



A Brief Word from the Chief Nurse ...

The cooler weather is drawing to a close and we should soon see some warmer times. I recently received an email from colleagues in the United States including a letter from one describing his experiences with Hurricane Katrina. It was a very moving description of the difficulties and extreme challenges these nurses along with the community faced in the aftermath of the Hurricane.

The response of everyone and the ability of the staff to maintain care of the community (including the cats and dogs!) in conditions many of us cannot even begin to imagine was to say the least inspirational. Although we have mainly seen in reports the more negative aspects of the disaster I am sure that many will recognise the contribution and achievements that many including the nurses made to help the community in those critical hours and days. While somewhat less extreme we do have the opportunity each year to recognise some of the great nurse and midwives here in South Australia

through the Annual Excellence Awards – although still some time away do start thinking about who you might like to nominate.

Recently I was able to attend part of the School Speakers Workshop organised by the Nursing Office. It was great to see the number of nurses and midwives in attendance and the enthusiasm with which they undertake this role.

One lesson I had reinforced was that we do have an impact when we talk about our roles as nurses and midwives and this can directly influence career paths that young people will choose. In our busy lives we often do not take the time to reflect on the positive things that we are involved in or to remember even why it was we became a nurse or a midwife in the first place. It is something we should remind ourselves of regularly and I daresay something the School Speakers have to do often as they answer questions from the students.

Finally I would like to thank those of you who responded to the Nursing Survey – the response rate was over 40% and final analysis of the results is occurring currently. I look forward to reading the final report.

I am pleased to inform you of the successful recipients of the incentive funding provided to the metropolitan and country health units who recorded the highest return rates for the survey.

Congratulations go to:

Metropolitan

- Hampstead Rehabilitation Centre; and
- Noarlunga Health Service.

Country

- Loxton District Hospital; and
- Roxby Downs Health Service/Woomera Hospital.

Community

- Adelaide Central Community Health Service.

Debra Thoms

Inside this issue:

'Flo' Role gives Nurses more Patient Time	2
N3ET Update	2
Rehabilitation Information Skills Exchange SA	3
PEPA Program Update	3
Flexible Working Arrangement/Environment Questions Results	6
Nurse Practitioners	6
Blood Safe Projects	9

Key Articles:

- *Career Structure review*
- *Child & Adolescent Mental Health Practice Development Nurse Positions*
- *Clinical Leadership Programme in Australia*



'Flo' Role Gives Nurses More Patient Care Time ...

An innovative solution to the complex process of discharging a patient from hospital is giving nursing staff more time for patient care.

Staff on the hospital's Cardiology and Cardiothoracic Ward (Ward 6D) have successfully trialled the role of a 'Flo' coordinator to manage the process of discharging patients.

Clinical Nurse Coordinator Dean Baker initiated the trial and says it aimed to improve the flow of patients in and out of the ward. 'In the past, each nurse on the ward could be managing the discharge

process for any number of patients ready to go home while also trying to care for those patients not going home,' he said.

'We now have one nurse coordinating patient discharge and this frees up our other nursing staff to spend more time with their patients.'

The Flo nurse assists a patient's discharge by arranging transport, ordering medication and organising services such as Meals on Wheels for the patient, contacting patients' families and liaising with the doctor. This involves a lot of time on the phone, which in the past took nurses away from the bedside.

Since the trial began, the number of patients discharged home before midday has increased from 30 to 47 percent, freeing the beds for other patients. The patient discharge lounge is being used more by ward patients.

'Importantly, staff really liked the role and found it decreased stress on the ward and gave them more time for patient care,' Dean said. The role will now be established permanently on the ward.

Thank you to FMC News for granting permission to publish this article.

