

INFUSION

The Tasmanian nursing magazine for ANF Members

Nurses the heart of healthcare

also in this issue:
Poisons Guidelines
The Impact of National Registration Standards
Celebrating Nursing Graduates

2010
MARCH



Our new look



I ALWAYS ENJOY THE FANTASTIC ENTHUSIASM OF OUR NEW GRADUATES DURING THEIR ORIENTATION PERIOD. IT REMINDS ME OF THE REASONS WE ARE PASSIONATE ABOUT NURSING.

I AM ALSO AWARE OF THE VULNERABILITY OF THESE GRADUATES UPON THEIR LAUNCH INTO A NEW WORKING ENVIRONMENT.

As experienced nurses, you offer new grads a positive experience during this transition to practice; precepting, support, mentorship and more - in addition to your normal patient allocation. THANK YOU for all that you do to support the nurses of the future.

ANF is also pleased to launch our new look Infusion - more focused on what you as members and representatives are achieving. We are pleased that we have received applications from PCAs, who as invaluable members of the Aged Care Nursing teams are now eligible to join as members. ANF looks forward to offering targeted education for PCAs in order to continue to improve standards of care and a better, shared understanding of scope of practice.

2010 major private and public Enterprise Agreements have commenced, and despite an initial successful negotiation at Calvary with local management and employer representatives, head office has intervened and rejected the agreed package. This is in breach of all principles of good faith bargaining. Calvary members are understandably distressed by this intervention and are currently considering the next stage of the campaign strategy. Despite this setback, ANF is keen to improve relationships with all levels of

management, and has been meeting with the DHHS to look at improving consultation mechanisms.

There are some wonderful examples of working groups including ANF and management, jointly problem solving and achieving some great outcomes. The LGH has demonstrated the power of working together in a partnership through the DEM working group, addressing bed block and overcrowding. ANF and the DHHS are working to develop a learning package for nurses to improve understanding of the Nursing Hours per Patient Day (NHPPD) safe staffing model. Consultation has also commenced to develop guidelines for the administration of medications by PCAs in residential aged care settings. Best practice, quality care and patient safety are paramount considerations.

The State Election will be held this month and ANF will provide members with the position of each party on a range of issues affecting nurses and healthcare; to help you make an informed vote. As ANF will be negotiating an agreement for public sector nurses, this election will be vital in order for you to secure improvements to your working conditions.

"ANF would like to recognise the wonderful ongoing contributions all nurses make to our profession, through supporting not only new grads but an increasing number of undergraduate students whilst, at the same time, providing high quality role modelling and care for patients/clients. "

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Judy Arnol (second right) and Members at May Shaw



Spring Bay Medical Centre Member Harry Higgs

May Shaw Centre

A very enjoyable visit was conducted at the May Shaw Centre at Swansea where our enthusiastic work place rep, Judy Arnol and other members discussed their desire to jump into the new EBA as soon as possible within the legislative requirements. It is good to see this level of enthusiasm and ANF looks forward to putting together a great team for the negotiations later this year.

Mental Health Services:

Terms of reference are being developed for the Statewide and Mental Health Service Industrial Consultative Committee. The formation of this ICC will help in addressing matters of statewide significance or are unable to be resolved at a local level.

Workloads and staffing concerns are widespread in Community Mental Health and ANF encourages all Adult Community Mental Health nurses to come together to work on this issue with the support of the ANF. Remember the voice of the group is stronger than the voice of the individual. The Southern Mental Health Reps meetings will be underway and all Mental Health Services Reps are encouraged to attend so the voice of our mental health members can be organised into an effective group to address issues as they arise.

Healthscope

The process of negotiating a new EBA has commenced at Hobart Private Hospital and St Helens Private Hospital. The current EBA expires on the 30 April, 2010 and ANF is hopeful of reaching a new agreement before this time.

Unit meetings have been conducted to discuss the key issues from the 2009

EBA survey which identified the priority issues for members in the new EBA.

Thirteen graduate nurses commenced on the units in January and more will start in March. Members have expressed concerns in regards to the lack of nurse educator hours, limited number of preceptors and the diluted skill mix on the wards. A meeting has been organised with the Director of Nursing to discuss these concerns.

