



# australian nursing federation

national news - november 2010

## > Collaborative arrangements for nurse practitioners and eligible midwives

From 1 November 2010 clients who are treated by nurse practitioners or eligible midwives will have access to MBS and PBS. There have however been some issues in the lead up to the commencement date as a range of midwifery groups called on The Greens to disallow the legislation on the basis they believed midwives would be unable to negotiate collaborative arrangements with General Practitioners and or Obstetricians.

The ANF, ACM, CRAN*plus* and Childbirth Australia did not support the disallowance of the legislation but rather preferred to wait until after the commencement and then if there were issues that needed to be resolved, and armed with the necessary evidence, negotiate an outcome that would see changes made as needed.

## > Application to vary the award provision for public holidays

As a consequence of Christmas Day falling on a Saturday this year an application to vary the nurses award to ensure that nurses who work on Christmas Day are paid public holiday penalties has been filed with Fair Work Australia. The proposed variation is set out below

*"If Christmas Day falls on a Saturday or Sunday and by force of the NES a substitute day is observed as a public holiday, a full-time or part-time employee will be paid a loading of 50% of their ordinary rate of pay in addition to the Saturday/Sunday rate for all ordinary hours worked on 25 December with a minimum of four hours pay. Such employee will also be entitled to the benefit of the substituted public holiday."*

It is expected that the application will be dealt with by the tribunal within the next few weeks.

## > LHMU/AWU low paid bargaining application hearings to commence

The LHMU/AWU low paid bargaining applications in respect to aged care employers in WA, SA, NT, ACT and QLD are scheduled for initial hearing in Sydney for a week commencing 22 November. ANF has sought to intervene and will attend the Sydney hearings. A number of peak employer bodies have also intervened in opposition to the applications. Employer submissions and witness evidence is available at <http://ww2.fwa.gov.au/s243/>

## > Coalition of National Nursing Organisations (CoNNO)

CoNNO held its second meeting for the year in Sydney on Friday 8 October. Topics for discussion were nursing workforce, national registration and accreditation and e-health. Invited speakers included: Professor Mary Chiarella, Board member of both Health Workforce Australia and the Nursing and Midwifery Board of Australia; Ms Anne Morrison, Chief Executive Officer of the Nursing and Midwifery Board of Australia; Ms Amanda Adrian, Chief Executive Officer of the Australian Nursing and Midwifery Council; and Ms Leonie Katekar and Ms Kathy Dallest from the Clinical Safety Unit of the National E-Health Transition Authority. It was the largest attendance to date at a CoNNO meeting with 45 people in attendance.

## > Australian Practice Nurses Association (APNA) CliPPboard Project Webinar Meeting

APNA formed an advisory committee for their Collaborative Policy and Procedures (CliPPboard) Project in February this year. This project aims to provide an online web 2.0 platform, and innovative training and marketing strategies to enable and encourage practice nurses to contribute to and

access best practice policies and procedures. A webinar was held on Monday 18 October to demonstrate the beta version of the portal prior to pilot testing which will commence later in the month.

> **National E-Health Transition Authority (NEHTA) / Coalition of National Nursing Organisations Nursing (CoNNO) Roundtable Meeting**

NEHTA, in conjunction with CoNNO is planning to hold a nursing roundtable meeting in Sydney on Thursday 11 November. A teleconference was held on Tuesday 19 October to commence planning for the meeting. The objectives of the roundtable are: to establish relationships, processes and mechanisms for two way communication and collaboration with the nursing profession in order to ensure that NEHTA e-Health products are fit for purpose from a nursing perspective; to identify benefits, barriers and solutions around collaboration and uptake of e-Health in nursing; and to identify specific opportunities and actions which will facilitate delivery of national e-Health solutions. Representatives from 24 national nursing organisations and peak nursing groups will be invited to participate in the roundtable meeting.

> **Health Workforce Australia (HWA) /Aged and Community Services of Australia Stakeholder Reference Group Medication Management Project**

Aged and Community Services of Australia have gained project funding from HWA to fully explore the range of medication management issues facing the aged care workforce and propose policy principles and initiatives to address these issues. The ANF was invited to participate as a member of the Stakeholder Reference Group for this project. The first meeting was held via teleconference on Thursday 21 October 2010. The project will be conducted in three stages: scoping/gap analysis; a national roundtable; and a change roadmap. It is proposed that this project will be completed by mid 2011.