2006 Nursing and Midwifery Excellence Awards ...

Plans for the 2006 Nursing and Midwifery Excellence Awards are currently underway. The event will be held on Friday 12 May 2006. In early 2006, you will be invited to nominate nurses and midwives for the following categories:

- Nursing Clinical Practice Community Registered Nurse/Midwife;
- Nursing Clinical Practice Community Enrolled Nurse;
- Nursing Clinical Practice Residential and Aged Care Registered Nurse/Midwife;
- Nursing Clinical Practice Residential and Aged Care Enrolled Nurse;
- Nursing Clinical Practice Rural and Remote Registered Nurse/Midwife;
- Nursing Clinical Practice Rural and Remote Care Enrolled Nurse;
- Nursing Clinical Practice Metropolitan Acute Care Registered Nurse/Midwife;
- Nursing Clinical Practice Metropolitan Acute Care Enrolled Nurse;
- Nursing Education;
- Nursing Research;
- Future Nursing Leader; and
- Nursing Leadership.

Please start considering nurses and midwives that you would like to nominate.

N3ET Update ...

The State, Territory and Australian Government Ministers for Education and Health agreed to establish the National Nursing and Nursing Education Taskforce (N3ET) in November 2003. The Taskforce has been charged with the responsibility of overseeing implementation of the recommendations from the 'Our Duty of Care' Report released following the

National Review of Nursing Education in 2002. The Report addressed a diverse range of issues such as nursing education and practice today, emerging models of care, Australian nursing – the future, nursing careers, education and training and organising and planning nursing work.

The Taskforce (N3ET) brings together some of Australia's leading nursing, nursing

education and training specialists who have been nominated for their leadership qualities and collective expertise.

For more information on the Taskforce and the work being undertaken please refer to their website at <http://www.nnet.gov.au/>. Don't forget to have a look at the *What is New* section and the latest *Newsletter*.

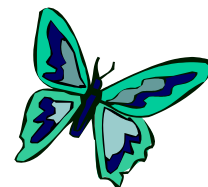
Two Country Directors of Nursing Retire ...

Two country Directors of Nursing (DON's) have retired. Our sincere thanks to both Sue Sherriff, (Executive Officer/Director of Nursing Southern Yorke Peninsula Health Service Inc) and Jacqueline Sutherland (Executive Officer/Director of Nursing,

Strathalbyn & District Health Service) for their contribution to South Australia's nursing and midwifery profession.

We wish Sue and Jacqueline every success with the new career—retirement.





Rehabilitation Information Skills Exchange (RISE) SA ...

The Rehabilitation Information Skills Exchange, South Australia, RISE SA, program is a workforce education program, funded by the Department of Health and Ageing through the Pathways Home Program.

The Program aims to expand the capacity of the generalist health care sector to provide rehabilitation care in the community. Health Care workers include aboriginal health workers, allied health professionals, nurses, personal care attendants, enrolled nurses, and paramedical aides.

There are four main strategies within the project:

- 1. Workforce Education workshops** will be conducted in country and metropolitan regional health areas. The workshops will provide a broad overview of the principles of rehabilitation and identify essential clinical competencies, skills, and knowledge required to deliver effective

care. They are being tailored to the needs expressed in the workforce needs survey. The survey was strongly responded to by nursing, allied health and paraprofessional staff from across the state, particularly from country regions. Over the coming eighteen months, half a dozen workshops are planned across the state in those regions expressing strongest interest in such a venture.

- 2. Hosted clinical placement** experiences within dedicated Rehabilitation Units aim to provide the generalist health care worker an opportunity to develop skills, knowledge and competencies in the provision of rehabilitation care. Practitioners will complete a flexible two week placement to attain identified individual learning objectives and key competencies. Applications for hosted clinical placements will be distributed during

July, for placements over the ensuing eighteen months.

- 3. An IT Training Resource** is being developed in consultation with program participants to contribute to continuing professional development, dissemination of evidence based care pathways and the promotion of other available resources/support relating to rehabilitation.

A Clinical Support Network to increase the provision of effective rehabilitative care available to the community and the scope of health care workers providing that care will be facilitated.

For further information or details, please contact:

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Submitted by Judy Harvey, RISE SA Program Manager

PEPA Program Update ...

