

ADF NURSES INFORMATION

NEWSLETTER - Oct/Nov 2002

Welcome to the last newsletter for 2002, we have had a busy year and the time has flown by. The Nursing Directorate has made some significant advances and will continue to develop and expand the current works in progress. We continue to progress the proposed Military Nurse Practitioner, despite the perceptions by some that this is not going anywhere. While the nurse practitioner role has been talked about for many years, the reality is that it is only recently that nurses have been authorised at this level in Australia. The Nursing Profession is still doing battle with colleagues in the Medical Profession to justify the role of the NP, it seems that there is still a high level of misunderstanding of the role itself, the level of education required, the process of authorisation and the fact that these nurses don't want to be doctors! We have made significant progress with the NSW and SA Registration Boards with regard to the MNP and development of the Scope of Practice for the various models of MNP are underway. For those who are interested in going down this path we urge you to visit the web sites of the various registering authorities and look at their requirements for authorisation as a nurse practitioner. It would be a wise move for those of you aspiring to MNP to make a start on gathering your information and recording and pursuing your professional career, education and experiences in line with these requirements.

DDFN and SO1 NURS attended the ICN Nurse Practitioner Conference in Adelaide last month, NP's from around 33 countries attended.

It was a valuable few days with a huge program that made it difficult to decide on which session to attend. While Australia may not have many authorised NP's, what was clear was that we have a well developed and comprehensive authorisation process that ensures that the NP is suitably educated and experienced to be performing that role.

The Inaugural ADF Nursing Officer Forum was a huge success with nursing officers attending from all over Australia. Being the first Forum we were keen to see that everything went according to plan and apart from a couple of minor hitches, it did. Our keynote speakers proved to be very popular. On Thursday 7th Nov 02, AIRCDRE Austin officially opened the forum and communicated his support of ADF nursing to the audience. AIRCDRE Hammer spoke of leadership in the ADF and I have since heard that she has become a role model to some members of the audience. Professor Glenn Gardner spoke of the MNP trial held in the ACT last year, and was able to answer some questions in relation to the trial.

The Keynote speaker on Friday 8th Nov 02 was Patricia Heath, Patricia spoke to a slightly diminished audience (probably due to the success of the Forum dinner at Duntroon House the previous evening!) on the National Review of Nursing Education. Patricia held the audience in the palm of her hand speaking of her dedication to nursing and the passion with which she promotes nursing and the majority of the audience came away from her presentation with a renewed passion for nursing. One Service Doctor was reported to have said that she now wanted to be a nurse!! Patricia also joined us at the Forum dinner, an experience she said she would not forget (in a good way!!).

Presentations from ADF nurses, both permanent and Reserve were of a high quality and most informative, thank you to those who shared their work with us. It is hoped that ADF nursing officers will embrace the opportunity this Forum will provide on an annual basis and work toward presenting experiences, ideas and research not only to the ADF Nursing Officer Forum but to other conference events both civilian and military. A report on the Forum Survey will be available on the ADF Nurses Bulletin Board, there were some very good suggestions from a lot of people, which is hopefully an indication of the amount and types of abstracts that will be submitted next year.

SO1 NURS:

On a more personal note, I would like to thank CAPT Jenny Graham, RAN for giving me the opportunity to work in the Directorate of Defence Force Nursing this year. It has been a very interesting year, I have had many opportunities to meet new people and participate in the progression of the nursing profession within Defence.

As a civilian, I found the work a challenge and often doubted my ability to do a good job. With the support and encouragement of CAPT Graham, LTCOL Bev Wright and SQNLDR Paula Ibbotson, to name but a few, I feel that I have managed to make a positive contribution during my time here.

I will miss the interaction I have had with the wider ADF nursing population and encourage you all to continue contributing to and supporting the further development of ADF Nursing.

Lyn Burnett

OPERATION BALI ASSIST

On 13 October 2002, the ADF contributed to the DFAT-led whole-of-government response to the Bali bombing disaster. ADF tasks included aeromedical evacuation (AME), movement of personnel and equipment, and forensic dentistry support for Disaster Victim Identification. Full-time and Reserve ADF Nursing Officers were an integral part of this successful mission.

The initial ADF AME response was coordinated out of HQAC where the health team is lead by a WGCDR Nursing Officer, in the SOH position. Five AME sorties were flown for the initial evacuation of Australians and Approved Foreign Nationals (AFN) from Bali, returning 69 civilian personnel (AS 51 and 18 AFN). Five AME teams where used (1 per sortie) totalling 34 full-time and Reserve health personnel.