> **Working for a healthier tomorrow in Australia and the United Kingdom**

The Senior Professional Officer attended a seminar by Professor Dame Carol Black held on Friday 29 October in Melbourne. Dame Carol led a major review of the health of the working age population – Working for a Healthier Tomorrow – calling for urgent and comprehensive reform and a new approach to health and work in Britain. In the seminar Dame Carol discussed the learnings from the UK review and the rollout of initiatives adopted by government. A Consensus statement on the Health Benefits of Work was tabled by the Australasian Faculty of Occupational and Environmental Medicine and Royal Australasian College of Physicians. These organisations are calling for signatories to the Statement.

> **National Press Club**

Federal Office staff attended the address by Ged Kearney in Canberra on Wednesday 6 October. In her first address to the National Press Club as ACTU President, Ged described a vision for the union movement seeking to build membership, improve capacity for campaigning and to broaden the union agenda. Ged also outlined three policy areas: job security, building communities, and the ageing population where the union movement has a special interest and will play a central role in developing a better and fairer nation.

> **Australian Commission on Safety and Quality in Health Care Medication Reconciliation Seminar**

The Australian Commission on Safety and Quality in Health Care conducted a one day national seminar to introduce the National Medication Management Plan form and accompanying resources on Monday 11 October 2010 in Sydney. The seminar provided a forum for participants to learn about current activities occurring in Australia that support the implementation of medication reconciliation in the hospital setting. The ANF Senior Federal Professional Officer participated as an invited member of a panel to discuss key learnings, work practices and challenges in relation to medication reconciliation.



## > Australian Commission on Safety and Quality in Healthcare

The ANF has responded to two consultation papers prepared by the Australian Commission on Safety and Quality in Healthcare (ACSQHC) as shown below:

### National Safety and Quality Health Service Standards

Earlier this year the ANF responded to consultation on draft Health Service Standards. As a result of that consultation process the Commission developed five additional standards as follows:

- Partnering for consumer engagement
- Blood and blood product safety
- Prevention and management of pressure ulcers
- Recognising and responding to clinical deterioration in acute health care
- Preventing falls and harm from falls

The ANF supports the inclusion of these additional standards and particularly pleased the Standard: *Partnering for Consumer Engagement*. The ANF has been a strong advocate for greater consumer participation in health and aged care planning and delivery and absolutely supports the notion that 'health systems are safer when consumers are involved in their design and delivery' and evaluation of those services. This includes consumer/community involvement at all levels of healthcare service planning and policy formulation, as well as participation of direct users of the services in providing evidence of the effectiveness of those services in terms of outcomes of care.

In its previous submission the ANF argued that there should be mandatory application of the NSQHS Standards across all health services, regardless of perceived risk. Unfortunately the latest draft NSQHS Standards document perpetuates a different approach for high risk and lower risk health care facilities. The ANF's response can be found at: [http://www.anf.org.au/html/publications\\_submissions.html](http://www.anf.org.au/html/publications_submissions.html)

### Patient Safety in Primary Health Care

In responding to the *Patient Safety in Primary Health Care* discussion paper the ANF noted that the notion of 'first level contact of individuals,

the family and community', as espoused in the international Declaration of Alma Ata, dovetails with accessibility to nursing and midwifery care as nurses and midwives practice across all geographic and socio-economic spheres.

The ANF's submission supports the view that there is a twofold benefit in embedding a well established primary health care sector within the country's approach to health care: reducing the demand on the acute sector while at the same time improving health outcomes and population health and well being.

As highlighted in the Commission's paper the ANF agrees that aspects of an effective primary health care system which will ensure a greater degree of patient safety are that it is: team based; accessible to all communities; culturally appropriate, involves community participation, is adequately funded to support the services needed to be delivered to meet the communities' health and aged care needs; supports the educational and on-going professional development requirements of the health care professional team; and is sustainable.

The ANF concluded that success of patient safety strategies and sustainability of the primary health care sector will be measured in terms of engagement and capacity building of both staff and communities, evidence of ownership by communities, and ability to demonstrate that both health care professionals and the community have access to the education and information required to effect positive outcomes of health and aged care. The ANF submission can be found at: [http://www.anf.org.au/html/publications\\_submissions.html](http://www.anf.org.au/html/publications_submissions.html)

## > Department of Veterans' Affairs (DVA)

As noted in last month's National News the Department of Veterans' Affairs received funding from the Australian Government for a *Preventable Admission and Improved Community Care Program* for a targeted group of veterans with particular chronic conditions. In addition to participating on the Clinical Reference Group for this program, the ANF has responded to the DVAs discussion document *Strengthening Primary and Community Care for Australia's Veterans Most at Risk*.