The **Program of Experience in the Palliative Approach [PEPA]** commenced in 2003 to provide **primary health care practitioners** from a range of disciplines, with an opportunity to undertake a clinical placement within a specialist metropolitan or larger regional palliative care service, to develop knowledge and skills in the palliative approach.

The growing demand for palliative care means that increasingly health professionals are called upon to provide palliative care as a core part of their practice. This requires an informed health sector, with health care providers aware of and committed to the benefits that palliative care offers to people with a life-limiting disease and their family.

Palliative care is not limited to the final weeks of life. It can contribute to care decisions early in the course of any life-limiting disease and is relevant to managing symptoms in many clinical situations.

The PEPA program aims to improve the quality, availability and access to palliative care for people who are dying and their

families.

Palliative Care Specialist Opportunities

The PEPA program in SA has been extended to May 2006. Additional funding has been received to enable **Specialist Palliative Care staff** to undertake a short supervised clinical placement. The clinical placement experience will be in an area of specialty practice where they identify learning needs in relation to their patient caseload.

The clinical placements will enable palliative care clinicians from the spectrum of health care disciplines to develop skills pertaining to palliative care in other specialty settings that have a specific focus (eg paediatric palliative care), non-palliative care units such as pain management, radiation oncology/cancer/renal units.

Palliative care clinicians will include nursing and allied health staff including bereavement coordinators and medical officers working in palliative care services.

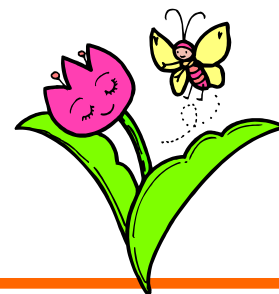
As with the initial PEPA, back fill, travel and accommodation costs have been calculated

with protocols developed.

Clinical placements are still available for those not employed in designated palliative care positions. For further information or details please contact:

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www.pallcare.asn.au and follow the links.

Submitted by Marlene Anderson, PEPA Program Manager



Career Structure Review Project ...

This Project arises from an agreement made between the Department of Health and the Australian Nursing Federation (ANF) in the last Enterprise Bargaining Agreement (EBA) in 2004. The Project timeframe is bound by the need to have a new professional career structure as a basis for negotiation of the next EBA that will operate from July 2007.

The key question of this project could be stated as:

What kind of structural model can be used to best balance effective nursing care delivery and the career aspirations of nurses and midwives across public sector contexts of practice in South Australia for the years 2007 – 2027?

Such a question invites other questions such as:

- What are the best parts of our current career structure and how might they be incorporated into the new?
- What could we learn and integrate from other professions, states and countries?
- What might career advancement mean across the generations of current and future nurses and midwives?
- How might we link career structures to the ways in which nursing/midwifery

work will be organised in the future?

- How might different work locations, work types and organisation size be best addressed?
- How could we best integrate non-mainstream, non-clinical and /or less physically demanding roles into a career structure?
- What might be the most effective relationships between career structures and lifelong learning/ professional development?
- How might job satisfaction and career development best be linked?
- What contextual factors might have an impact?
- What possibilities exist that we have not yet considered?

Project activities will include research, review of documents, communication of ideas and possibilities, analysis of feedback and information from nurses and midwives, and dialogue with a range of individuals and groups. It is expected that the first year will focus on engaging nurses and midwives in clarifying all the issues that need to be considered and the questions that should be pursued. The second year will focus on designing viable options to address the issues raised. Finally, the proposed professional

career structure will have industrial classifications and conditions applied.

The Career Structure Project will operate its processes using six key principles:

- focusing on the best and most positive aspects of career structures;
- using thoughtful questions to broaden thinking and options;
- looking to the future;
- using open and transparent consultation and conversation methods;
- recognising the tensions and interactions between issues; and
- adapting as the process progresses.

For further information contact:

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Ways to Participate in the Career Structure Review ...