Southern Tasmanian Area Health Services (STAHS)

In line with the integration of services under the STAHS, the ANF Organiser primary health portfolio has been transferred from Ken Harris to Sue Darcey.

Members working in remote areas have expressed concerns over the 25A requirements and role, ANF is seeking clarification from DHHS on this and will keep members informed.

ANF encourages members working in areas that require 25A Authorisation to contact Info to lodge any concerns.

Primary Health JUMIC meeting 22/01/2010

- For members working in remote areas first line emergency response protocols are under review and close to finalisation with the expected time frame of mid February 2010.
- Peter Lorraine stated that Primary Health is seeing support from RHH with improved access to nurse education, after-hours clinical support and access to new equipment.
- Car Pooling - DHHS has introduced

a process for exemptions to the current system. Taxi vouchers are available for urgent needs when a vehicle is not available.

- Oatlands - CEO, Michael Pervan was extremely impressed with the Oatlands service and believes it would be ideal to use as a case study. The health team know the service they are delivering and the specific needs of their clients; they are aware of the importance of keeping patients out of the main public hospital system and provide an excellent service to the community.

General Practice Super Clinic (GPSC)

- The current plan is behind time with building works planned to commence in April. July 2010 remains the time frame for the new service model to commence.
- HR stated that staff with changing employment conditions must have a reasonable time for notification of changes to employment status. DHHS will support employees during the change and will offer assistance with financial and career counselling sessions.
- All members are encouraged to use the Issues Register to raise any concerns (clarencejmic@dhhs.tas.gov.au).

General Practice

Sandra "Harry" Higgs works as a practice nurse at Spring Bay Medical Centre. Her enthusiasm for working in the General Practice setting in a rural area is inspiring. ■



Eliza Purton Limited - Ulverstone

A Consultative Committee Review Meeting was held on 27th January 2010 with ANF seeking a commitment from Eliza Purton Limited (EPL) management for future review meetings to discuss the redundancy process, workloads or matters relating to the restructure. EPL management have confirmed a Consultative meeting will be conducted every four weeks for a period of six months to ensure the restructure process is finalised successfully. ANF members and representatives held concern with the commencement of the new rosters and workloads on night shift and situations where nurses were working alone in the secure dementia unit. These issues have been raised with EPL management and ANF will conduct further membership meetings in order to gain further feedback from members about these issues. ANF is seeking to work collaboratively with members and EPL management throughout this process. ANF is proud to introduce Lorraine Jones as our first PCA member and a nominee for the position of ANF Representative. The required process for election will be commenced

Coroneagh Park

Coroneagh Park is a facility operated by Eliza Purton Limited as was subject to the restructure process. Members have expressed clinical concern relating to Enrolled Nurses Scope of Practice

and the Decision Making Framework along with issues associated with S8 administration and checking. ANF will meet again with members and discussions related to these matters are ongoing with EPL management.

Baptcare Karingal

Karingal (Baptcare) in Devonport have recently announced a process of consultation with ANF in order to address budget deficit. Baptcare are very supportive of the ANF federal *Because We Care* campaign, and have taken on board the suggestions made by ANF and our members. ANF has consistently put forward that nurses and all employees should be given the opportunity to consider all cost saving measures. There is vast good will displayed by nurses at Karingal. ACFI funding has increased substantially through the hard work and effort of nurses and by including nurses in a process to address the cost shortfalls.

ANF can report that a constructive meeting was conducted by Baptcare management on 4th February 2010 to allow their staff opportunities to be a positive part of a review process that will allow Baptcare to continue to operate viably. This inclusive management style has facilitated an honest and genuine discussion with all employees seeking to collaboratively address the financial situation of the facility with as little impact on employees take home income as possible.



