

AUSTRALIAN NURSE TEACHERS SOCIETY

WORKING TOGETHER FOR THE FUTURE OF NURSING, MIDWIFERY AND HEALTHCARE



COVER DESIGN: Credit Union Christmas Pageant Tunnel- Adelaide, SA

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E-BULLETIN

ANTS 

www.ants.org.au

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FROM THE EDITORS DESK

Christmas and the New Year is almost upon us and it seems only a short time ago that it was the beginning of the year.

As with most clinicians we have a fast-paced job, which often flows into our personal life. I recently attended a (6) week mindful self care program titled: INTRODUCTION TO MINDFULNESS. It was held for clinicians after work on a Wednesday with course notes provided. The request was NOT to read ahead in the book but read the notes for the specific week to assist with practicing guided meditations and cultivating mindfulness in daily life.

Cultivating mindfulness in daily life I personally readily adaptable, the meditation was not as easy ... multiple attempts were made from sitting in another room of the house, lying in bed and the final outcome was to sit in the car quietly at the end of the day for the allocated (15) minutes with the CD playing.

This short course allowed me to give myself permission to 'stop and take a breathe' at frequent intervals during the day and discuss my findings, experiences with others; identifying the benefits and obstacles that may have been shared or individualized and developing strategies to manage life pressures more readily.

Courses are available in most states of Australia and can be found at: www.mindfulnessnsa.com

Interest Groups can be found online at: http://groups.yahoo.com/group/MBSR-MBCT_ANZ/join



Karen Simunov
e-Bulletin Editor

P.S. I did get my own 'best biscuit' at my next blood donation ... and yes it is as good as they say.

ANTS PRESIDENT REPORT

Hi all

As I begin to write the final President's notes for 2016, I can't believe how quickly this year has passed, I'm sure I only just wrote the 2015 end of year message!

Its been a very busy year for ANTS again and 2017 will only be busier. During 2016 we have provided representation and ANTS sponsorship and 'booths' at a number of events in an effort to continue to raise our profile and engage more members.

The National Committee have been fantastic ambassadors for ANTS at events showcasing who we are and what we have available for members and prospective members. It has been worthwhile for us to support events such as NETNEP, ACN Conference, attendance at CoNNMO meetings and the white paper launch at Parliament House. We also supported a number of members with conference scholarships and research grants, some of which you would have seen the reports post attendance/completion in the e-Bulletin.

Throughout 2017 we will be heavily involved in progressing the planning for **NNEC 2018** - to be held in Melbourne at the Crowne Promenade Convention Centre (adjacent to the casino) and we will be seeking assistance from members to participate in aspects of planning the event. We will keep you posted regularly on our progress.

I have also started an **ANTS Facebook Page** for our members to utilise and communicate through. This is vey much a new I will get more activity happening including a link to our website early in the new year. So, all 'face-bookers' do a search and send a 'friend/member' request.

Thankyou to all our members for your ongoing support of ANTS and I look forward to working with you all in 2017.



To you and your families have a very happy festive season, stay safe and take care of each other.

Michelle Girdler, National ANTS President

AUSTRALIA COLLEGE NURSING WHITE PAPER LAUNCH

PARLIAMENT HOUSE, CANBERRA

I was fortunate enough to recently represent the Australian Nurse Teachers Society, as a member of the CoNNMO (Coalition of National Nursing & Midwifery Organisations) at Parliament House on the 11th October 2016. The function, a white paper launch, was hosted by the Australian College of Nursing (ACN), and the occasion was to launch it's "Nurses are Essential in Health and Aged Care Reform".



Parliament House, Canberra | Venue

The event was attended by key nursing leaders, industry CEO's and academics from the health profession. The speakers included, the Prime Minister, the Federal Health Minister and shadow health ministers. All of them spoke on the key role that nurses have in guiding and influencing public health policy.

The White Paper acknowledged that, with a workforce of 360,000, the nursing profession is ideally placed to drive health reform in Australia. The key purpose of the occasion and rationale underpinning the launch, was to ensure the nursing voice is heard in strategic policy debates and reform developments.

More specifically, to better utilise the expertise of the Australian College of Nursing, the ACN called on governments to engage nursing leadership when discussing and acting on health and aged care reform, and to work together on six strategies to ensure recognition and support for the profession.