<p>Written Submissions:</p> <p>Submissions will be accepted from individuals or professional or speciality groups.</p> <p>A cover form will be available on the Nursing Office website from October.</p> <p>Submissions due by 31 January 2006.</p>	<p>Responses on website:</p> <p>From October 2005 to May 2006 you are encouraged to respond to the Issues Articles released each month.</p> <p>See the Nursing Office website for further details.</p>
<p>Issues Articles:</p> <p>These will be available from the Nursing Office, Department of Health and ANF SA Branch.</p> <p>Read the articles, discuss them with your colleagues, let us know your ideas about the issues raised.</p>	<p>Conversation Forums:</p> <p>A number of forums will be held to give you a chance to hear the issues of others and to speak about your issues.</p> <p>See the next edition of this Communiqué for details of the first set of forums.</p>

Child and Adolescent Mental Health Practice Development Nurse Position ...

Practice development seeks to empower clinical staff and facilitate positive change. It is a collaborative process, which needs to be owned by the practitioners involved to ensure that the change is lasting. It is vital that those taking part in the process share feelings of common ownership.

Practice Development specifically focuses on:

- The improvement of patient care;
- Incorporates a range of approaches;
- Takes place in real practice settings;
- Is underpinned by the development and active engagement of practitioners;
- Is collaborative and inter-professional;
- Is evolutionary; and
- Is transferable rather than generalisable.

With this in mind the Practice Development position across Northern and Southern Child and Adolescent Mental Health Services (CAMHS) aimed to provide leadership in facilitating the ongoing development of Mental Health Nursing services through clinical improvement, education, research, clinical consultancy and clinical service planning.

In the initial 3 month pilot period, the CAMHS Practice Development Nurse conducted a “Scoping Project” to elicit Mental Health Nursing staff input.

The Key Outcomes of the “Scoping Project” were as follows:

- To implement a strategy to scope *current* Northern and Southern CAMHS nursing services that include:
 - The range of clinical practices undertaken by nurses
 - Education/Staff Development opportunities across the continuum of staff (students, clinicians and managers); and
 - Research Projects.
- To develop clear linkages with the Mental Health Practice Development Nurses in each region.

This project has sought to involve all nurses in a range of both formal and informal

measures to gain insight into the possible direction of the position. This was undertaken in the following ways:

- Electronic Questionnaire;
- Individual Consultations;
- Workshop; and
- Informal discussion.

Over the 1-month period of the Scoping project 62.8% of nursing staff responded to the survey. A wealth of information was collected and described an experienced, educated profession with a role in all areas across the CAMHS organisations. The main themes for practice development are primarily in the areas of clinical supervision, training in a range of styles and models and increased collaboration and coordination for student nurses in Child and Adolescent Mental Health.

Specific Recommendations for Practice Development included:

- An enhanced Clinical Supervision process for nurses
- Developing an education and training program for nurses that includes three broad education streams:
 - Therapeutic Models of Care
 - Infant, Child and Adolescent Development; and
 - Family Therapy and Systems Theory.
- The coordination of an enhanced student nurse education program that facilitates student placements across Northern and Southern CAMHS inpatient units, community teams and special programs.
- Designing, implementing and evaluating identified clinical practice development project/initiatives in conjunction with each inpatient unit.
- A trial of experiential staff placement to enable nurses to gain greater understanding and experience of other CAMHS units and services.
- Working with the Nursing Research Department (CWYHS), The Division of Mental Health Research and Evaluation Group (CWYHS) and Southern CAMHS Research and Evaluation Unit to facilitate nursing driven research across CAMHS.

- Involvement with the Nurses and Midwifery Centres for Education and Universities/Training Institutions to incorporate identified training needs and develop appropriate courses for Mental Health Nurses in the specialty of Child and Adolescent Mental Health.

Initially Sharon Wright was the CAMHS Practice Development Nurse responsible for the scoping project. Pat Mead a Mental Health Nurse with over 20 years experience in Child and Adolescent Mental Health Nursing across a range of clinical settings will now lead the implementation. Pat has a commitment to practice development and specifically to the articulation of child and adolescent mental health nursing as it pertains to the South Australian context.



