

AUSTRALIAN NURSE TEACHERS SOCIETY

WORKING TOGETHER FOR THE FUTURE OF NURSING



COVER DESIGN: Bike-powered bush Santa in western Queensland

E-BULLETIN

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ANTS

www.ants.org.au

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FROM THE EDITORS DESK



Since the last edition my role has changed ... I have been seconded position within the local health network. My role requires me to across campuses. After being in education for 20+ years you suddenly realize collected resources. Each time you move office or undertake a secondment you have a clean-out ... but it somehow seems to accumulate again. I have moved from a dedicated office with 24 folders [plus all the rest of my 'stuff'] ... to a 'hot-desk' and down-sized to 3 folders and a mobile office on wheels.

There has been a lot of conference activity with promotion of ANTS as a professional organisation [see the conference reports in this edition]. As educators we often have an interest /portfolio in other specialities, therefore in each edition there will be a short overview of another professional association and the website link. If you are a member and would like to do a short overview please forward to my email for inclusion.

All the best for the festive season and keep safe ... hope to from you in the New Year to share your stories and activities.

Karen Simonov
e-Bulletin Editor

ANTS MEMBERSHIP TYPES

ORDINARY MEMBERS | Healthcare professionals engaged in nurse/midwifery education

Category One: RN/RM primarily engaged in the education/teaching of nurses/midwives

Category Two: RN/RM engaged in education/teaching of nurses/midwives as part of their role, but generally it is not their primary role

Category Three: Healthcare professionals primarily engaged in the education/teaching of nurses/midwives

ANTS PRESIDENT REPORT | CHRISTMAS 2015



Hi everyone and welcome to the Christmas edition of the bulletin

Its amazing how fast 2015 has come to an end and we need to start planning for 2016!

2015 has been a successful year for ANTS in terms of marketing and increasing memberships. With attendance at both CoNNO meetings - all CoNNO posts are passed on via the ANTS moodle, so that members have access to the information we receive from this group. Each CoNNO meeting we attend is a good opportunity to get updates about Nursing issues from the Federal and State levels as well as a great networking opportunity.

ANTS has been exhibitors at the ACN in Brisbane, Moodle event in Sydney, ANZSVN in Adelaide, we were also represented at the ANZEC in New Zealand amongst other events that provided an opportunity to showcase our organisation.

There were a number of successful events held in some of the states through the year. WA are doing a fantastic job of keeping meetings and education events going. SA held two events, one country and one city, both were well attended and we have also been lucky enough to have 2 members from QLD join National to participate in keeping the organisation running. A BIG thank you to all who were involved in the events and promotion os ANTS

I was recently invited to attend the NT Walkabout, NT Convention Bureau event held in Adelaide, it was an expo style event designed to meet the primary convention, accommodation and tourist attraction promoters from across the NT. The evening was well set up with a 5 minute speed meeting (sort of like speed dating) with each operator so they could pitch their business.... The NT looks like a great place to either attend a conference or take a holiday...Its on my bucket list for sure!

2016 will see the NETNEP International Nurse Education conference being held in Australia, at the Brisbane Convention Centre. I think this is a fantastic opportunity for members to attend an International education conference, as those that were at the 2010 International in Sydney could also confirm. ANTS will hold its 2016 AGM during the conference the day / time is to be confirmed so it will be good to have as much representation for our organisation as possible at this event. For those members that have applied for scholarships to attend National Executive will get back to you very soon regarding the status of these applications.

ANTS President Report | Continued from previous page

National Executive decided that ANTS would support the 2016 NETNEP rather than go in competition to this international event as we felt that members would reap more benefit if they were able to attend an international event - we all know how difficult it can be to achieve release from work duties to attend conferences as well.

National Exec will meet for the last time in 2015 this week and will identify plans for 2016 National Action plan. Once this is completed it will be posted for members to view.

I would like to thank you all for your ongoing support of ANTS, posting your questions etc on the moodle site and of course maintaining your memberships to ANTS

On behalf of the national Executive I would like to wish you and your families a safe and very happy festive season

Merry Christmas and Happy New Year

Michelle



NETNEP 2016

6th International Nurse Education Conference



3-6 April 2016 | Brisbane, Australia

Transforming education practice through scholarship, development of academic leadership and evaluation research: committed to improving the lives of communities worldwide

Care of the patient is becoming increasingly complex, not only in relation to the outcome from new technologies and medicine, but also in relation to the needs of an increasingly ageing population, many with long term health and social care needs.