These strategies cited were:

1. Recognise the nursing profession's role
2. Invest in policy platforms that enable the full participation of the nursing profession
3. Ensure the nursing voice is heard in strategic policy debates and reforms developments
4. Recognise the value of nurse led innovation
5. Support nurses to work to their full scope, and expanded scope where necessary
6. Acknowledge the pivotal role of nurses in setting standards of care



Following the breakfast program, delegates had the opportunity to meet and network with each other. This was a great opportunity to describe the role and activities of ANTS. In particular it was noted that the role our organisation has with both clinical and academic members is unique - and well situated to enable practice change and apply contemporary nursing practice.

The white paper policy can be accessed as a pdf via this link:

https://www.acn.edu.au/sites/default/files/advocacy/20160930_nurses_are_essential_to_health_and_age_d_care_reform_white_paper_web.pdf

Another article on the launch can be found here:

<http://www.australianageingagenda.com.au/2016/10/14/call-strengthen-nurse-leader-input-reforms/>

NEW MEMBER | WELCOME

JUNE |

Janelle Laws, Vic | Royal Brisbane and Women's Hospital, Nurse Educator
Victoria Daniels, NT | Katherine Hospital, CNE

JULY |

Jennifer Williams, VIC | Peninsula Health Nurse, Educator
Judith Hobart, NSW | MLHD, CNE
Kelly Jones, NSW | SWSLHD, CNE
Rachael Jenkins, NSW | Ramsay Health, CNE
Theresa Johnson, QLD | QLD Health, CNE

AUGUST |

Kristin Skinner, NSW | Grafton Base Hospital, CNE
Lee Cowling, QLD | QLD Health, Clinical Facilitator

SEPTEMBER |

Cassandra Jones, WA | Sir Charles Gairdner Hospital, Staff Development Nurse
Natalie Turner, SA | SA Health, CNE
Murray Giles, WA | Fiona Stanley Hospital, Nurse and Midwife Educator
Surena Salby, WA | RPH, Staff Development Nurse
Renee de Prazer WA | Fiona Stanley Hospital, Nursing and Midwifery Educator

OCTOBER |

Julie Ogle, WA | South Metropolitan TAFE, Nurse Lecturer
Michelle Destefanis NSW | Northern Sydney Home Nursing, CNE

NOVEMBER |

Eleanor Hyman, WA | Sir Charles Gairdner Hospital, Staff Development Nurse
Karyn Allen, QLD | Mater Hospital, Education Coordinator
Kate Colmer, SA | Child and Family Health Service, NEF
Kylie Hume, NSW | Westmead Hospital, A/Nurse Educator
Lynette Gwynne, QLD | James Cook University, Academic



FROM THE NATIONAL COMMITTEE

SCHOLARSHIP REPORT

AMERICAN NURSE CREDENTIALLING CENTRE (ANCC) NATIONAL MAGNET CONFERENCE –
ORLANDO FLORIDA USA OCTOBER 5 – 7, 2016

THEME: EMPOWERING NURSES TO TRANSFORM HEALTH CARE

Having experienced a Magnet conference in Dallas in 2015 when Princess Alexandra Hospital was recognised for its 3rd designation, I had a reasonable idea of what I was to experience but being part of a 9800+ group of energetic, innovative and motivated nurses defies explanation. The energy and excitement alone is palpable and remains high despite navigating through all those nurses to get to the concurrent venues on time.

The conference is a blend of recognition, celebration and education with concurrent sessions on Evidence -Based Practice and Research, Innovation, Leadership and Practice. It is a challenge to decide what to attend with so much to choose from.

With Hurricane Mathew making its presence felt over the Caribbean Islands and tracking towards Florida the conference got underway. I attended 3 excellent sessions that day.

Session 1. Active Learning + Flipped Classroom = Learner Satisfaction and Improved Critical Thinking.

This innovation came out of questions many educators have asked around teaching critical thinking. The presenters described a (3) day cardiac course for graduate nurses using traditional face to face, content loaded 'death by power point' approach with the educator as the "sage on the stage". They reviewed their program to move the educator to a more facilitative position and the graduate to an active participant in the learning process. They shortened the course to (4) hours on line pre-work and (2) days classroom saving the organisation 4 hours by flipping the classroom.

The flipped classroom was developed in 2007 for athletes who missed class as an alternative means of obtaining lecture content (US college athletes) and employs a variety of methods of presenting theoretical content (video, readings, e-learning modules). Learning in the classroom is interactive and includes group based, problem solving activities. Foundational information is provided as pre-work in an on line module. As we have all experienced, the risk when setting pre-work is that it is often not done. Expectations are set that graduates will come to class with questions related to the pre-work/readings and this will guide some of the discussions / activities. The ability to provide this pre-work allows the presenters to then focus on activities which maximise the classroom time to employ active learning strategies ie. Scenarios.