Photo of Pat Mead CAMHS Practice Development Nurse

Submitted by Di Skene, CAMHS Northern Region, Women's and Children's Hospital

Visit to RSUP Sanglah—Denpasar General Hospital, Bali ...

During a recent visit to Bali, Indonesia, several of South Australia's midwives were privileged to meet with some of the senior midwifery and medical staff of the Denpasar General Hospital, Rumah Sakit Umum (RSUP) Sanglah.

The RSUP Sanglah is the main provincial public hospital in Bali and its facilities have improved since the emergency ward was built in 1991. The hospital was the first line trauma post for those injured and killed in the October 2002 Bali bombings.

The SA Midwives were able to share and discuss issues that both Australia and Bali are currently experiencing. Some of these

issues include the aging midwifery workforce, recruitment, training of midwives and the Midwifery and GP Shared Care model.

The aging midwifery workforce has resulted in Indonesian University's Senior Midwifery Lecturer, Dra Wayan Karthi Suthardjana applying to the Indonesian government for approval to set up the first Balinese midwifery training school.

Unfortunately Dra Wayan Karthi Suthardjana has limited resources which include equipment and books but they continue to plan for the school hoping that they will receive approval.

Left to right are Dr Hari Sanjaya Sp. OB/GY; Sandy O'Toole (The Queen Elizabeth Hospital), Heather Osborne (Department of Health), Jenny Miller (Lyell McEwin Hospital and The Queen Elizabeth Hospital), Ketut Adi Arini S-Sos, Dra. Wayan Karthi Suthardjana, Kim A Patra (SRN/RM, OAM), Sue McKechnie (The Queen Elizabeth Hospital), Wayan Suru SKM and Nyoman Sukarti S-Pd



Nurse/Midwife Flexible Working Arrangement/Environment Questionnaire Results ...

In March 2005 an informal survey (titled Nurse/Midwife flexible working arrangement/environment questionnaire March 2005) was circulated as part of the SA Department of Health Nursing Office Communiqué, which was sent out in February 2005.

The total number of surveys returned to the Nursing Office that were suitable for inclusion equaled 182. The responses of the survey indicated that for those who responded, the presence of open communication and the ability to negotiate featured very highly in their idea of a flexible workplace.

The most significant flexible practices

appeared to be in the form of being able to have an influence over rostered shifts/holidays through requests, shift lengths and where possible to work flexi time and time off in lieu.

When asked what other flexible work arrangements could be offered purchased leave received 3 responses (1.65%); flexi-time 16 (8.79%); compressed weeks 5 (2.75%); job sharing 13 (7.14%); and working from home 2 (1.10%).

Variable shift length/split shifts/start time received 26 responses (14.29%); set shifts 19 (10.44%); self-roster/better rosters 16 (8.79%); and not sure/none received 20 (10.99%).

Of the respondents 93% felt that the following was a good definition of a philosophy that underpins flexible working arrangements for nurses and midwives:

'Flexible working arrangements is creating a work environment which allows employees to achieve balance between their work and personal lives which ultimately leads to enhanced performance and the provision of safe and quality care.'

82% of respondents felt that employers and employees have a joint responsibility for the creation and maintenance of flexible working arrangements/environments.

Nurse Practitioners ...

Nurse Practitioners - a topic of many discussions amongst clinicians, health providers and health services. There are number of regional and site specific working groups being established. These groups are working with health care organisations and clinicians to facilitate the development and appropriate implementation of the Nurse Practitioner roles in line with service

delivery and health care reform.

Over 60 nurses will attend *Exploring the Role of Nurse Practitioner* workshop which will be held on October 20, 2005. The workshop will provide a valuable opportunity for clinicians to gain insight into the educational preparation, professional development, clinical practice, regulatory processes and legislation surrounding the

Nurse Practitioner role.