ANF's first PCA Member Lorraine Jones (left) and ANF Organiser Lorraine Johns

NW Private Sector

A Joint Consultative Committee was held at the North West Private Hospital on 1st February. A positive meeting was conducted between ANF members, Workplace Reps NWPB staff and management. ANF welcomes Suzanne Fairbrother as a new ANF Representative to this facility following the resignation of Susan Newport. Susan has been a great ANF Representative and we thank Susan for all of her valuable assistance and help in the past! Renovations at NWPB are well underway, stage one work to be finished in early February with work to commence on the reception area and the car parks. Any potential or future charges for parking were discussed during the meeting. ANF is looking forward to working together with all NW members and Representatives throughout 2010, as we welcome Certificate III and IV Personal Care Assistants to become part of our dynamic ANF nursing team. ■

EBA UPDATE

AGREEMENTS - APPROVED BY FAIR WORK AUSTRALIA

- Association of Christian Homes Nursing Home Agreement
- Mary Ogilvy Society Nursing & Non-Nursing staff Agreement
- Eskleigh Foundation Inc Nurses Agreement

AGREEMENTS - BALLOTTED AND LODGED WITH FAIR WORK AUSTRALIA FOR APPROVAL

- Regional Imaging (trading as Regional Imaging Tasmania) Nurses Agreement
- Australian Red Cross Blood Services
- One Care Ltd

AGREEMENTS BEING FINALISED FOR BALLOT PROCESS

- Mary's Grange
- Queen Victoria Nursing Home
- Huon Eldercare
- Emmerton Park
- Aged Care Services Australia (Tamar Park & Sandhill)
- Calvary Health Care Tasmania (Southern)

AGREEMENTS FOR COMPLETION OF NEGOTIATION PROCESS BY 30 JUNE 2010

- Barrington Lodge
- Corumbene Nursing Home
- St. Ann's Nursing Home
- Deloraine Aged Care



Calvary Southern EBA Negotiations

- Ibis Care
- Aminya Hostel
- Healthscope
- Public Sector
- Hobart Clinic
- Vacluse Gardens
- Mount St. Vincent's ■

Northern Team

It is fantastic to have available the great talents and strengths of the new Northern Organising Team. Throughout January and early February the Northern Team has been scheduling and arranging site visits and membership meetings for 2010. ANF ensures that members are able to quickly and easily make contact with ANF through our representative network, info line and the availability of Organisers throughout public, private and aged care facilities. Keep an eye out for your next site visit from ANF, they provide great opportunity to ask that quick question, get pointed in the right direction, and ANF Organisers value your input and comments. The Northern Organising Team is excited and enthusiastic at the challenges that will face nurses throughout 2010 and into the future - and we will be there with you.

GP Nurses

We will continue to visit General Practice Nurses who will no doubt be interested in issues such as National Registration

and the "Modern Award" which was introduced in January 2010. If any members have concerns regarding the new Award or their workplace agreements please call our Info Line.

Aldersgate Nursing Home gets new DON

Brigid Flynn has recently been appointed to the position of Director of Nursing (DON) at Aldersgate Nursing Home, Kings Meadows. Brigid brings to this position many years nursing experience with some 30 years at St Vincent's Hospital (now CHCT). Brigid, who has an open-door policy, stated that she is enjoying the early challenges of her new position and is looking forward to enhancing the profile of Aldersgate Nursing Home and creating an enviable facility at which to work.

ANF Reps enjoy a night out

Photographed are just a few of ANF's many Workplace Reps, networking and enjoying an evening out in Launceston. Our Workplace Reps do a fantastic job at



Workplace Reps Jill Stewart and Naomi Bayes



Workplace Rep Jim Griffin and ANF Organiser Sonia Mackenzie

their respective work sites and it would be really great to see a few more nurses in the aged care facilities particularly, embrace this very rewarding and much appreciated role. ■

National registration standards impacting on nurses & midwives

NATIONAL REGULATION – AUSTRALIAN NURSING AND MIDWIFERY COUNCIL (ANMC) PROFESSIONAL PRACTICE FRAMEWORK (PPF) – "TRAIN THE TRAINER" WORKSHOPS

As most nurses should now be aware, in July 2010 the Australian health profession moves toward a national process for regulation. All nurses and midwives will be required to meet the national standards endorsed by the Nursing and Midwifery Board of Australia (NMBA).

Two of the five mandatory registration standards will impact directly on all nurses and midwives. Firstly, to maintain registration all nurses and midwives will need to hold professional indemnity insurance (inclusive in your ANF

membership). Secondly, from July, all nurses and midwives will need to complete 20 hours of professional development each year.

