

ADF NURSES INFORMATION

NEWSLETTER - December 2005

The Directorate remains busy as always.

DDFN MOVEMENTS

North Queensland Military Medicine Conference in Townsville 6 to 10 August 05.

Brisbane 26 August and 15 & 16 September 05

Tasmania 14 to 16 October to AMMA Conference

ACT Nursing and Midwifery Council Meetings with ACT Chief Nurse Adj Prof Jenny Beutel.

Presenting the Nurses Memorial to the public on several occasions during the year.

ACHSE Presentations in the Canberra area.

ADF NURSING OFFICER CAREER STRUCTURE

As previously stated there is now a single Service approach to the Nursing Officer Career Structure.

ARMY

The following key points are included in the Employment Category Standing Orders (EC SO) for RAANC:

- **Streams** Three streams will be created:
 - General Clinician (nursing officers can also sub-stream into specialities such as emergency, aviation, education etc);
 - Specialist Clinician (includes ICU and peri operative nurses); and
 - Staff Clinician.

- **Training**
 - All nursing officers are required to complete the SSO course, LOBC, Field Nursing Course and Grade 3 course for promotion from LT - CAPT.
 - All nursing officers are required to complete the LOIC for promotion to MAJ. Officers selected for sub-unit comd should also complete the Grade 2 course.
 - Nursing officers that staff stream will be required to complete the LOAC, Grade 2 course and will compete on merit for Command and Staff College. Nursing officers that staff steam will be considered for cc64 and cc69 appointments.
- **Professional Development**
 - The allocation of \$2000.00 for continuing professional development is under consideration.
- **Clinical Competency**
 - Nurses should expect to complete a minimum of 60 days per year within a clinical setting appropriate to their professional practice. This can be achieved in a combination of defence and civilian settings.
- **Time-in-Rank**
 - LT - CAPT: 4 years (in-service applicants may be considered on merit for cohort advancement in recognition of previous experience and qualifications)
 - CAPT - MAJ: 6 years
 - MAJ - LTCOL: 5 years
- **Long-Term Schooling**
 - Graduate Diploma /Certificate in Intensive Care
 - Graduate Diploma /Certificate in Emergency Nursing
 - Graduate Diploma /Certificate in Peri operative Nursing
 - Graduate Diploma in Vocational Education and Training
 - Masters of Health Administration
- **Military Nurse Practitioner**
 - This concept is being progressed by DDFN staff. In time to come remuneration for qualifications will be pursued.

NAVY

A proposal was sent to DGNPT and as yet no response has been received.

Air Force

Below is a statement released from GPCAPT Smart (OCHSW):

On 1 Nov 05, DGPERS-AF chaired a meeting regarding the RAAF implementation of the proposed new Nursing Officer Career Structure which has been developed by DDFN staff in DHSD. Present at the meeting along with staff from both these organizations were GPCAPT Geoff Robinson, WGCDR Ross Wadsworth, WGCDR Molly Walker and myself.

DGPERS-AF re affirmed the fact that the RAAF is extremely committed to adopting a viable career structure for Nursing Officers. There was general agreement that the ADF needs to adopt a more formal Nursing Officer career structure to assist in the retention of Nursing Officers and become an employer of choice in a competitive market place, particularly given the projected nursing shortage over the next few years and consequent shrinking of our recruiting pool. However it was agreed by all that the RAAF Nursing Officer specialization is not yet at a crisis point, therefore while it is a priority to implement such a strategy, we can afford to take the time to properly consider our requirements to meet both the professional development of RAAF Nursing Officer and provide Air Force with the health capability required to meet its operational capability.

At present the opinion of the Air Force is that the business case prepared by DHSD needs more work. The current proposed structure is not clearly linked with RAAF operational capability and it is necessary for RAAF to more clearly articulate these requirements before any changes are approved. Aspects such as maintenance of specialist clinical skills (e.g. peri operative and critical care nursing) in the non-operational setting need to be addressed, as does the balance between what

specialist skills are required in the PAF and what we require in the reserves.

All parties agreed that a special project was required to examine these issues from a RAAF point of view. This project will be run out of DGPERS-AF but will consult widely with DHSD, AFHQ and HSW. It is proposed that a RAAF reserve Nursing Officer is employed on RSG days to undertake this project. Issues to be addressed over the projected six month duration of the project include:

- What specialist nursing skills do we need in the RAAF (including potential roles of Nurse Practitioners)?
- What balance do we need in terms of PAF and reserve with respect to these specialties? In particular, what are the maximum and minimum viable numbers of these specialties that we can afford to keep in the PAF?
- How do we train these individuals in the PAF?
- How do we maintain their skills? (This includes looking at how we can provide a viable career/posting structure for specialist nurses (especially OT Nursing Officers) which does not involve them spending their entire careers at 3CSH)
- What training courses are required at what stage in a Nursing Officer career development?
- What balance do we need between clinical nurses and those in managerial roles, and can there be movement between both streams?