This complexity of care delivery requires practitioners who are able to respond with an equivalent complex skill set, underpinned by an advanced knowledge base as well as the core caring skills that are inherently nursing.

NETNEP 2016 encourages the sharing of research and practice of nursing, midwifery and health care education as it impacts on the learning experience of students and qualified practitioners, and the health and social care needs of individuals and communities worldwide.

For this conference we will be adding a new stream for the Midwifery Profession: Midwifery Education in Practice, where there is focus on collaborative education initiatives between women and midwives and delivery of education within the maternity services internationally.

NETNEP 2016 encourages the sharing of the research and practice of nursing and healthcare education as it exists in the classroom and in clinical practice and promotes networking opportunities for colleagues from around the world. The NETNEP series of conferences has attracted delegates from more than 40 countries worldwide which brings a richness of sharing with, and learning from, each other. This networking and collaboration is promoted throughout the conference.

Whom should attend NET-NEP 2016

The conference experience is for anyone involved in the delivery, development and organisation of nursing and healthcare education, as well as those who actively engage in participating in educational programmes. The conference particularly welcomes contribution from faculty, nursing, midwifery and healthcare educationalists, academic administrators, senior education managers, practitioners, researchers and students.



ANTS
The Australian Nurse Teachers' Society
Working Together for the Future of Nursing Education

**The National Nursing
Forum
Brisbane 2015**

**Meeting old friends
Making new ones
Welcoming new
members**



ANEC 2015: THE AUSTRALASIAN NURSE EDUCATORS' CONFERENCE 2015



11-13TH NOVEMBER 2015, AUCKLAND, NEW ZEALAND

DR CHRISTINE TAYLOR, NATIONAL TREASURE ANTS, SENIOR LECTURER, WESTERN SYDNEY UNIVERSITY

I had the pleasure of attending the 2015 ANEC in Auckland, New Zealand. I was made welcome and the attendees were very friendly and generous in sharing their experiences through the presentations and posters. The conference was successful with around 350 attendees and enthusiasm lasted for the whole of the conference program. The key note speakers were excellent, with a focus on leadership for change, and starting that change from within ourselves.

I participated in adjudicating the fun theme debate between two teams on the last day and it was greatly enjoyed. The theme was “*Shall we keep our New Zealand RN Medal?*”. The RN medal is the nursing badge they can buy when they initially register as an RN. The vote, by audience applause, was overwhelming in favour of keeping the medal.

No conference would be complete with a ‘dinner’ event where we have the opportunity to network with our colleagues. The theme for the dinner was masquerade and everyone wore masks to the event with fun prizes handed out by the MC. I think our New Zealand colleagues like dancing as much as we do, and you can be assured that we Aussies did not ‘let the side down’ when it came to contributing to filling the dancing floor.



ANTS QUEENSLAND BRANCH

The Queensland Branch held a very successful education evening on 13th October at Gold Coast University Hospital.

The education seminar was entitled “*Student learning: Providing constructive feedback*” and was open to members and non-members. It was an informal participatory session, which gave everyone the opportunity to contribute their experiences providing student feedback and discuss what to do and what not to do.



The topic raised a lot of debate amongst facilitators, clinical nurses and academics, all of whom described their role and challenges with providing student performance feedback.

The session also provided an opportunity to introduce the Australian Nurse Teachers’ Society (ANTS) to non-members.



The next seminar will be held in the New Year - details to be announced in early 2016.

For those members in other parts of Queensland, if you have any ideas for an education session and would like this facilitated, please get in touch with us.