Dispersed through this are brain breaks (technically tricky right brain/ left brain activities eg making a circle clockwise with your right hand whilst making the number 6 anticlockwise with your right foot), colouring - in (mindfulness drawings) and fidgits. This provides a quick break to reenergise and refocus. I have used fidgits both as a presenter and as a participant and find them effective in centring the participant. An interesting question about mobile phone use by the graduates from an educator who found this problematic in their own experience revealed that in this program there was no unnecessary use of mobiles during the classes.

This project was well evaluated from a satisfaction and post-test perspective and the educators want to move away from a pre/post-test knowledge model. This was also the first time the course ran this way so there are plans to continue the course and refine as they go. It will be interesting to follow up progress particularly to see if they can demonstrate translation of knowledge and evidence of critical thinking in their graduates.

Session 2: What is Evidence - Based Practice (EBP): Overcoming Buzzwords and Variability through a Nurse EBP Mentor Program

This topical session reported on the presenter's difficulties running graduate nurse EBP projects related to a wide variability in how EBP was carried out at the bedside. This variation can be dependent on background, knowledge and educational experience. To fully understand and check their own understanding the presenters attended a 5 day EBP Immersion at Ohio State University. They brought back their knowledge to develop an EBP Mentor Program at their hospital.

With organisational support they performed an organisational assessment asking

- Do we have the organisational process and structure to support EBP
- Are staff ready for EBP
- Are we demonstrating the behaviours of EBP

The survey yielded a very poor response rate and demonstrated a disconnect between beliefs and practice around EBP. To support the development of the Mentor program

- Key mentors were identified
- Two - (1) week immersions were run by university staff.
- Modification of the graduate nurse program

Enthusiasm for the program has spread with increased staff interest in becoming mentors as well as buy in from other disciplines. They have hosted another (2) immersions and hope to add (2) more in 2017. Continuing education is also offered to mentors.

To support mentors they also developed a mentor pathway and added a project approval process. A EBP website was developed which hosts forms and templates including clinical appraisal tools, levels of evidence tables and on- going education is provided in form of workshops for staff on abstract writing etc.

From my perspective the success of this project has been the reported overwhelming support and growth of EBP knowledge of the staff and the willingness to develop new staff members and each other. This project has yielded (100) formally trained EBP mentors, (20) new grad EBP projects, (7) practice changes and (21) new EBP projects with (3) new research studies resulting from the EBP projects.

Session 3: Change Agent Skills: Empowering Clinical Nurses through Mentorship and Leadership Development

The goal of the Rising Nurse Leader Program was to provide frontline nurses with the skills, networks and guidance they need to influence nursing practice at the point of care. The program was aimed at emerging and experienced clinical leaders committed to patient care and to strengthening the organisation from the bottom up.

The program included interactive and instructional activities focused on decision making, change management, leadership skills and communication techniques. It included

- Monthly salons (leadership sessions) with mentor
- Mentorship relationship with a nurse leader
- Executive coaching
- Development of a leadership project at the end of the program
- Quarterly leadership classes.

The Rising Nurse Leader outcomes included increasing engagement in post graduate study, research, poster presentations, publications, clinical expertise, new teaching with enhanced communication, confidence in professional practice and development of mutually beneficial relationships as some of the qualitative discussions.

I attended (2) key-note addresses one by the brilliant Amanda Gore (who I have seen many times) and Simon T Bailey (who I haven't seen) and they both spoke on themes of being your best and being a positive contributor.

Two things Simon T Bailey said that resonated with me as an educator were

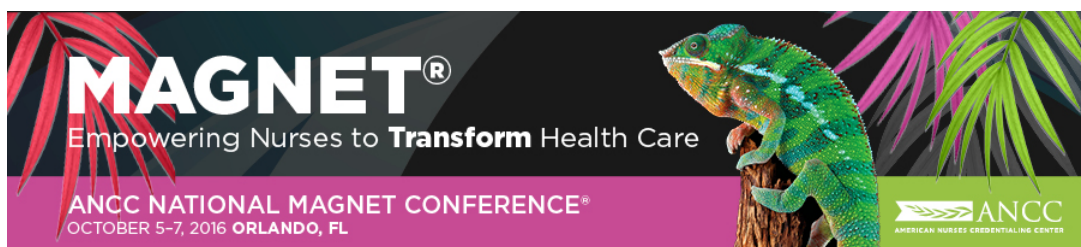
Educate comes from the Latin words educare and educere -which he translates to mean "it is not what is put in but what is drawn out" and I believe this was reflected in the sessions I attended.