To assist nurses and midwives understand the impact of national regulation on their professional practice, **The Australian Nursing and Midwifery Council (ANMC) is providing "Train the Trainer" national workshops on "Professional Practice Framework (PPF) Implementation".**

Launceston – 15 March 2010

Burnie – 16 March 2010

Hobart – 17 March 2010

WHAT IS THE "PROFESSIONAL PRACTICE FRAMEWORK"?

The "Professional Practice Framework" encompasses the ANMC Codes, Standards and



Competencies available on their website (www.anmc.org.au) that guide the scope and professional responsibilities of nursing and midwifery practice.

The aim of the ANMC "Train the Trainer" national workshops is to train nurse and midwives to facilitate their colleagues' understanding of the impacts to their practice and professional responsibilities as a result of national regulation.

ANF urges all nurses to visit the ANMC website (www.anmc.org.au) and register for the free "Train the Trainer" workshops. Spaces are strictly limited! ■

LGH Lactation Consultants Recognised for their work

JILL HANSON AND DIANNE HAWORTH BELIEVE ANF ASSISTANCE WAS INSTRUMENTAL IN RELATION TO GAINING PARITY FOR THEIR ROLES AS LACTATION CONSULTANTS AT THE LGH WITH OTHERS IN SIMILAR ROLES ACROSS THE STATE AND NOW THEY ARE CELEBRATING THE RECENT RE-ACCREDITATION AS A "BABY FRIENDLY" HOSPITAL.

"The BFHI accreditation means we are providing best practice, are world class and the mums' and babies benefit. We provide current information and options, so new mums' can make an informed decision on what is right for them" said Jill.



Audrey Harris (seated) representing BFHI Tasmania Committee, holding baby Rowan, Jill Hanson RM IBCLC, Dianne Haworth RM IBCLC, John Kirwan, LGH CEO, Caroline Bounds, Australian Breastfeeding Association, Sue McBeath, Nursing Director, WACS

"Baby Friendly" is an initiative of UNICEF and the World Health Organisation, being administered in Australia by the Australian College of Midwives. The accreditation occurs

every 3 years, and although the criteria was revised and tightened in late 2009, the LGH maintained their standard - which is great news for all mums and babies. ■

Poisons Guidelines and Mechanisms for Review of Safety



LATE LAST YEAR THE DHHS (AFTER CONCENTRATED LOBBYING BY THE AGED CARE INDUSTRY) INITIATED A CHANGE TO THE STATE BASED POISONS REGULATIONS.

One major consequence is that care workers in Aged Care are now permitted to administer medications. After further discussion it was agreed that Guidelines would be produced by the stakeholders and that these guidelines would operate in conjunction with the legislation. Until such time as the guidelines are developed care staff (who also need to undergo further training) are not supposed to be administering medications.

ANF had raised several concerns about the change including the fact that Poisons Legislation is (across Australia) the responsibility of the State/Territory and not the Federal Government. As consequence the legislation often differs between states - for example, in NSW, a residential aged care facility must have a registered nurse on duty.

In Victoria, in order for a facility to do without RN coverage they need to seek authorisation from the Victorian Nursing Board. Other states allow care staff to "assist" a resident take their own medication while now Tasmania enables care staff to administer medication to a resident who is not competent. The Aged Care Facility is required to abide by the state legislation.

In Tasmania, the legislation (as it now stands) has the potential to enable appropriately qualified care staff to administer medications. The interplay of any guidelines with the legislation (and whether there is a requirement to adhere to those guidelines) remains uncertain.

Many care workers do wonderful work assisting residents in their care but these workers will not even be provided with a basic understanding of the use of drugs. In Disability services, where a similar system has operated for some years, ANF have been provided with anecdotal data of residents with serious

bowel impaction (who had been given repeated doses of aperients - but with no attention paid to their fluid intake, diet or mobility) and of one resident who was eventually so difficult to rouse that staff called the RN on call to assess him. Upon investigation it was evident that the medication package had accidentally included a sedative three times a day instead of nightly!

ANF was advised that the concerns of nurses were unfounded and that mechanisms existed to ensure the safety of medication administration in the residential aged care sector. However after recent discussion with some Aged Care Providers ANF remains concerned there is an apparent intention that state based "guidelines" will be disregarded and that, if this happens, there will be no oversight of medication administration in the sector. ANF has written to the Department of Health and Ageing seeking clarification on this point. Once the response is received information will be provided to members. ■

Aged Care Reps Working for Better Conditions

SALLY DARE EN

BEFORE BECOMING ENROLLED NURSES (ENS) NADELE AND I HAD WORKED AS EXTENDED CARE ASSISTANTS (ECA) IN AGED CARE FOR MANY YEARS.