You can contact us via the ANTS website or send an email to Julie Shaw

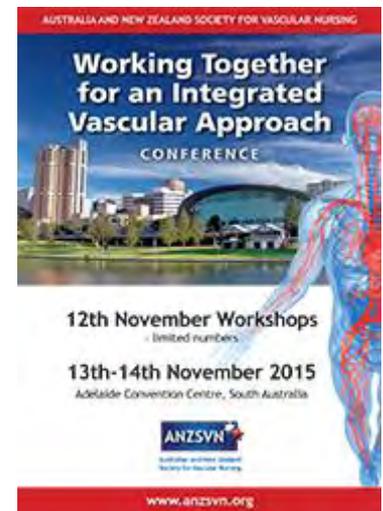
Email: j.shaw@griffith.edu.au

ANZSVN VASCULAR CONFERENCE 2015

12-14TH NOVEMBER 2015, ADELAIDE, SA

ANZSVN CONFERENCE CO-CHAIR AND ANTS REPRESENTATIVE KAREN SIMUNOV

In other years the Vascular Conference has been collaboration between Surgeons, Nursing, Imaging and Phlebotomy. For 2015 the conference moved to Honolulu, Hawaii, which was out of reach for most nurses, therefore South Australia offered to host the inaugural ANZSVN nursing conference. Having just completed being on the organising committee for the 2014 NNEC Conference, I volunteered to be the Co-chair and Organiser for the 2015 ANZSVN Nursing Conference. Between accepting this task and completion both myself and my Co-chair underwent an unplanned change in our positions/roles and began working across campuses within our health network.



A conference committee was formed with sub-groups identified to share the workload and a plan to be held over three days to include pre-conference workshops for non-conference delegates to also attend. ANTS as an organisation attended in an exhibitor capacity and sponsored the coffee cart on the Saturday to increase our profile. Although no delegates became members, several identified interest and took a membership form

Sleepless nights were had as deadlines approached and plans went astray. The end result was a conference that measured success by the feedback from sponsors, attendees, speakers and others involved venue staff. Thank you to all involved from registrants, speakers, sponsors, organisers and others involved on the professionalism in making a successful and enjoyable conference.

Thursday 12th November | Pre-conference Workshops

Designed for the Level 2 -3/4 clinician the **Value for Your Service Workshop** [sponsored by Coloplast™] reviews the relationship between yourself as an individual and team member, the service you provide and the organizational requirements. The first question asked was “Is the job/role that you are currently undertaking the same as the one you signed-on for?” For many the answer is no, as it has changed over time with technology, patient acuity, therapies, funding, administration ... the list goes on. How do we identify what we do within our role and workday to others within the organisation? Group work using the templates provided

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ANZSVN Vascular Conference 2015 | Continued from previous page



allowed for discussion and planning as to how this may be implemented on an individual level.

In collaboration with University of Adelaide Medical School an evening **Cadaver Workshop** saw fifty-five attendees (including non-conference delegates) take the opportunity to observe first-hand the vasculature and organisation of the human body. Attendees were put through their paces with questioning on the anatomy of the vasculature throughout the body and encouraged to actively participate with the session extending past the planned finish time.

Friday 13th November | Conference Day One - AGM - Gala Dinner

Opening Address by Melissa Noonan, Limbs for Life on the importance of the interdisciplinary team and early identification of health literacy and in closing a gentle reminder that peer support (in collaboration with clinicians) is often of greater benefit to the client as they can identify with another whom has gone through a similar journey.

The theme for Day One was **Wound Management - Interdisciplinary - Lifestyle** with presentations from allied health, medical and nursing ran the gamete from clinical practice, case studies and research.

As an educator the sessions that had the most impact for me were:

A Diary of a Diabetic - Verbatim | The thoughts from a person living with diabetes for 20+ years and the multiple missed opportunities resulting in double amputation, limited eyesight and financial hardship due to a lack of knowledge from the allocated clinicians and self. The aim of the narrative was to increase awareness of diabetes and the ensuring complications as told to the nurse [with permission his words were written and presented by the treating nurse as he was unable to attend]. His identified learnings were:

- Get a second opinion and contact a diabetes nurse educator at the local hospital
- Keep in regular contact with your endocrinologist
- If you find a blister or cur(sic) it is imperative to see a doctor to avoid an ulcer
- If you are told you have borderline Type 11 do something about it cause once you get it, it won't go way

Pressure Injury Prevention | How one person [Naomi March, Enrolled Nurse Diploma, FMC, SA] with passion and encouragement made a difference in the prevention of pressure

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ANZSVN Vascular Conference 2015 | Continued from previous page



injury with the development of a poster and brief educational opportunities within the clinical area. A very nervous Naomi invited her grandparents to her presentation débute and was subsequently awarded the Novice Presenter sponsored by Abbott Vascular.