The other quote was 'people don't care how much you know until they know how much you care'.

So as I mentioned at the beginning of this report there had been a hurricane out over the Caribbean and as Hurricane Matthew started to make his presence felt and rapidly increase in intensity the decision was made to close the conference midway through the 2nd day. Participants were able to congratulate the Magnet nurses of the year and the facilities who successfully redesignated and attend the wonderful conference networking event at Universal Studios. We have also been sent the recordings / conference papers for all the presentations (an added bonus) as I can now view those sessions I had difficulty choosing between.

Thank you very much ANTS for providing my scholarship. I certainly appreciate it.

Bernadette THOMPSON (PAH, QLD)



MEET THE COMMITTEE

MANDY GALLACHER | ANTS NATIONAL COMMITTEE - MEMBER | ANTS SA BRANCH - MEMBER

Qualifications |

- Enrolled Nurse Certificate from The Queen Elizabeth Hospital, School of Nursing 1985
- Bachelor of nursing from University of South Australia, 2002
- Coronary Care Certificate at TQEH 2004
- Graduate Diploma of Nursing (Coronary Care) from University of South Australia 2008,
- Graduate Certificate of Clinical Education (Nursing), University of South Australia

Why Choose Nursing |

Becoming a nurse is the only career I ever wanted so for me the decision was simple!

I wanted to interact with different people on a daily basis and have the opportunity to make a positive change in people's lives. My journey began as a 16 year old, employed as a nurse assistant whilst completing my high school education. At 18, I started my formal training at The Queen Elizabeth Hospital, South Australia.

My Story |

On completion of my Enrolled Nurse training, I moved interstate for 2 years and on returning to SA, was successful in obtaining a position in a hospital out-patients department. I worked in this department for (14) years, whilst bringing up my daughter. However it was not until 1998, that I discovered that Registered Nurse Training was available externally and with the support of my husband and daughter, I commenced a Bachelor of Nursing in 1999.

I completed my Nursing undergraduate in 2002 and began to pave my way as a Registered Nurse, successfully completing a Graduate year and obtaining a position in the Coronary Care Unit (CCU) at TQEH. While working in the CCU and with the support from other experienced nurses in the unit and the clinical educators I developed vital professional skills as a Registered Nurse. Through working with complex cardiac cases I transitioned from an EN to a RN developing the art of critical thinking, advanced cardiac and medical assessment and how to employ high intensity interventions to improve patient outcomes.

In 2004, I commenced a Hospital Certificate in Coronary Care and consolidated this learning with the Graduate Diploma through University of South Australia. It was in this unit that I had the opportunity to broaden my horizons, commencing a (3) month stint (which turned into (9) months) as a Clinical Facilitator in the Medical Nursing Division in 2009. This new experience, paved the pathway for a career in nursing education.

In 2010, I was seconded as Clinical Tutor at Adelaide University Undergraduate Program for (12) months and at the completion of secondment, I successfully gained a position as a Clinical Facilitator in a Transition to Professional Practice Program (TPPP). As I gained experience as a clinical educator, the initial apprehensiveness that I felt commencing as an educator has reduced drastically thanks to all the experienced and supportive nurse education facilitators.

After (18) months, as a Clinical Educator I was successful in winning a position as a Nurse Education Facilitator. In this position I have had the pleasure of working with all levels of nurses from novice students to experts in their field of practice.

In Closing |

Ultimately I love caring for people, and have had an exciting and eventful career so far and crafted an unbelievable career.

A career that has enabled me to study, travel, make fantastic friends and more importantly learn new things every day furthermore I could not think of any other career that would provide me with a world of opportunities a career I am truly dedicated to.



ANTS EDUCATOR OF THE YEAR

RECOGNISING EXCELLENCE IN NURSING AND MIDWIFERY EDUCATION

The Australian Nurse Teachers Society (ANTS) recognises excellence of the Nursing/Midwifery Educator with the 'ANTS Educator of the Year Award' to encourage innovative teaching practices in the education of Nurses and Midwives in the academic, clinical and workplace settings.

Selection Criteria

- Demonstrate a significant contribution to education of nurses/midwives
- Ability to organise innovative course material and resources and to present these cogently and imaginatively
- Command of subject matter, including the incorporation into teaching of recent developments in a specific field
- Provision of appropriate assessment, including the provision of feedback
- Provision of appropriate evaluation and reflection
- Participation in professional activities and research relating to clinical teaching

Nominees

Open Category 1 and 2 members who contribute to nurse/midwifery education and may be employed in the tertiary, acute and/or community sector.