We both enjoy working in Aged Care and are very passionate about our type of nursing. On becoming ENs we were both surprised at the difference in hourly rates between hospital and Aged Care Nurses. We also had concerns about new legislation allowing ECAs to give out some medications.

When the ANF started running the Because We Care campaign to address the issues related to nurses working in Aged Care we both started getting involved. Now we're both the new ANF Representatives for our facility.

Nadele and I both work as clinicians and have a very good understanding of the problems that confront nurses working in Aged Care. At the moment the Aged Care Sector gets less funding per resident than the Prison Sector get for each prisoner. This shows us how much the Government think our older generation are worth at their time of most need. Like older people, Aged Care Nurses are obviously undervalued by the Government. We work as hard as hospital nurses yet the difference in pay is substantial. Our work loads are huge; 30 residents each, all with various health issues and medication needs. We don't have doctors on hand and often it's our call whether to ring an ambulance or not. We have tonnes of paperwork; we have to deal with families who often have unrealistic care demands for their loved ones; chase doctors to rewrite drug charts, sign restraint forms and

review drug charts; organise pathology; and Allied Health referrals as well as the everyday running of the home. There are pill rounds and dressing rounds for our 30 residents and we also organise the ECAs working under our care. Some of our residents have both verbal and physical behaviours that we have to try to manage. Verbal abuse is an everyday occurrence and sometimes comes from residents' families as well. Often we have to counsel families who can't accept with the changes in their loved one. This happens regularly, especially where dementia is concerned.

So as you can see Aged Care Nursing is a very different and specialised field of nursing. At times it's exhausting and frustrating and there are days when you don't get your proper breaks and very rarely do you finish your shift on time.

Aged Care is also very rewarding; the fact we get the chance to make a difference to our residents' lives and when their life journey is ending we can be there with them making sure they are comfortable and their needs and wishes are met. Our aim as ANF Representatives is to make a difference to help push for better wages and conditions for Aged Care Nurses and to make the Government revise their current Aged Care policies and funding. They need to start funding Aged Care appropriately so Aged Care Facilities are able to function properly instead of continually being under enormous financial strain. ■



Queensborough Rise Reps - Nadele Clark and Sally Dare

Because We Care

IN 2010 ANF ORGANISERS WILL BE REGULARLY VISITING ALL AGED CARE FACILITIES TO UPDATE ON THE PROGRESS OF THE BECAUSE WE CARE (BWC) CAMPAIGN.

ANF is encouraging all staff, their families and friends to maintain pressure on their local and federal Members of Parliament by simply sending an ANF BWC Postcard or a personal email to express their support for this important campaign, and to ensure that Aged Care is prioritised in the 2010 Budget.

Workloads have been raised as a concern in southern Aged Care Facilities. This reflects what is being seen nationally. The Because We Care Campaign is aiming to bring improvements to the system that will benefit all concerned with Aged Care.

because we care

Quality care for older Australians



Report from better birth workshop

INFUSION

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CATHERINE DALY - 21 & 22 November 2009

I ATTENDED THE BETTER BIRTH WORKSHOP IN GRINDELWALD ON NOVEMBER 21ST AND 22ND 2009, PRESENTED BY LYNNE STAFF AND VICKI CHAN. THESE TWO DYNAMIC, EXPERIENCED MIDWIVES SET OUT TO SHARE THEIR KNOWLEDGE OF MIDWIFERY AS WOMEN, MOTHERS AND MIDWIVES, DRAWING ON THEIR EXPERIENCES FROM WORKING IN HOSPITAL AND IN HOMES WITH WOMEN GIVING BIRTH. ALL OF US WHO ATTENDED THE WORKSHOP HAVE BEEN ENRICHED BY THEIR KNOWLEDGE AND EXPERIENCE.