The **ANZSVN AGM** was held after lunch resulting in an executive committee of new and current members with representation from New Zealand and every Australian state/territory except Northern Territory, the largest committee since formation of the association.

As it was the thirteenth day of the month, the **Gala Dinner** sponsored by Hartmann™ was themed ‘superstition’ with attendees encouraged to dress accordingly. Sponsored by Hartmann™. Entertainment to dance the night away was provided by Adelaide band UK Blitz [<https://www.facebook.com/UK-BLITZ-3868673013528/UK-BLITZ>] who were also at the NNEC dinner. During the evening proceedings, the award presentations were undertaken:

- Debriflo Scholarship awarded to Sue Monaro, NSW [\$10,000.00]
- ANZSVN Nurse of the Year 2015 awarded to Karen Simunov, SA [sponsored by Terumo]

Saturday 14th November | Conference Day 2

To continue with the theme of work-life balance from the 2014 conference the second day was opened by Samantha Young, Broomhall-Young Psychology on the importance of looking after yourself by identifying stressors (potential and actual) and developing strategies to maintain both your psychological and physical health.

After morning tea the invited and abstract presenters re-commenced with a renal theme titled ‘The Renal Patient | Head - Fistula - Kidney - Toes’ to be followed after lunch with the ‘Vascular Patient and Interventions’. With a change of focus from Day One to cater for the diversity of vascular nursing areas the invited speakers and abstract presenters presented on patient choices for treatment, types of treatment and emerging technologies both interventional and non-interventional.

My favourite sessions was

Foot care in the renal patient - the need for an integrated approach [Ereena Torpey, Podiatrist, FMC, SA]. Renal patients visit healthcare centres regularly as day patients with the focus on renal disease ie KIDNEY with other body systems often over-looked. However, from a vascular viewpoint this is

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ANZSVN Vascular Conference 2015 | Continued from previous page

an ideal situation as they recline in the chair, to undertake regular foot screening and engage the individual (and their family) in discussion on potential and actual issues from risky behaviours and knowledge deficit (disease process, nutrition, ...) for health promotion/self-responsibility. The risk of amputation is overall higher in renal patients as they often have the co-morbidity of diabetes (usually Type II) and associated complications.

Food for Thought | when you see feet covered, take a peek under the covers!
Higher risk for amputation if comorbidities of diabetes and renal disease on dialysis.



Naomi March, END | Novice Presenter Award



Tabatha Rando, NPC | Best Presenter Award

Pre-Conference Workshop



Gala 'SUPERTSITION' Dinner



PROFESSIONAL ASSOCIATION | VASCULAR NURSING

The Australian and New Zealand Society for Vascular Nursing ANZSVN is a professional nursing organization dedicated to promoting excellence in the nursing care of individuals with vascular disease by providing quality education, fostering clinical expertise, supporting nursing research and contributing to the prevention of vascular disease.

OBJECTIVES

- Represent Australian & New Zealand Vascular Nurses as a professional body and assume a leadership role in the advancement and promotion of the specialty of vascular nursing
- Promote an Australian & New Zealand network of vascular nurses through a website, newsletters, conferences and the facilitation of regional groups
- Liaise and collaborate with national and international professional bodies and individuals who share concern and interest for people with vascular disease
- Enhance public awareness of vascular disease and encourage members to be active within the field of vascular health education and health promotion
- Assume the leadership role in defining and advancing the evidenced-based education of nurses involved in the care of patients with vascular disease
- Facilitate and encourage vascular nursing research

MEMBERSHIP AND LOCAL GROUPS

If you have an interest in vascular disease then this association may be of interest to you. Membership is open to healthcare students, allied health, medical staff and of course nurses across Australia, New Zealand and the internationally.

Active Membership: Nurses registered with the Australian or New Zealand Registering Authority. Active members will automatically be deemed members of the ANZSVN.

Associate Membership: Allied Health Professionals, Nursing Students and others with an interest in supporting the purpose of the Society and may not hold office or vote.



Australian and New Zealand
Society for Vascular Nursing Inc.