Criteria

The following criteria applies to potential nominees:

- Current financial members of ANTS for 24 consecutive months
- Hold Registration with the Australian Health Practitioner Regulation Agency (AHPRA)
- Demonstrate related employment in an educational/teaching role within an Australian health facility or organisation.

The judging panel is formed by the National Executive or Branch Committee members of ANTS and the decision is final and the right is reserved not to make an award if the criteria are not met.

Further Information

- ANTS website at www.ants.org.au

ONLINE CPD

FROM MEDSCAPE EDUCATION ONCOLOGY | HOT TOPICS IN HEMOPHILIA NURSING CE

Regina Butler, RN; Jim Munn, RN, MS; Brenda Riske, RN, MS, MBA, MPA

CE Released: 9/21/2016; Valid for credit through 9/21/2017

This activity is intended for nurses and advanced practice nurses and other healthcare professionals who treat patients with hemophilia.

The goal of this activity is to discuss some of the main challenges related to caring for patients with hemophilia across the life span.

Upon completion of this activity, participants will:

1. Identify nursing best practice in the management of challenging patients, such as those with poor bleeding control or with inhibitors
2. Review nursing best practice in using laboratory tests to optimize treatment outcomes in haemophilia
- 3.

http://www.medscape.org/viewarticle/867862?src=mkmcmmr_driv_invit_mscpedu

NB: May need to register to access site

FROM THE HANDOVER | UNDERSTANDING THE RELATIONSHIP BETWEEN O₂ FLOW RATE AND FiO₂

Joanne Reading, RN, MHSc (Critical Care)

Free Open Access Nursing Education (#FOANed) - Blogging for your Noggin

A short synopsis on the topic, which opens with (3) questions for the reader

1. What is the FiO₂ of the air you are breathing right now?
2. What is the FiO₂ of the oxygen being delivered through the oxygen flow metre [sic] as soon as you turn it on?
3. Does the oxygen flow rate really change the FiO₂ of the pure oxygen that is being delivered through the oxygen flow metre [sic]?

The writer then goes onto the Physiology of oxygen therapy with a hyperlink for the reader to *review lung sounds*. To put the information in context the practical relevance is identified with a simplistic graph and the take home points identified. References provided.

<https://www.ausmed.com/articles/oxygen-flow-rate-and-fio2/>

CHIEF NURSING & MIDWIFERY OFFICE

NEWSLETTER EXCERPT | NOVEMBER AND DECEMBER

Fifth national mental health plan

Seeks to establish a national approach for collaborative government effort over the next five years, with a focus on achieving a better-integrated service system for consumers and carers. November and December workshops will be complemented by local consultation events to consider issues specific to jurisdictions.

<http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-fifth-national-mental-health-plan>

NHMRC public consultation

The National Health Medical Research Council (NHMRC) is proposing a revision of Section 3 of the National Statement on Ethical Conduct in Human Research 2007 (the National Statement). The National Statement provides guidelines for researchers, Human Research Ethics Committees and others conducting ethical review of research, and emphasises institutions' responsibilities for the quality, safety and ethical acceptability of research that they sponsor or permit under their auspices.

Comments close Wednesday, 21 December 2016, 11:59pm (AEST) for the content of Section 3, which includes new introductory language, new and revised chapters 3.1 and 3.5, consequential changes to Section 5 and additions to the Glossary.

https://consultations.nhmrc.gov.au/public_consultations/ethical_conduct

\$34 million for Dementia and Aged Care Services research

Applications are now open for the Dementia and Aged Care Services Research and Innovation Funding Round. Grants will be made available in six priority areas, including:

1. support for existing and emerging challenges in dementia;
2. better support for services targeting people from diverse backgrounds;
3. developments that support innovation in aged care;
4. support for activities that focus on Aboriginal and Torres Strait Islander people;
5. capital support for activities that focus on Aboriginal and Torres Strait Islander people;
6. seed funding for adaptive technology projects so that consumers can stay in their own home.