A high proportion of the casualties from this disaster had significant burns, with or without other traumatic injuries. The nature of the injuries in conjunction with the limited resuscitation and stabilisation available in Bali made in-flight management difficult. To their credit, the dedication, skill and professionalism of the AME teams meant that there was only one death in flight.

Personnel at the Operational Health Support and Training Flight of 3rd Combat Support Hospital (Richmond) and 321 Health Services Flight (Darwin) provided significant support during the evacuation while HQNORCOM staff coordinated patient reception with the Royal Darwin Hospital and other government agencies in Darwin.

As the situation evolved and the extent and severity of the injuries became evident, the national burns plan was activated to distribute a number of patients to burns units across Australia. Four AME Missions (39 civilian personnel) were flown from

Darwin post evacuation. These were to Brisbane, Sydney, Perth, and Adelaide - Melbourne. The AME teams involved in the initial evacuation were used for these subsequent missions. The ongoing management of these patients is now in the hands of our civilian colleagues and we wish them the best in their efforts to heal the injured and assist them in rebuilding their lives.

There were further evacuations of Indonesian patients by the NZ aircraft and AME team (the NZ C130 was primarily involved in moving personnel and equipment) and an additional AS mission Bali - Perth evacuated three Indonesian patients with severe burns. The mission was required to stop over in Darwin as one of the Indonesian patients deteriorated and subsequently died shortly after arrival. The team continued the AME of two Indonesians from Darwin to Perth.

Operation BALI ASSIST demonstrated the ability of the ADF Health Service to deliver high quality health care and services in a crisis. The role played by ADF Nurses in both the HQ level planning and evacuation of casualties demonstrates significant military and professional competence while the ongoing health care management and healing of victims, and their families, highlights the importance of nurses in healing the fabric of our society.

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CRITICAL CARE NURSING COURSE, FORT SAM HOUSTON, TEXAS USA

For the period 17 June to 9 October 2002 I was fortunate enough to attend the Critical Care Nursing course held at Brooke Army Medical Centre, Fort Sam Houston in San Antonio Texas. I have to start by saying that this course was the experience of a lifetime. I felt honoured to represent the Royal Australian Navy and the Australian Defence Force. I undertook the course with 16 of my US Army counterparts.

The course consisted of a 2-month didactic phase and 2 month clinical phase. The didactic phase focused primarily on anatomy and physiology, pathophysiology and hemodynamics. During the didactic phase critical care procedures and specific intensive care nursing issues were covered. The clinical phase was conducted at Brooke Army Medical Centre and Wilford Hall Air Force Hospital. Students were precepted in Surgical, Medical, Burns, Paediatric and Neonatal Intensive Care Units as well as elective rotations to Emergency and Post Anaesthesia Care Units. During the clinical phase students worked with a preceptor for 12 hours shifts.

I found the course to be one of the most challenging courses I have completed in my career. It was intensive and required a great deal of study. However it was enjoyable and I feel that I have grown both professionally and personally from the experience. I feel that I would not have received the same benefits if I had completed a similar course in Australia due mainly to the level of trauma experience I gained by working in a level 1-trauma facility in the USA. Another benefit was working with US counterparts in a military environment as this enabled me to see how other forces operate and their vast experience in wartime casualty care.

I highly recommend this course to my nursing colleagues throughout the ADF and would be happy to answer any questions. I can be contacted on (03) 59 50 7533.

Bronwyn R Low

LEUT, RAN

HMAS CERBERUS



Above: LEUT Bronwyn Low graduating from the *Critical Care Nursing Course*, San Antonio, Texas

Below: LEUT Bronwyn Low and US colleagues from the *Critical Care Course*



International Society for Quality in Health Care
Conference 4-8 November 2002-11-13
UNESCO Paris

Conference Report: Major Maggie Parker, SO1 Clinical Governance, JHSA

(PICTURE OF PARIS FROM EIFFEL TOWER)



Just a quick note to my colleagues on the above conference, from which I have just returned. This photo by the way, is taken from the Eiffel Tower looking toward the Arc de Triomphe, the day before the conference started, and the ONLY dry day for my entire stay. Oh that I could have bought the rain back with me.

There were over 1100 delegates from all over the world attending the (largely) English language conference. The conference theme was 'Building Bridges and Crossing Boundaries in Quality Improvement'. The first two days was devoted to indicators with a theme of 'Using performance measurement to improve the quality and safety of health care'. Surprise, surprise one of the findings is that measurement is not a neutral activity, evoking considerable anxiety and frustration among all concerned - those who are being measured, those who are doing the measuring, and those who are seeking the data for a variety of purposes. Further to that the ultimate questions relate to the value of measurement, as measurement

adds new costs to the health care delivery system. An interesting conundrum.