[HTTP://WWW.ANZSVN.ORG/INDEX.HTML](http://www.anzsvn.org/index.html)

NATIONAL GRADUATE NURSE AND MIDWIFE ROUNDTABLE ATTENDEES AND WORKING GROUP MEMBERS: UPDATE

DR CHRISTINE TAYLOR, NATIONAL TREASURE ANTS, SENIOR LECTURER, WESTERN SYDNEY UNIVERSITY

I attend a regular meeting of interested organisations related to new graduate nurses on behalf of ANTS. Previously I have described a national face-to-face round table meeting that was held December 2014 to discuss the lack of positions available and as a group decided to investigate and develop strategies to address this issue.

During the year we have sought to identify sources of accurate data to give a picture of the situation, and have identified and developed some data to explode the myths around new graduate positions and their performance. We will present the findings and work so far in another round table discussion, probably in February 2016.

MEMBER [LOCAL] EDUCATION EVENTS



Are you interested in planning a forum / networking meeting / study day in your local area?

START PLANNING YOUR 2016 ACTIVITIES EARLY IN THE NEW YEAR

Template(s) for event planning - time line, planning details and budget

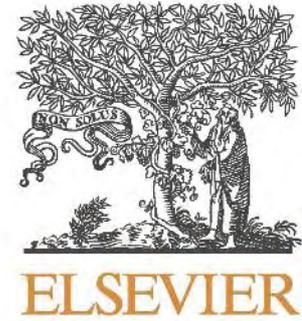
www.ants.org.au/course/view.php?id=25

Assistance is available from Ants National via email

office@ants.org.au.

SURVEY RESPONSES TO ELSEVIER

Thank you so much to those members who completed the educational survey to provide data for Elsevier's Australian and New Zealand Nursing Advisory Board. The results are given below. You may find these results useful in your practice and may wish to discuss them with your colleagues or in an ANTS forum.



Note to members: I produced this survey using LimeSurvey. LimeSurvey is similar to survey monkey and is free and on-line. We have this available for members, and if any ANTS member wants to use this survey tool we can assist - please contact office@ants.org.au for more details.

The Respondents

There were 30 complete responses submitted. Most respondents were female (90.0%), and aged between 45-54 years (63.3%, 29 responses) with the second highest group 65 years and over (16.7%), with no respondents aged 18-24 years. There were two main areas of occupation: Hospital (63.3%) and Tertiary (23.3%). Other options were Aged care (nil), community (3.3%), TAFE (6.7%), and other (3.3%: a private consultant) (see Figure 1). One respondent indicated that aged care was also part of their hospital facility, and another respondent stated that community was also part of their hospital facility: these were both included under the 'hospital' category.

The primary role indicated by respondents was educator (76.7%), with clinicians (13.3%) being the next highest category (see Figure 2). The 'other' category was a combined clinician and educator role. Most of the respondents were from NSW (26.7%), followed by Victoria (23.3%), South Australia (16.7%) and Queensland (16.7%) and the remaining states and territories followed with smaller percentages, except for ACT that had no respondents.

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Survey Responses to Elsevier | Continued from previous page