As you can see, Air Force is very much committed to making this happen as there is a strong understanding of the important role Nursing Officers play, not just within health services but in overall AF capability. The agreement to undertake a project is a good start however it will take some months to come to fruition. I therefore ask you to have a degree of patience with the process as the long term benefits are obvious.

MENTORING PROJECT

The ADF Nursing Officer Mentoring Project has been successfully completed utilizing the ARA Nursing Officer Mentoring Program model. Navy and Air Force have endorsed the Mentoring Program and still waiting for DOCM-A endorsement.

DEPLOYED ADF NURSING OFFICERS

We continue to keep in our thoughts our friends and colleagues who are currently serving overseas. As we think of them they also think of us. Recently the Directorate has received the following messages from our folks in Iraq and Pakistan. The following message from Iraq was received in time to read at the November Nursing Office Conference.

IRAQ

As you begin the conference we would like to take the opportunity to share some thoughts from the Australian Medical Detachment, Balad. We are sure that during their presentations, our predecessors will share their experiences both good and bad, the dilemmas that they faced and the solutions that they developed, these lessons will help shape our future.

As members of the third rotation, we realise that we have big shoes to fill, that the nurse, who have gone before us not only here, but in the wars, conflicts, peacekeeping and humanitarian missions in which ADF nurses have served, have set a high standard. We are trying to continue that tradition. All of us here have been challenged at some stage, either by the environment, the culture, the patient load, the trauma or the suffering, the separation from family.

What we brought with us though, was:

- A quiet determination that we have the skills and knowledge to do the task, and that we will succeed.
- Confidence not only in our training but also in our colleagues, here and back home, people that we can turn to for help when necessary, and
- a resolve that whoever presents for our care will get the best that we can provide.

- What isn't in the conference title but is possibly more important, is also to go with compassion, for those that we look after and for each other.
- Lastly, whilst deployments are what we are about, and rightly, what we focus on, we recognise that it isn't only on deployment that you require the qualities described in the conference theme, that for all of us they are required every day in every setting.

Enjoy the conference and the social events, have a beer or a wine for us, because a "near beer" is never close enough. Thank you all for the support that you have given us, it certainly means a lot, we look forward to seeing you at next year's conference if not before.

Maj Kim Sullivan

PAKISTAN

What can I say.....it is bloody freezing over here. No doubt you have all seen on the news what we are up to so I won't go into too many details but some of the medical conditions are fascinating. We are mostly doing OPD clinical work, anything from URTI - dysentery - depression - as well as seeing post earthquake injuries that have become infected.

We are no doubt saving lives with our intervention & it is satisfying to see the outcomes when patients return days later & things are improving. We are going to be starting an outreach program into the villages soon. But wouldn't you believe it.....it started snowing in the mountains just above where we are located & the wind chill factor is numbing to say the least. We have a view of India from our camp, some mountain in the distance; mind you we are on a plateau (at 3300ft) surrounded by mountains!! There is a constant helo presence as the Yanks & Poms fly humanitarian aid by Chinook past us every few hours trying to beat the weather before it closes in. So far they have dropped some 900 tonnes of aid to the helipad next to our camp, let alone other sites in the area!!

We are snuggled into tents with carpet & stretchers, the tent are meant to be air conditioned but are not at this stage as there are not enough generators to run them. At least our work tents are heated. We have plenty of Gucci gear but are wearing lots of layers to try & keep warm.

Keep an eye out for us in the RAAF news - no doubt I will owe cartons by the end of the mission!!

Coops & Henry how was the meeting with the OC?? Coops I heard you got a standing ovation at the Nursing Forum, & there were photos of us in Timor & at Henry's wedding. I was delighted to hear this news.

Well that's about it for now. I hope to hear from you soon.

SGT Maria Brown

QUALITY ISSUES

DDFN was surveyed during the recent ISO 9001:2000 Audit and SAI Global recommended that our Certification be extended. A good result since JHSA and DHSD were split into 2 separate branches of Defence Health in the last couple of months.

It was demonstrated to Auditors that DDFN practices reflected those of ADF Nursing Officers at the coalface of Defence Health and were impressed with the Credentialing Database, Conference and training for both Permanent and Reserve ADF Nursing Officers.

ADF NURSING OFFICER CREDENTIALLING DATABASE

The Credentialing Database still requires your assistance to complete and update. Utilisation of the database for core business has been proven when looking for suitably qualified and experienced Nursing Officers to be deployed on Operational Deployments. The ACT Nurses Registration Board has commenced their own Professional Portfolio for Nurses and Midwives and other State Registration Boards will soon follow. Please find enclosed attachments on the Website.