Various speakers explored the dimensions of clinical indicators, including presenters from the United Kingdom Quality Indicator Project (UK QIP®). That project involved the collation and comparative feedback of hospital-wide clinically relevant indicators, with substantial support to their effective use, including training and education.

The next three days were devoted to a very full conference programme on quality in health care. The major emphasis was patient safety, and the strategies that could be used to achieve good outcomes toward this end. The format for the days included plenary sessions at the beginning and end of the programme and an absolute plethora of concurrent sessions and workshops - we were spoiled for choice, and unfortunately often found several sessions being conducted at the same time which would have been of enormous benefit. The speakers at the plenary sessions were world leaders in their respective fields, and of immense interest.

From a nursing point of view, and one which could be exported to our medical colleagues, was the absolute requirement to work in a collegial, no blame environment. Professor Sir Ian Kennedy, who was the Chairman of the British Government Public Inquiry into the Bristol Royal Infirmary who gave the concluding address was adamant on the need to work in teams, and have each and every health professional as a valued member of that team. He deplored the hierarchical perspective in health generally, and said that there needed to be a major change in the health care culture. He also said that this would best be achieved with a multi-disciplinary approach to the education of health professionals (perhaps the first year at university) so the lesson that there are no 'lesser mortals' in health is learned early.

I will be writing a much larger report on the conference as a whole, which with the concurrence of DJHSA I shall post on the JHSA website. The real value of these conferences is the opportunity to network with international colleagues (even if you have to go to Paris, to have yourself put on an Australian mailing list for safety reports!) The conference left me with an optimistic outlook on the future of health care. If the will that was demonstrated at this conference for change, which will positively enhance patient care, is followed through by action, we can all be optimistic.

RETIREMENT OF RAANC NURSING OFFICERS

MAJOR A. NEWELL

The venue of the Inaugural ADF Nursing Officer Forum Dinner at Duntroon House was utilised to farewell and congratulate MAJOR Annette Newell, RAANC, on her retirement. MAJOR Helen Kerr spoke of MAJ Newell and her career in the presence of approximately 92 of her Tri-Service colleagues and civilian guests.

Annette was commissioned to the Army Reserve on October 20 1981 in Perth WA, she spent from 1981 to 1986 with 7 Field Ambulance. She transferred to the ARA in December 1986 as a Captain Nursing Officer and posted to 3 Camp Hospital at Puckapunyal. In 1989 she posted to the School of Army Health detached to Yeronga, in 1990 she posted to the School of Army Health, detached to Ingleburn. Annette was promoted to Major in 1992 and posted to 2 Field Ambulance in Townsville. 1994 saw Annette posted to 1 Field Hospital before spending the next three years as Senior Instructor at the School of Army Health Portsea, Trade Training wing School of Army Health and Personnel Support Division Health Service Wing ALTC. During this time Annette was instrumental in assisting with the merger of the School of Army Health Portsea to become part of ALTC.

In 1997 Annette posted to 1 RTB as the OC Admin Coy before deploying to Bouganville in 1998 as part of OP BEL ISI. Annette was OC at Kapooka Medical Centre in 1999 and OC 1HSB in 2001. Most recently Annette was deployed as the SNO UNMILHOSP 6 East Timor.

Annette is a member of the Florence Nightingale Committee and has helped to organise the Coral Sea celebrations and the RCNA conference in Townsville. She has been described as someone who is very loyal to the Corps and to those she works with, and is very protective of her soldiers. Annette is a born educator and actively

encouraged her colleagues to maintain their skill levels, with regard to this she also practiced what she preached by maintaining her own skills.

At her own expense, Annette travelled to Uganda to assist in immunisation programs, she also underwent Midwifery refresher training at her own expense. She is very simply described by her friends and colleagues as "a really good friend", we wish her well in retirement and thank her for her contribution and loyalty to the RAANC.

MAJ Annette Newell

All RAANC members wish to thank you for your contribution to the Corps as both a Reserve and Regular member. Your decision to transfer to regular service provided the Corps not only with an extensive theoretical base, but a broad practical background that has ensured your credibility in the Corps and the wider Defence Health community. Your contribution to Health training and the opportunity to share the many discussions on the ongoing education of medical assistants has been truly appreciated.

In your return to Perth and the civilian sector I am sure you will, as always, achieve what you set out to do.

Annette, RAANC wishes you every success in your future endeavors.