The workshop evolved around women's birth narratives, experiences and images from working with women who had opened themselves to sharing their journey of pregnancy and birth. Some of the women overcame great obstacles and showed enormous courage in giving birth in a way that was meaningful, significant and safe for them. Some women chose to give birth vaginally after a previous caesarean section, some chose to give birth at home, some of whom had a previous hospital birth while others laboured long and hard and did it their way. Some of the greatest influences on birth today come from doctors, technology and midwives. The words we use and the way that we use them can have a powerful effect on women and hence there is a need to be watchful and aware of the language we use with women. Is it really necessary

for a woman to know the stages of labour when it might be more valuable to explore with her how she might feel during labour? How might she express herself during the pain of labour? Do we observe the way a woman reacts to the things we say? These are a few of the thought provoking questions posed while discussing the use of language. We explored the complexities of ways of knowing: empirical knowledge; intuition; aesthetic knowledge; ethical and personal knowledge; posing questions such as: 'What is it that we do? How do we come to know what we know?' How do we know how to do what we do? All of these ways of knowing are useful and influence the way we are with woman.

During the workshop we were taken on a journey by Lynne and Vicki enabling us to discover our creative selves through song, percussion, body movement and writing. Tasmanian midwives are adept in expressing their deeper selves through the power of the pen. Lynne presented her research into the lived experiences of women following caesarean section, emphasising the support women need when experiencing a medically assisted birth. We saw a video of a caesarean birth where the mother helped birth the baby from her own body, discovered the sex of her baby and had her baby placed skin to skin immediately while the surgeon performed the rest of the operation. The silence in the room was audible at the end of the video as we were exposed to a whole new world of possibilities

when helping mothers through the experience of caesarean section.

The workshop has challenged me to examine everything that I do and say in my role as a midwife, especially as 'every word is an intervention' (MAVIS KIRK HAM)

There was a practical session on breech birth using a doll and pelvis to manipulate the baby should difficulties arise with the after coming head. Midwives recognise that this is a skill that is being lost due to caesarean section, but a necessary skill for the occasional undiagnosed breech that occurs or for a second breech twin.

As I have reflected on my time at the workshop I realise that as midwives we are and have to be creative, to allow every woman to express herself before, during and after she gives birth. My repertoire of movements, positions and sounds has been expanded. It is important to know the woman, what it is that she wants, to honour her in following her birth plan, while at the same time being flexible, to help her secure a safe birth. I will acknowledge her hopes and fears and help her express herself as she enters the door that is motherhood, where there is no going back, onwards through joy, hope and fear for her child and family's future. ■

Top midwifery graduate 'born to nurse'

THE 2009 RECIPIENT OF THE MILDRED HANSEN PRIZE IN MIDWIFERY FROM THE UNIVERSITY OF TASMANIA, HANNA MCINTOSH, SAYS SHE OFTEN BANDAGED HER BROTHERS' KNEES AS A CHILD, AND HAS ALWAYS BEEN INTERESTED IN NURSING.

Now a midwife at Calvary Health Care Tasmania's maternity ward, Hanna won the Prize for completing her Graduate Diploma of Midwifery with the highest overall results. She said she wasn't especially motivated to achieve

the Mildred Hansen Prize, but simply enjoyed the study and was determined to do her best.

"I was interested in the assignments, and I just think I was born to nurse," Hanna said.

"I love my job, there is always something new to learn, and helping others is very satisfying. I go home every day feeling I've done good day's work."

The Mildred Hansen Prize was established in 2008 by the Hansen family, when Mrs Hansen passed away



Hannah McIntosh Mildred Hansen Prize recipient

at the age of 91 after a life-long interest in nursing, midwifery, women's health issues and the compassionate care of those experiencing ill health. ■



Agnes, Sarah Cowen, Professor Denise Fassett, Chloe Damon, John Cooper, Juliet Sondermeyer and Imogen Paine

Celebrating Nursing Graduates

ON SATURDAY 30TH OF JANUARY THE NURSING AND MIDWIFERY STUDENTS SOCIETY (NAMSS) HOSTED THE INAUGURAL GRADATION DINNER OF HOBART FAST-TRACK NURSING STUDENTS.

The dinner was held at the at the Royal Tasmania Yacht Club, Special Guests included Professor Denise Fassett Head of School, Juliet Sondermeyer Hobart Campus Co-ordinator, Angus Stanislaus-Large Lead Organiser ANF and Hobart School of Nursing lecturers.