As the previous workshop held in June proved to be a very popular event, this workshop is proving to be, as well – The Nursing Office received an over whelming response from clinicians to attend. It is anticipated that there will be another workshop held early in the new year.

September 2005 Committee Update ...

Mental Health Nurses Advisory Group (MHNAG)

The MHNAG have been instrumental in overseeing the development and implementation of three Practice Development Mental Health Nurses' regional positions. This role is a positive strategy for the development and capacity of the mental health nursing workforce. These clinicians have undertaken various projects in the regions as part of the initial 3-month pilot project. The pilot continues until June 2006.

The pilot project will undergo a formal evaluation to be conducted by University of South Australia. The evaluation will endeavour to capture both the processes involved, innovations made during the development and implementation phase and also the outcomes achieved from such a role.

Mental Health Nurses Advisory Group - Clinical Supervision Workshop

The MHNAG have been instrumental in overseeing the development and implementation of three Practice Development Mental Health Nurses' regional positions. This role is a positive strategy for the development and capacity of the mental health nursing workforce. These clinicians have undertaken various projects in the regions as part of the 3-month pilot project. The pilot project will undergo a

formal evaluation to be conducted by University of South Australia. The evaluation will endeavour to capture both the processes involved, innovations made during the development and implementation phase and also the outcomes achieved from such a role.

One of the retention strategies identified by the Mental Health Nurse Advisory Group at the December 2004 workshop is the implementation of Clinical Supervision into the workplace for mental health nurses. Following from the workshops work is progressing on a framework and policy guidelines around Clinical Supervision. Discussions have been held with NCETA (National Centre for Education and Training on Addiction) regarding a comprehensive education package that has been developed and the potential for this to be made available for mental health services.

The Nursing Office has advertised for a Project Nurse (Mental Health) to support further work with the MHNAG in areas such as describing a framework and professional practice for mental health nurses as well as other activities to support the recruitment and retention of mental health nurses.

For further information on the MHNAG contact Marcia Hakendorf in the Nursing Office.

Combined Directors of Nursing Workshop

The Combined Directors of Nursing (DONs) consist of the metropolitan DONs and the seven members of the Country Nurse Executive (CNE). This group meets in a workshop format quarterly. The Group received a presentation and discussed with Robyn Parkes the approach being taken on the Career structure Review Project. Further feedback and discussion occurred around the Flexible Workplace Survey and the results of the NWI which it is planned will be released in the near future. Further discussion was also held around the Transition to Practice Programs and the recruitment of new graduate registered nurses into the workforce. At its last workshop the Combined DONs Group on the second day joined together with representatives from industry in areas such as aged care and private hospitals to review all the N3ET recommendations referred for action at a jurisdictional level.

Clinical Standards Subcommittee

The Clinical Standards Subcommittee have developed 187 Corporate Standards that cover specialties such as mental health, rehabilitation and midwifery. Of these Corporate Standards, 90 have been endorsed by the Directors of Nursing. The Subcommittee is in the process of expanding the set of Corporate Standards to include Paediatrics and Intensive Care.

Research on why South Australian Nurses Return Home from Abroad ...

Have you recently returned from abroad to live in South Australia?

Was your return from abroad in the last 6 months?

Are you aged between 20 to 45 years?

Then we would like to interview you. The University of South Australia and the Department of the Premier and Cabinet are conducting a study to explain why skilled South Australians return home from abroad to live. As you know, there is a shortage of nurses in South Australia, and we need nurses who have expatriated abroad to return home to live and work. We would like to interview nurses who have recently repatriated home from abroad to help us understand why they have returned.

We would like to interview you if you have recently returned home to live from abroad (that is, returned within the last 6 months).

If you are interested in being interviewed, please contact:

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Thank you for your interest in helping to explain why South Australian Nurses return home to live.

Submitted by University of South Australia



Clinical Leadership Programme in Australia ...

The current group of Clinical Leaders and Local Facilitators are soon to complete the 2004/5 Clinical Leadership Programme and preparations are in progress to celebrate their achievements at a Ceremony of Achievement on 17 October.