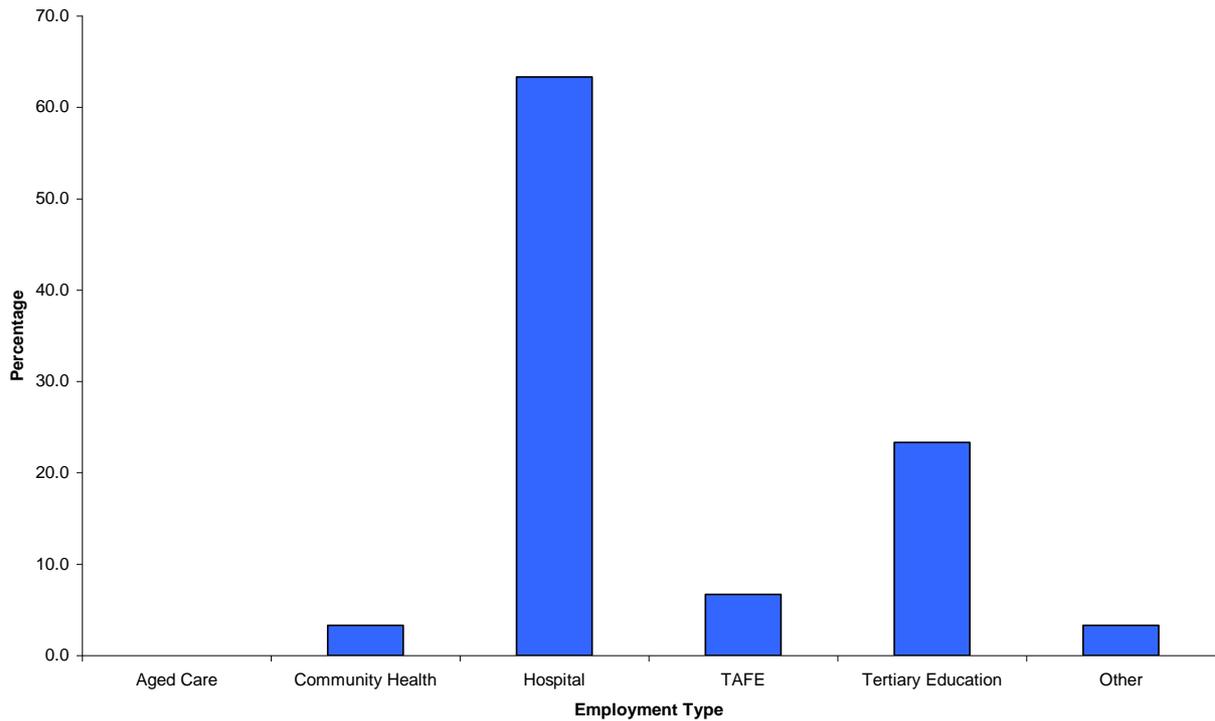


Figure 1: Percentage of respondents for type of employment.

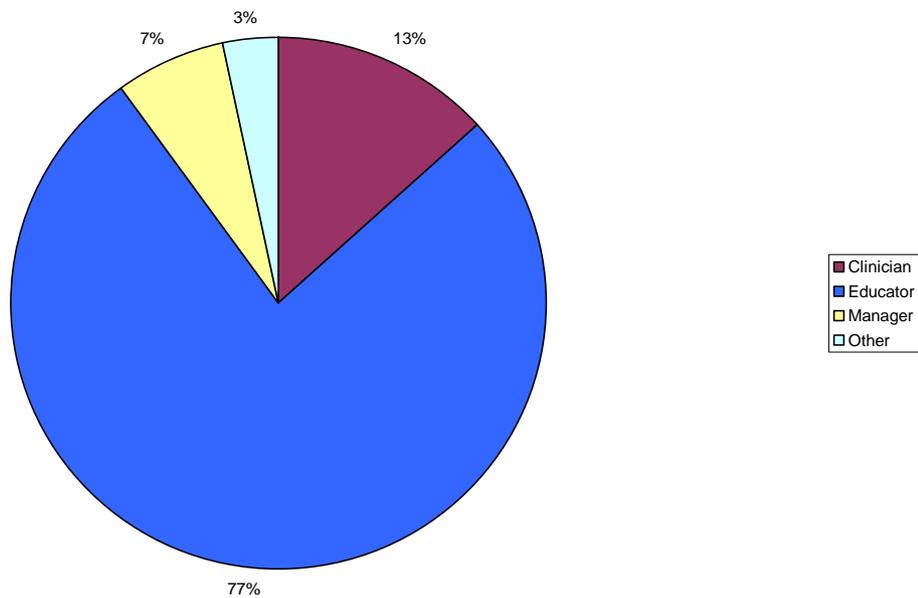


Figure 2: Percentage of respondents for primary nursing role.

The Responses

A shorter version of the responses is given below. I deleted repeat comments and shortened others where appropriate.

Survey Responses to Elsevier | Continued from previous page

1. What are the main issues for nurse educators and nurse managers in (a) keeping staff up to date and following best practice, and (b) where are the main areas of need?

1(a) ... I categorised the responses as:

- Time: this also relates to workload - there is not any time to attend in-services or other training. High staff turnover and casual staff also increases demand on training capacity and some staff may miss the training. Often training is at an unsuitable time so staff miss out (e.g. shift work). No extra time for skills other than mandatory training, and lack of cross-over time for shifts.
- Workload: too busy to attend education, staff shortages, skill mix,
- Support: A lack of support for education. Bedside nursing is the priority and management and the organisation give education a low priority.
- Motivation: lack of motivation by staff.
- Access: IT an issue where internet is not available and mobile devices cannot be used or get access to wifi or the internet.
- Cost: related to time to attend education sessions, and staff not paid if it is a day off

1(b) ... There *were* many areas of need, and included:

- Mandatory training
- Clinical deterioration
- Core competencies
- New technology and equipment
- Social determinants of health care
- Knowledge of common medical conditions, such as Diabetes mellitus
- Training in speciality areas, such as operating suite
- Policies, procedures
- Maintaining safety and quality
- Non-technical skills
- Critical thinking

I also think advanced communication e.g., coaching, dealing with difficult situations, research skills, and career planning are needed.