A great night was had by all; guests celebrated the achievements of the Hobart campus over the past two years and the completion of

students' academic studies!!

ANF sponsored a 6 month full membership for the evening, which was won by Aeh Moo Moo in a "dance off", judged by John Cooper!

NAMSS would like to give a special thank you all the students and staff of the School of Nursing and Midwifery as well as the Australian Nursing Federation who have supported us over the past two years; we would not have come this far without you! A special thank you to the NAMSS committee members.

It has been an exciting and challenging journey; we are all looking forward to the future as Registered Nurses! ■

CHAPS nurse off to the Big Apple!



TAMMY PALMER FROM CHILD HEALTH AND PARENTING SERVICE (CHAPS) IS THE FIRST NURSE FOR QUITE SOME

TIME IN SUCCESSFULLY GAINING A PLACE ON THE ROTARY GROUP STUDY EXCHANGE PROGRAM, HEADING OFF TO NEW YORK AND BERMUDA FOR 5 WEEKS IN APRIL.

This exciting opportunity to look at nursing programs in the USA consolidates her interest in Community based nursing and what other countries have to offer. Tammy hopes to spend time at the World Health Organisation, investigate the "Nurse/Family Partnership" program, go to hospitals to look at lactation services and explore school based nursing; with a view to extending how nursing and schools can work more closely together when she gets back home. Currently there are no community based, nurse run child health services roles in the USA, unlike Tammy's current job with CHAPS, and all child health checks are undertaken by paediatricians.

Tammy believes not only does the Exchange Program have the potential to provide her with some insight into new ideas, but she will be doing a presentation on herself, her role as a Community Based nurse and telling the New Yorkers all about her home State of Tasmania. ■



**NURSE IMMUNISERS
- INSIG Tas AGM/
Study Day**

1000 - 1530 Hours, Saturday 13 March
Hotel Grand Chancellor

\$30 INSIG members \$60 Non members
Catering included

Payment to be received prior to session -
credit card, cheque or money order.

The study day program and registration forms
will be emailed to all INSIG members by
13 February 2010. Please register by
Friday 26 February by contacting the ANF Office
on 6223 6777 or 1800 004 241 (outside Hobart
area) or email educationadmin@anftas.org

For queries please contact
Jenny Killworth (President) at
jmkillwor@bigpond.com or 0408 037 619.

**A study day for Nurse Immunisers -
Not to be missed**



Newly Elected Reps

Naomi Baldock - NWRH Surgical West
Deanna Butler - RHH DEM
Jacki Nicholls - RHH Antenatal & Womens Clinic
Kamala Walden - Calvary Lenah Valley 2F Surgical
Gaylene Worthington - New Norfolk Child Health
Lea Young - Clarence CHC Risdon Vale

Reunion for the class of 1980 St Johns Hospital (South Hobart)

The Reunion committee for the above intake class is seeking contact details for those individuals who commenced nurse training at St. Johns Hospital (South Hobart) during 1980. **Anyone interested should contact Carolyn Burrows on 03 6234 7512 or email cb.burrows@hotmail.com**



Annual Delegates Conference

Annual Delegates Conference

MARK THE DATE

24 & 25 June 2010 - Wrest Point Casino

The Annual Delegates Conference is held in appreciation and recognition of the contribution made by ANF reps. A two day program includes dynamic key note speakers, professional development to inspire you, debates on resolutions and the announcement of Rep of the Year. **For more information on the conference and to register, please visit www.anftas.org**

Register by 30 April 2010 to go into the early bird registration draw and a chance to win the early bird prize. ■

Professional Development

MARCH

PALLIATIVE CARE

Updates in management of palliative care
Hobart: Wed 24 March, 6pm - 8pm
Presented by Jane Jupe & Sally Bonde - CN, Palliative Care, South
Launceston: Thurs 11 March, 6pm - 8pm
Presented by Linda Murray-Williams - CNC, Palliative Care, North
Devonport: Tues 23 March, 6pm - 8pm
Presented by Viki Elphinstone - NUM, Palliative Care, North West