Likewise the ANF applauds the Australian Government for providing funding in the Federal Budget 2010/11 to enable the DVA to initiate a program which aims to improve care for veterans in their own homes thus preventing unnecessary admissions to hospital. The ANF supports the scope of the program in the first instance to the following chronic conditions: congestive heart failure, coronary artery disease, pneumonia, chronic obstructive pulmonary disease, and diabetes; and to other chronic conditions that result in a person being frequently admitted to a hospital, which could include mental health conditions.

The government's aim of making cost savings for tertiary care are acknowledged. However, the ANF considers the gains of preventing admissions or readmissions to hospital are not just measured in dollar savings terms but also the wellbeing of the veteran and their family. That is, there will be more humane benefits for the veterans through being able to remain in the familiar environment of their own home with ready access to the support of family and friends. In addition there are obvious patient safety benefits from being in their own environment which include reduction in falls due to familiarity of physical surroundings and less stress because they are amongst people who have intimate understanding of their specific complex care requirements and emotional, cultural and spiritual needs, as well as, and importantly, their medicines regimes.

The ANF has made specific comment to a range of issues relating to the program and these can be found in the response to the discussion paper at: [http://www.anf.org.au/html/publications\\_submissions.html](http://www.anf.org.au/html/publications_submissions.html)

#### > Simulated Learning Environments

The ANF received correspondence from Edith Cowan University seeking comment on a *Use of Simulated Learning Environments in Nursing Curricula Project*, and has subsequently provided comments as input to that Project.

The ANF has welcomed initiatives of recent times which have provided an improved funding base for clinical experience. The ANF has cautioned, however, that funding for clinical experience should not be channelled into simulated learning

environments (SLE) to the disadvantage of clinical placement funding.

The ANF submission stresses that when simulation is included in a student's professional experience it must be complementary and in addition to clinical placements in practice areas. The student can learn technically correct ways of doing things in a simulated environment but needs the practice area for learning and applying individualised communication skills, clinical judgement and intervention.

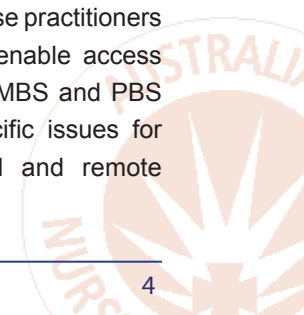
The establishment of SLEs for students of nursing and midwifery programs is supported by the ANF so long as these learning environments are not relied on as the primary clinical experience. That is, education providers and health and aged care service providers must continue to explore new and innovative areas for clinical placements, and work should continue on developing clinical/professorial development units (however titled) which foster a nexus between academe and the practice setting. This submission is found at: [http://www.anf.org.au/html/publications\\_submissions.html](http://www.anf.org.au/html/publications_submissions.html)

#### > 12th National Conference of the Congress of Aboriginal & Torres Strait Islander Nurses (CATSIN), 29 Sept -1 Oct: *Moving On...*

ANF Federal Office staff attended the CATSIN conference. Ms Marie Bashir, Governor of NSW represented the Governor General of the Commonwealth of Australia, Ms Quentin Bryce, who is the Patron of CATSIN, and officially opened the conference. As in previous years the conference provided an excellent forum for showcasing clinical and research work being undertaken by Aboriginal and Torres Strait Islander nurses, as well as work by other nurses and health professionals in Indigenous communities.

#### > Council of Remote Area Nurses: CRANaplus 2010 Conference, 13-16 Oct: *Remote health – we're out there...doing it, teaching it, supporting it and researching it.*

The Federal Secretary, Lee Thomas presented a paper on the new legislation for nurse practitioners and eligible midwives which will enable access for the recipients of their care to MBS and PBS funding. The paper outlined specific issues for those nurses practising in rural and remote



parts of the country. The presentation was well received and there was a commitment from CRANAPlus to continue to work closely with the ANF in the coming months to ensure that rural and remote nurses and midwives and their clients have the access to care that they need.

> **9<sup>th</sup> National Enrolled Nurses Association (NENA) annual conference: *Moving Mountains: Enrolled Nurses Effect Change***

Yvonne Chaperon, Assistant Federal Secretary, attended the NENA conference and gave an opening address. As NENA is a special interest group of the ANF, Federal Office provided support through Yvonne assisting with proceedings in the annual general meeting held during the conference.