The Credentialing Database has been successfully utilised to credential personnel identified to support Operational Deployments Overseas. This Database now needs to be annually updated with information such as Post Graduate nursing courses and BLS assessments completed each year as per State Registration authorities. There is no need to complete the entire form again, just complete any new information that needs to be entered onto the Database.

JOANNA BRIGGS NURSING MANUAL

The responsibility for the promulgation and use of the Joanna Briggs Nursing Manual has been transferred to the DDFN Directorate from JHSA. This project has been successfully implemented and the Manual is now accessible in printed hard copy, CD and electronically on the DEFWEB. A link has been established on the ADF Nursing Officer Web Page and is available to all Nursing Officers, both civilian and military, for ADF business.

LEUT Robin Barrett and LEUT Meg Frugtriet will manage the Joanna Briggs Manual contract and assist ADF nursing personnel access and use all forms of the manual. Please contact LEUT Robin Barrett on (02) 6266 4001 and robin.barrett@defence.gov.au or LEUT Meg Frugtriet on meg.frugtriet@defence.gov.au with any concerns you have regarding the use of this manual.

MILITARY NURSE PRACTITIONER

LTCOL Beth Mahar (USAF) is the current Military Nurse Practitioner (MNP) project manager and is available for assistance for any ADF Nursing Officer wishing to pursue this career option. As new developments occur LT Col Mahar and DDFN will keep you informed.

The Military Nurse Practitioner project continues and the progression of this is dependant on single service agreement on the career structure.

Congratulations go to LEUT Phil Dolan RAN who has been endorsed to practice as a Nurse Practitioner by the NSW Nurses and Midwives Board. On behalf of all ADF NO, DDFN congratulates him on his achievements. Phil is the first PNF Nursing Officer to achieve this milestone. Unfortunately at this time Navy does not have a Nurse Practitioner position for LEUT Dolan to be posted into. Hopefully this will be resolved in the near future.

THE ADF NURSING OFFICER'S CONFERENCE



The 4th ADF Nursing Officer Conference 9-11 November 2005 was a resounding success. The theme "Go There with Resolve, Competence, Confidence and Ethics" highlighted the role that military nursing provides to a deployable health capability. The presentations were professional, stimulating and challenging. There were many emotional moments when our colleagues permitted the attendees to share their personal experiences. This year the conference had a greater international attendance with colleagues coming from the United States, New Zealand and Indonesia. There were also civilian nursing colleagues and all participated in making the conference the success that it was. The conference attracted 18.5 CNE Points (Continuous Nursing Education) from the Royal College of Nursing Australia and 17 CPD Hours of (Continuous Professional Development) from the NSW College of Nursing.

Next year there will be the 2006 Defence Health Symposium and we have been requested to support this. Planning has commenced and information will be sent out regarding this when available. The plan is to run the ADF Nursing Officer Conference in conjunction with the Symposium. Nursing requires two days. The symposium will provide opportunities for nursing presenters to speak to a wider audience and there will be the opportunity for other health personnel to listen to the amazing stories of nursing officer. We hope to see you all there and will assist those who will be presenting posters.

AUSTRALIAN DEFENCE FORCE NURSING OFFICER CONFERENCE POSTER GUIDELINES

In anticipation of the large number of abstracts being submitted, for the 5th Annual ADF Nursing Officer Conference which will be run in conjunction with the 2006 Defence Health Symposium, the opportunity exists to run poster presentations as well as podium presentations. Presenters will be notified if their abstract has been accepted for a podium or poster presentation and the poster sessions will be held throughout the conference. The principle presenter on the abstract will be notified of when they will need to present their poster.

Poster sessions will provide an intimate forum for exchanging information by the facilitation of informal discussions between presenters and their audience. A well-constructed poster will be self-explanatory so that the presenter is free to supplement and discuss particular points of interest.

Requirements

- Posters should be on a poster size card 59 X 84 cm
- Limit of 1 poster per presentation
- Recommend laminating posters
- All accepted abstracts will be reproduced in a “book of abstracts”

Tips for Posters

- Provide adequate coverage of your material
- In addition to title/author label and abstract, successful posters provide brief statements of introduction, methods used, subjects, procedures, results and conclusion if appropriate
- Ask “What would I need to know if I were viewing this for the first time?”
- Provide clarity in the presentation
 - Is the sequence of information evident?
 - Is the information communicated clearly?
 - Keep it simple
- Extensive, imaginative use of captioned illustrations, photographs, graphs or other types of visually appealing material is the point of a poster presentation.
- **If you need any assistance producing your Poster DDFN has access to Defence publishing who is prepared to assist.**