CONTINENCE/CATHETER MANAGEMENT

Catheter management and client care
Hobart: Wed 17 March, 6pm - 8pm
Presented by Alyson Sweeney - CNC, Statewide Continence, South
Launceston: Tues 2 March, 6pm - 8pm
Presented by Pam Hesketh - CNC, Spinal Continence, North
Devonport: Thurs 4 March, 6pm - 8pm
Presented by Pat Eastley - CNC, Statewide Continence, North

APRIL

CARDIAC MANAGEMENT

Fundamentals. Interactive session covering cardiac anatomy and physiology relating to ECG, cardiac rhythm and ECG interpretation
Hobart: Thurs 22 April, 6pm - 8pm
Presented by Ken Harriss - ANF Southern Organiser
Launceston: Wed 14 April, 6pm - 8pm
Presented by Andy Brown - CNE, LGH
Devonport: Wed 28 April, 6pm - 8pm
Presented by Yvonna Zuydam - RN, NWRH

NATIONAL REGISTRATION, POISONS ACT, SCOPE OF PRACTICE

National Registration, Poisons Act. Scope of practice and decision making framework
Hobart: Tues 27 April, 6pm - 8pm
Launceston: Tues 20 April, 6pm - 8pm
Devonport: Wed 21 April, 6pm - 8pm
Presented by Catherine Enriken - Manager of Accreditation and Projects, Nursing Board of Tasmania

TRAINING LOCATIONS:

Hobart: ANF, 182 Macquarie Street
Launceston: ANF, 76 York Street
Devonport: ANF, 63 Best Street

COST:

\$25 ANF Members
\$15 ANF Student Members
\$50 Non Members*
\$30 Student Non Members*

**If positions available*

For registrations or more information please contact the ANF Office on 6223 6777, 1800 001 241 (outside Hobart area) or educationadmin@anftas.org

Too busy to keep up to date with your education? Do it online!
Continuing Professional Education Online for Nurses and Midwives
www.anftas.org/services/education



Do you have questions about your super?



You're not alone. Many nursing staff change their working hours and/or employment status and as a result they may ask one of these questions:

- ▶ What happens if I change my working hours?
- ▶ What happens if my salary reduces?
- ▶ What happens if my employment status changes?

This article will take a broad look at these questions and provide some basic answers. It is important that you know whether you are a member of the RBF Contributory Scheme or the Tasmanian Accumulation Scheme (TAS), as this will help you determine the answer relevant to you. Your last Membership Statement shows which scheme you belong to. If you haven't got your statement handy, just give us a quick call on **1800 622 631**.

Changing your working hours and/or salary

If you increase or decrease your working hours, your income and your super contributions will change. This is because your super contribution from your employer is calculated as a percentage of your salary. Your personal contributions may also be a percentage of your salary.

Talk to RBF about ways to offset these changes so that your long term super is not disadvantaged. We're here to help make it as easy as possible for you.

RBF Contributory Scheme members

If your salary reduces because you have accepted a different role or no longer receive overtime or other allowances, your benefit may be reduced. However, special scheme rules may assist you to maintain your higher benefit entitlement by allowing you to maintain your contributions at a higher level. Please contact RBF to discuss the rules as they are quite strict and include an application time limit.

If your salary reduces because you choose to work less hours, you are not eligible to make an application for recognition of your previous higher salary.

Changing your employment status

Your employment status can be permanent, temporary or casual. As a permanent or temporary employee, you may be working either full time or part time.

If you are an RBF Contributory Scheme member and you change to a casual employee (no longer temporary or permanent), you will not be eligible to remain in the scheme. You should contact RBF before making this change to discuss the implications. This will allow you to be confident that you are making an informed decision.

If any of these situations apply to you, please call RBF on **1800 622 631**, to discuss your personal circumstances and explore opportunities available to you.

Keep an eye on future editions of *infusion* for answers to other frequently asked questions.



1800 622 631
www.rbf.com.au

Important information: The Retirement Benefits Fund Board is the trustee of the Retirement Benefits Fund. Please note that the information contained in this article is general information only. It is not intended to be, and should not be relied on as legal, financial or other advice. It has been prepared without taking into account your objectives, financial situation or needs. You should consider whether this information is appropriate to your circumstances, talk to a financial adviser and consider the relevant RBF brochures available at www.rbf.com.au before making a decision based on this information.



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Email: enquiries@anftas.org

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**because
we care**
Quality care for older Australians