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Survey Responses to Elsevier | Continued from previous page

2. *What are the hospital systems and procedures used in Australia and New Zealand for (a) managing staff competencies, (b) adherence to and updating of policies, (c) reporting and auditing staff skills?*

(a) There were a wide variety of systems and procedures to manage staff competencies.

- Audits, internal and external
- Databases e.g., PROMPT, hospital -based databases
- Portfolios
- Online HETI courses
- Ward meetings
- Performance reviews
- Committees, such as quality management committees
- Internal communications, such as intranet, emails

The personnel involved in these systems and procedures included:

- Dedicated mandatory training staff
- Managers
- Educators, ward and centrally-based
- Hospital executive
- Team leaders
- Individual responsibility
- Peer review
- External reviewers

(b) There were a wide variety of systems and procedures to ensure staff adhere to and update policies.

- Dedicated individual e.g. Clinical nurses (level 2), policy coordinator, audit and update policies
- Organisational unit e.g. Safety and quality units, policy guideline centre, policy and procedures committee
- Team review, e.g. CNC, NUM, HR
- Auditing for adherence, including external audits
- Database
- Some have no system for assessing competence

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Survey Responses to Elsevier | Continued from previous page

(c) This has been answered in some other questions where audits have been included.

- Databases e.g. Trendcare, Onestaff, or on LMS
- Face to face assessments, sometimes only done with high risk individuals
- Ad hoc, based on complaints, incidents
- National quality standards audits (electronic)
- Ward-based
- Organisation-based e.g. line managers, safety and quality units, education department

3. ***What are the key features needed in a Clinical Skills product for Australia and New Zealand nurses?***

Again, a wide variety of responses and some of the points below were combined. I also want to include

- links to eportfolios
- complete packages, eg learning objectives, videos, materials, self- assessment, completion certificate, feedback
- discussion forum/blog

Survey responses

- Face to face
- Simulation with practice
- Scenario-based, including patient-focused care and not just checklists
- Based on competency standards and best evidence
- A nurturing environment in which to learn
- Reference lists and key readings
- Medications/equipment give examples of brand names along with generic name
- Different levels for the skills (eg novice, proficient)
- Mentorship
- Cheap, accurate, interesting, clearly presented, short, concise
- Australian resources by Australians
- Educationally robust

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Survey Responses to Elsevier | Continued from previous page

Technology

- Ease of use of computer-based learning, ability to be printed
- Mobile - across different platforms
- Multi-media so they can be accessed any time

A comment was also made that educational preparation of assessors should be supported.

Recommendations

As well as providing on-line training, you could provide a complete learning package for hospitals that can be run in a blended mode with face to face as well as on-line learning. You could also link to a simulation company such as Laerdal.

The learning package would include a monitoring aspect so you can record staff performance and achievements, for example including a planning tool and reminders - sent to staff when the next training is due. The system would need to run on different platforms and browsers. It would be a fully self-contained package.

If you have any questions or wish to discuss these results then please email me at ch.taylor@westernsydney.edu.au

Dr Christine Taylor
23 Nov 2015

ANTS CLINICAL EDUCATOR OF THE YEAR AWARD



Recognising Excellence in Nursing and Midwifery Education in the Clinical Setting

This award recognises excellence of the clinical educator to encourage innovative teaching practices in the education of Nurses and Midwives in the clinical / workplace settings. Open to all categories of members who contribute to nurse/midwifery education external to the academic setting.