Mary Brandy
HOC

MAJOR P.J BAILEY

Major Peter Bailey was commissioned into the RAANC as a LT in Nov 1981 in Sydney, his first posting was to 2nd Military Hospital - Ingleburn where he worked in surgical, medical and casualty wards. Peter posted to the 11th Field Ambulance - Enoggera in 1983 where he worked as a Training Officer and Resuscitation Nursing Officer.

January 1985 Peter posted to 4th Camp Hospital in Townsville where he worked in surgical, medical and casualty areas. During this posting peter participated in EX ANZAC Exchange with New Zealand from May to July 1985.

Peter was posted to long term schooling at the Queensland Institute of Technology where he completed a Diploma of Applied Science - Nursing Education. He was

promoted to Captain in 1987 and posted to the School of Army Health - Portsea where he worked as an instructor. Peter received a CGS Commendation and a CO's Commendation in 1987.

January 1989 saw Peter posted as Acting OIC and Project Officer, he was the first ARA RAANC officer to gain Basic Parachute qualification. He successfully raised and deployed 1PST for the first time as a unit in 1989 on EX Far Canopy as part of the PBG. Peter also participated in the 75th Pilgrimage to Gallipoli in 1990.

Peter was promoted to Major in January 1991 and was posted to the School of Army Health - Portsea where he worked as the Senior Instructor, Trade Training Wing. In June 1991, Peter was the first RAANC officer to be offered the chance to participate in nursing education in the USA. He completed the Battlefield Nursing Course at the School of Aerospace Medicine - Brooks Airforce Base. He also attended the Academy of Health Sciences - Fort Sam Houston where he completed Combat Casualty, Critical Care, Basic and Advanced Life Support courses. Peter also attended the Institute for Surgical Research - Fort Sam Houston where he completed courses on burns trauma and management.

In February 1992 Peter posted back to the School of Army Health - Portsea where he once again took on the role of Senior Instructor Trade Training Wing. In 1995 Peter posted to Kapooka where he was Acting OIC and SNO at the Medical Centre, he posted to Kapooka Medical Company in 1996 as Company Commander. During this time he conducted the AME Trial in Nth Australia from August to October of '97.

In January of 1998, Peter was posted to Long Term Schooling to Wollongong where he completed a Master of Nursing Education (Acute Care and Education). He posted to 1st Field Hospital - Holsworthy in January 1999 where he worked as SNO/OC Clinical Support Coy. Peter deployed to East Timor with UNTAET as 2IC FST (LT)

and OIC ICU, then as SNO/OC Clinical Support Coy FST (HVY) in Dili. February 02 saw Peter posted MNRE and his effective date of discharge is November 15 2002. We wish Peter well in his retirement, and thank him for his contribution to the RAANC.

MAJ Peter Bailey

On behalf of the RAANC I would like to thank you for your contribution to the Corps during your military career. You were instrumental in defining the role for Nursing Officers in Land Command positions. Your eagerness and initiative set a standard that earned the respect of Corps and non-Corps personnel alike. At the inception of the Parachute Surgical Team you were at the forefront and worked aggressively to ensure that Nursing Officers were integral to its function. Your enthusiasm in the education environment did not go unnoticed and your legacy is evident in many of the senior members of the RAAMC and RAANC today. Peter, RAANC wishes you every success in your return to the academic world. I am confident you will do well.

*Mary Brandy
HOC*



THE ROYAL AUSTRALIAN ARMY NURSING CORPS 100TH BIRTHDAY July 2003

In 1902, a General Order giving effect to an improved organisation for nurses was written and promulgated on the 1st July 1903. Paragraph 9 of General Order 123/1902 stated... **"An Army Nursing Service Reserve will be organised from those trained nurses who are qualified and willing to serve as such with stationary Field Hospitals and Base Hospitals when required upon a National Emergency."**

As the Australian Army Nursing Service formed the basis of the RAANC, the first of July is therefore celebrated as the birthday of Army Nursing and celebrated as the Corps Day. Each year celebrations occur as close to this date as possible.

On the 1st July 2003 the Royal Australian Army Nursing Corps (RAANC), will celebrate its 100th birthday. To mark this important milestone a number of activities will occur between 4th -6th July 2003, in conjunction with the Royal Australian Army Medical Corps which will also celebrate its 100th birthday. Some of the activities will include a conference, formal dinner and church service.

Memorabilia will be produced including a medallion, which will be available for sale from January 2003.

All RAANC members, past and present and their families are warmly invited and encouraged to attend. We look forward to seeing you all in July 2003.

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