> **Long Walk Women's Lunch, 8 October**

Some ANF Federal Office staff attended the annual Long Walk Women's Lunch in Melbourne. Proceeds from this lunch contribute to the work of projects set up specifically to assist Aboriginal and Torres Strait Islander women to learn new skills and thereby gain self-confidence, financial security and an on-going career. Attendance at this annual event fulfills part of the ANF Federal Office Reconciliation Action Plan, first developed and launched in 2007.

> **Royal College of Nursing Australia (RCNA) Community and Primary Health Care nursing Conference**

Yvonne Chaperon, Assistant Federal Secretary, delivered a paper on the licensing of Assistants in Nursing at the RCNA Community and Primary Health Care Nursing Conference in Alice Springs

> **60<sup>th</sup> Anniversary of the Nurses Memorial Centre**

Elizabeth Foley ANF professional officer joined with staff from the Victorian Branch of the ANF at a dinner on 20 October, to celebrate the 60th Anniversary of the Nurses Memorial Centre, in Melbourne. The dinner was well supported by nurses from across Victoria and interstate. The nurses who originally raised funds to set up the

Memorial Centre, including Vivian Bullwinkel and Betty Jeffrey, would have been pleased to see the numbers present at the dinner, and to know that the Centre was still being true to what they had declared 60 years ago "We shall kindle in your hearts a torch whose flame shall be eternal".

> **United Nurses of Alberta (UNA) annual delegates conference Edmonton Canada**

The Federal Secretary was invited to speak at the UNA delegate's conference regarding the ANFs successes in the Because We Care campaign. In Canada they have issues in their aged care sector (long term care) which includes no regulated staffing levels or skills mix, high demand for places and inability to move assessed as aged care residents out of public hospitals causing bed block. Aged care in Canada is funded by their Federal government, much the same as in Australia. At the conclusion of the presentation there was a commitment by the President of the UNA to discuss with the Canadian Federation of Nurses Unions (Canadian peak body for nurses) that there should be a national campaign in Canada to push for reform in the sector.

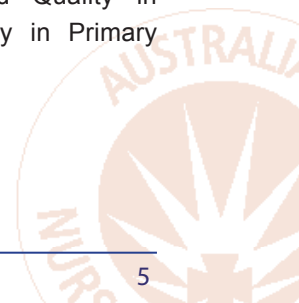
> **Political Meetings**

The Federal Secretary with other members of the federal office met with Nicola Roxon Minister for Health and Mark Butler Minister for Mental Health and Ageing to discuss the continuation of the Because We Care campaign (BWC) and associated aged care issues. Both meetings were the first since the last Federal election.

> **Submissions**

The below submissions were lodged by the Federal Office in October 2010 and are available on the ANF Federal Office website:

- Comments to Department of Veterans' Affairs in response to the Discussion Paper on Preventable Admissions and Improved Community Care Program
- Submission to consultation by the Australian Commission on Safety and Quality in Healthcare on Patient Safety in Primary Health Care



> *Because We Care* Campaign

The ANF Federal Office has been meeting with industry stakeholders and consumer groups around Australia with the intention of working together in both campaigning on the ground and to get an agreed position to take to the Federal Government. It is hoped that this will progress significantly before the Productivity Commission hearings in February 2011. There has been a positive response from most stakeholders to co-ordinate campaign activities at worksites and on key dates in the BWC campaign.

The National Day of Action will be February 14th 2011 and Branches have agreed to hold a range of activities in key federal seats and at worksites around Australia. Design concepts for the Valentine's Day 2011 activity are being progressed by the ANF Federal Office. We continue to work on the revamping of the BWC website

> Productivity Commission

ANF Federal Office filed the supplementary submission with the Productivity Commission and copies were distributed to all Branches for internal and external use. The supplementary submission will also be sent to key MP's and Senators that we meet with to provide background on the campaign, our objectives and activities we have undertaken. Each Branch agreed to hold activities outside each Productivity Commission hearing around Australia, expected to occur in February and March 2011. Branches will also identify members and participants who will give evidence at these hearings.

Federal Office has reviewed the list of key Minister's, MP's, Senators and seats to target as part of the BWC political strategy. This list has been distributed to all Branches. This discussions will continue regularly in the next six months which is expected to be very busy for the ANF Federal Office and the BWC campaign.



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

LEETHOMAS  
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).