Nominate YOURSELF or a COLLEAUGE today

Full details of selection criteria and nomination forms are available on the ANTS web-site

www.ants.org.au

CONFERENCE DIARY 2015/16

| MARCH 2016

3rd Commonwealth Nurses and Midwives Conference | 12-13 March 2016 | London UK

Toward 2020: Celebrating nursing and midwifery leadership

www.commonwealthnurses.org/conference2016/

Australian Pain Society 36th Annual Scientific Meeting | 13-16 March 2016 | Perth

Pain: Meeting the Challenge | www.dconferences.com.au/aps2016/

| APRIL 2016

NETNEP 2016 | 6th International Nurse Education Conference | 3-6 April 2016 | Brisbane

<http://www.netnep-conference.elsevier.com/>

New Zealand Resuscitation Council | 7-9 April 2016 | Auckland | <http://www.nzrc2016.co.nz>

Australian Association for Cognitive and Behaviour Therapy (AACBT) 8th World Congress of Behavioural and Cognitive Therapies | 22-25 June 2016 | Melbourne

<http://www.wcbct2016.com.au/>

18th International Conference on Nursing Informatics and Technology | 23-24 June 2016

London UK | www.waset.org/conference/2016/06/london/ICNIT

13th International Congress in Nursing Informatics | 25-29 June 2016 | Geneva Switzerland

eHealth for all - Every level collaboration - From project to realization <http://ni2016.org/>

| JULY 2016

9th World Congress on Active Ageing | 28 June-1 July 2016 | Melbourne |

<http://wcaa2016.com.au/>

Australasian Delirium Association 3rd Biennial Conference | 14-15 July 2016 | Sydney

21st International AIDS Conference | 17-22 July, Durban, South Africa | www.aids2016.org/

4th Asia-Pacific Global Summit & Expo on Healthcare | July 18-20, 2016 | Brisbane |

<http://healthcare.global-summit.com/asia-pacific/>

| SEPTEMBER 2016

New Zealand Association of Gerontology & Age Concern | 16-18 September 2016 | Wellington

Polio Australia's 2016 Australasia-Pacific Post-Polio Conference | 20-22 September 2016

Sydney | Inaugural Polio Conference: *Polio: Life Stage Matters*

www.poliohealth.org.au/conference-sydney-2016

APP REVIEW | CHECK YOUR HEALTH



Many Australian's use 'Dr Google' for health information which has variable levels of information accuracy.

This free health app is from Health Direct and is available on both Android and iOS to assist the individual in making informed health decisions.

- **CHECK YOUR SYMPTOMS**
Question tool assist in making an informed decision [self-care or seek professional help]
- **FIND A HEALTH SERVICE**
Australia-wide directory covering a range of health services. Includes contact details and directions from your current location
- **TRUSTED, AUSTRALIAN INFORMATION**
Be assured it is safe, appropriate and relevant for Australia and has undergone quality assurance prior to publication
- **HELPING HAND IN EMERGENCIES**
Displays map coordinates [latitude and longitude] to relay to emergency service operators when you don't know exactly where you are

What our users are saying



“Great health app! I have used this service via the internet platform for quite a few months now. I have now jumped on the new app. Having multiple chronic medical conditions cuppled with severe disabilities, now living alone, it is very reassuring knowing that what ever health service I need or just for advice at what ever hour day or night 7 days, its all a few key strokes away Australia wide - Well done!”

Adapted from <http://www.healthdirect.gov.au/health-app> Accessed 12/12/2015

AUSTRALIAN NURSE TEACHERS SOCIETY

WORKING TOGETHER FOR THE FUTURE OF NURSING



PEER REVIEW SECTION

ANTs e-Bulletin is accepted for indexing in the Cumulated Index to Nursing and Allied Health Literature (CINHAL) the world's premier nursing literature database

PEER REVIEW SUBMISSIONS

Submissions should include an **abstract** of up to 250 words maximum. The abstract should be informative and report on the key aspects of the publication and include the methodology and key findings of the paper. The abstract should not contain abbreviations or references. Up to five keywords can be provided.

The **acknowledgement** of colleagues who are not named as authors should appear just before the reference list. The source of any funding or any potential conflict of interest should also be declared. The author is responsible for providing accurate references.

Referencing must follow an Author-Date style, such as APA (American Psychological Association). The reference list must include details only of those works cited in the text, and all references cited in text must be listed.

CORRESPONDENCE

All manuscripts, and related correspondence should be submitted via email to the Peer Review Section Editor at dstanley@csu.edu.au with feedback or a decision on the manuscript within 6 weeks of submission.

Previous submissions reviewed are welcomed for re-submission or as a stand-alone article.

All the Best for the Festive Season and Coming Year