This year, 12 Local Facilitators and 68 Clinical Leaders from 17 metropolitan and country Health Units have participated in the programme and all indications are that this programme has been as successful as the first. As a result of their participation in the programme, Clinical Leaders have developed:

- greater awareness of their opportunities for development and greater confidence in their capabilities;
- ability to observe care delivery with 'fresh eyes' and listen and learn from the stories people tell of their experiences of receiving care;
- insights which have assisted them to identify and encourage areas of good practice and areas for practice improvement;
- communication skills to assist them to engage people in striving for improvement and to enable them to recognise and reward the steps along the journey; and
- skills that are assisting them to engage actively in health reform processes.

The following comments are from 2004/5 Clinical Leaders and demonstrate the impact that the Clinical Leadership Programme has had in their experience:

"It has been great to be able to communicate issues and listen to others, it has inspired me to be a more positive role model as a leader, and has given me the confidence to want to continue within my role."

"It gives you the ability to link the theoretical to practice and demonstrate that it does work."

"This year compared to last year I feel so much more confident to delegate and make decisions."

When the current programme concludes, 126 Clinical Leaders and 17 Local Facilitators will have completed the programme in South Australia. This is a remarkable achievement and an indication of the commitment of South Australian nurses and midwives, Directors of Nursing/Midwifery, and Health Units to improve quality of care.

Planning for the next round is now underway, with a call for Expressions of Interest for Local Facilitators sent to

Directors of Nursing/Midwifery recently. Local Facilitators will begin in late November 2005 in preparation for commencing work with Clinical Leaders in February 2006. A call for Expressions of Interest for Clinical Leaders will be distributed in late September.

Background and Overview

The Clinical Leadership Programme in Australia™ is a highly successful two tiered professional development programme designed developed and supported by the Royal College of Nursing of the United Kingdom (RCN UK). In 2003 South Australia led the way in bringing the Clinical Leadership Programme to Australia.

The programme is conducted under licence from the RCN UK and focuses on developing health professionals involved with both the operational and implementation and delivery aspects of health care. In nursing/midwifery in South Australia, this is generally the Nursing Directors/Assistant Directors of Nursing & Midwifery and Clinical Nurse Consultants/Managers.

The theoretical developmental framework that guides the programme, involves; learning to manage self; building, developing and managing effective relationships; focusing on the person receiving care; networking; and increasing political awareness.

The central focus is on enhancement of safe quality care with the objectives of:

- developing how care is organised, implemented and sustained by developing leadership strategies to deal with the realities of day to day practice;
- facilitating professional development to enhance practice; and
- developing organisational culture to support person centred leadership and health care policy.

The programme is conducted over 12-18 months and provides substantial ongoing professional support, enabling participants to challenge personal and professional paradigms, with the aim of improving both practice and workplace culture. It works proactively with organisations and individuals to impact positively on the person, the health care team, the organisation and health care policy agendas.

In February 2003, Dr Susan Mann was appointed to the position of Director/State Lead Facilitator. Dr Mann was instrumental in the success of the Clinical Leadership Programme in Australia™ and led its

implementation and delivery, undertaking to reflect the South Australian context while maintaining the basic tenets of the Clinical Leadership Programme developed by the Royal College of Nursing of the United Kingdom. She achieved this through; consulting with the Nursing and Midwifery Executives of all participating Health Units; seeking continual structured feedback from Local Facilitators and Clinical Leaders; clearly linking the programme with strategic directions outlined by State and National bodies; developing and including content relevant to the principles of the Clinical Leadership Programme in Australia™; and undertaking ongoing review of the literature.

The inaugural Clinical Leadership Programme was offered to nurses and midwives working in public health units in South Australia. Ten Local Facilitators and sixty Clinical Leaders from fifteen metropolitan and rural health units participated in the first programme and following its success, funding was secured from the Department of Health through the Office of the Chief Nurse, for the ongoing implementation of the programme in this State. In addition to this, the International Licence to deliver the Clinical Leadership Programme in Australia™ to interested States/Territories was secured and a National Funding Agreement from the Australian Council for Quality and Safety in Health Care was secured for two years. These achievements led to Dr Susan Mann's appointment to the position of National Director in 2005. Heidi Silverston has since been appointed as South Australian State Lead Facilitator, commencing in April 2005.

