmly embedded in the new Lead Clinicians Groups structure. The inclusion of the Chief Executive Officers of these national bodies on the National Lead Clinicians Group will provide essential synergy in the workplans of all three groups in relation to clinical standards. Inclusion of the Commonwealth Chief Nurse and Midwifery Officer will provide a vital link with national level nursing and midwifery professional issues. Having requested in our previous submission the retention of State and Territory based mechanisms for clinician engagement where these are working well, the ANF was pleased to see that these structures will be used as starting points for the formation of Local Lead Clinicians Groups (LLCGs). Further, the ANFs concerns around the membership of these groups in some States or Territories is being addressed by a requirement for inclusion of a range of health professionals on the LLCGs. The ANF submission is available from the Federal Office website under 'Submissions' at: www.anf.org.au.

> Consultation on draft CDNA Guidelines for Health Care Workers with Blood Borne Viruses

Federal Office responded to the invitation from the Communicable Diseases Network Australia (CDNA) to participate in the consultation process for the draft *Australian National Guidelines for the Management of Health Care Workers known to be infected with Blood Borne Viruses*. The ANF had input into the previous revision process of the CDNAs 2005 *Guidelines for Managing Blood-Borne Virus Infection in Health Care Workers*, undertaken during 2009. The draft document provides clear guidance for health care workers who are infected with blood borne viruses and for employers of these workers. From a professional and industrial perspective the ANF agrees with the sentiments expressed in the statement under "Guiding principles" within the Executive Summary: *While the protection of the public's health is paramount, employers of HCWs should also consider, and comply with, relevant anti-discrimination, privacy, industrial relations and equal employment opportunity legislation*. Nurse and midwives, as regulated health professionals, are duty bound to protect the public. Concomitantly, in the performance of their roles, and especially where those roles have exposed them to contracting blood borne viruses, they must be able to expect full support from their employers (in all aspects of employment opportunities and in financing of treatment regimes). The ANF submission is available from the Federal Office website under 'Submissions' at: www.anf.org.au.

> NHMRC infection prevention and control resources

The National Health & Medical Research Council (NHMRC), in conjunction with the Department of Health and Ageing, is developing resources specific to the residential aged care and community care sectors. In a written submission the ANF has supported using the *Australian Infection Control Guidelines* as a base document for this resource. Additional information to these Guidelines is required however, to accommodate the uniqueness of residential aged care facilities and community home care, when compared with an acute hospital environment. Some of this difference relates to lowered immunity of those with multiple chronic conditions and infective organisms to which elderly people are particularly susceptible, and due to the creation of a home-like environment in residential facilities which brings frail, vulnerable older people into close proximity with each other. The submission also highlights reasons for a greater propensity for infections amongst the elderly in the community. The full submission can be found on the ANF website: www.anf.org.au under 'Submissions'.



> 2011 Professional Issues in Practice Conference: Our Professions in Focus

Federal Office was represented at the two day event: 2011 Professional Issues in Practice Conference: Our Professions in Focus, hosted by the ANF (Victorian Branch), 23 - 24 June 2011, at the Melbourne Convention Centre. Around 1,400 delegates were treated to presentations (both plenary and concurrent) on a wide range of clinical, professional, and occupational health and safety issues critical to nursing and midwifery practice. The conference was well supported by a host of trade exhibitors. Among these was our Federal Education Officer who was able to profile the ANF Federal Office on-line education programs, which many members visiting the booth had already accessed and found beneficial to their area of practice.



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LEE THOMAS
Federal Secretary



A handwritten signature in black ink that reads "Yvonne".

YVONNE CHAPERON
Assistant Federal Secretary

For more information about any of the above items contact your ANF state or territory Branch, the NSW Nurses Association (ANF NSW Branch) or the Queensland Nurses Union (ANF QLD Branch).