The Clinical Leadership Programme in Australia™ has been implemented in New South Wales and negotiations are underway with other States and Territories. For further information about the Clinical Leadership Programme in South Australia, please contact:

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For further information about the Clinical Leadership Programme in other Australian States, please contact:

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Blood Safe Projects ...

Each year South Australians donate the precious gifts of red cells and plasma used in lifesaving treatments and to improve the quality of life for recipients. BloodSafe was established by the Department of Health, the Australian Red Cross Blood Service (ARCBS), and Adelaide's public hospitals as a joint initiative in 2002 to optimise the use of blood products.

BloodSafe has been a very successful and rewarding collaboration involving haematologists, transfusion nurse consultants, transfusion educator and transfusion medicine scientists to ensure safe and effective transfusion practices across the state. Transfusion Nursing is a relatively new specialisation within nursing and focuses on all steps in the transfusion process. BloodSafe Transfusion Nurse Consultants provide advice and support in each of the major public metropolitan hospitals. They each have a pager and are contactable through the relevant hospital switchboards. A BloodSafe Transfusion Educator is employed by ARCBS.

A new position created in the last year as part of the BloodSafe collaboration has seen the appointment of Linley Bielby as the BloodSafe IVIG (Intravenous Immunoglobulin) Nurse Consultant. Her position is to oversee the use of Intravenous Immunoglobulin products within South Australia. This is a unique role within

Australia, it has been well received and is demonstrating great results.

Two new BloodSafe projects for 2005 funded by the Department of Health are to ensure blood and products are put to optimum use across South Australia including country and private hospitals. A BloodSafe Clinical Nurse will be working with country and private hospitals to further spread the BloodSafe program through out the state and provide advice and resources enabling them to ensure they are able to meet EQuIP standards. Blood safety has recently been incorporated in the Australian Council for Healthcare Standards, with safe transport, handling and administration of blood products included in the EQuIP standards and accreditation process. A BloodSafe Transfusion Scientist will work with pathology providers throughout the state to ensure blood products are safely transported and stored throughout the state, as well as ensuring optimal use is made of all blood products generously donated.

Other developments in relation to optimal use of blood include a working group supported by the Department of Health including the ARCBS SA Branch which is formulating a state plan for the management of blood shortages due to a range of causes. Part of this plan involves hospitals being prepared to cope with alterations to the availability of blood products. Further consultations will be

occurring with hospitals and clinical groups so that the state can respond to shortages to the blood supply in a coordinated manner while ensuring South Australians have blood products available for when they are desperately needed. This project is leading the nation and its progress is being watched closely by other states. The coordinator for this project is Bonnie Fisher.

The result of these programs and projects should lead to sustained and further improvements to the safe and effective use of blood products in South Australia.

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NURSING OFFICE ROLES AND RESPONSIBILITIES

Adjunct Professor Debra Thoms, Chief Nursing Officer
Erminia Morizzi, Administrative Assistant

The following portfolios within the Nursing Office have been allocated as listed:

Deb Pratt Principal Nursing Adviser	Workforce Budget Recruitment and Retention
Heather Osborne Principal Project Nurse	Information Systems Communications/Marketing Midwifery
Robyn Parkes Principal Project Nurse	Career Structure Review
Marcia Hakendorf Project Nurse	Nurse Practitioner Research Officer to the Select Committee of Nurse Education & Training
Ian Thackray Project Nurse	NurseWest Project

The Nursing Office works closely with a number of Department of Health Divisions which include:

- Aboriginal Services Division
- Country Division
- Safety & Quality



Government of South Australia
Department of Health

NURSING OFFICE

DEPARTMENT OF HEALTH

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