<http://www.health.gov.au/internet/main/publishing.nsf/Content/Listing+of+Tenders+and+Grants-1>

New Report Provides Snapshot Of Aged Care In Australia

A snapshot of aged care services has found the sector is performing well, with increased funding and reforms beginning to deliver benefits for older Australians. The 2015-16 Report on the Operation of the Aged Care Act 1997 shows the Australian Government's commitment to aged care. The report includes information on other aged care policies and programs to give a complete overview of aged care in the preceding financial year. T

<https://agedcare.health.gov.au/publications-and-articles/reports/report-on-the-operation-of-the-aged-care-act-1997#https://agedcare.health.gov.au/publications-and-articles/reports/report-on-the-operation-of-the-aged-care-act-1997>

Working for Health and Growth: investing in the health workforce

Attendees at both the SPNF and SPCNMOA were privileged to hear from Judith Shamian, President of the International Council of Nurses (ICN) and a member of the UN Commission on this important Report.

The Commission makes ten recommendations that should be read in the context of efforts to strengthen health and social protection systems as well as broader initiatives to implement the 2030 Agenda for Sustainable Development and to meet the targets of the SDGs. All recommendations require the upholding of rights, good governance, political commitment and inter-sectoral and multi-stakeholder cooperation.



South Pacific Chief Nursing and Midwifery Officers Alliance (SPCNMOA) and SPNF meetings in Honiara, Solomon Islands.

Interactive Australian Atlas of Healthcare Variation

Release of the first interactive Australian Atlas of Healthcare Variation, illuminating variation in health care provision across Australia.

The atlas presents a clear picture of substantial variation in healthcare use across Australia, across areas such as antibiotic prescribing, surgical, mental health and diagnostic services. Variation is expected and associated with need-related factors such as underlying differences in the health of specific populations, or personal preferences. Understanding this variation is critical to improving the quality, value and appropriateness of health care.

<https://www.safetyandquality.gov.au/atlas/>

Review of the Australian Code for the Responsible Conduct of Research

The Australian Code for the Responsible Conduct of Research (2007) (the Code) first published in 2007 is currently under review. The Code guides institutions and researchers by setting the required research standards, and advice on managing departures from these standards. NHMRC, ARC and UA are keen to ensure that the Australian community and research sector has the best opportunity to participate in developing guidance on the expected standards for Australian research.

https://consultations.nhmrc.gov.au/public_consultations/australian-code

Medical Research Future Fund

The Medical Research Future Fund (MRFF) will provide grants of financial assistance to support health and medical research and innovation, with the objective of improving the health and well-being of Australians. Established under the Medical Research Future Fund Act 2015 (the Act), the Australian Medical Research Advisory Board has finalised the inaugural Australian Medical Research and Innovation Strategy 2016-2021 (the Strategy) and the accompanying Australian Medical Research and Innovation Priorities 2016-2018 (the Priorities). These will guide decision making around disbursements under the MRFF.

<http://health.gov.au/internet/main/publishing.nsf/Content/mrff#http://health.gov.au/internet/main/publishing.nsf/Content/mrff>

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<http://health.gov.au/internet/main/publishing.nsf/Content/mrff#http://health.gov.au/internet/main/publishing.nsf/Content/mrff>

Communicable Diseases Control Conference 2017: Infectious Diseases: a global challenge

The Communicable Disease Control Conference 2017, convened by the Communicable Diseases Network Australia, the Public Health Laboratory Network and the Public Health Association of Australia, will be held in Melbourne in 2017. The Conference theme will be 'Infectious Diseases: a global challenge', which will allow consideration of the threats to health security from old and new infectious agents, and the increasing threat of antimicrobial resistance. In particular, the conference will examine how the interconnected world facilitates spread of infection.

The committee is seeking nominations from public health nurses in all jurisdictions to be involved. If you are interested, please contact Nicole Rutter (nrutter@phaa.net.au) for:

- Providing ideas for the workshop
- Presenting at the workshop
- Assisting with the running of the workshop

Adapted from Monthly newsletter from Chief Nursing and Midwifery Officer, Adjunct Professor Debra Thoms - November 2016 and December 2016 Accessed 12/12/2016

PERSONAL DEVELOPMENT | THE FATAL JOB INTERVIEW MISTAKE YOU WON'T REALISE YOU'RE MAKING

Published in PS News Professional- Edition #27 | Thursday, 11 August 2016

*Liz Ryan is the Chief Executive and Founder of Human Workplace, a publishing, coaching and consulting firm whose mission is to reinvent work for people. [This article first appeared on the Human Workplace website]

Everywhere you look you see articles warning job-seekers about mistakes they can make at a job interview, like saying the wrong thing or giving an incomplete answer to a question.

It's easy to become so fearful of doing or saying the wrong thing at a job interview that you lose track of the bigger picture.

Here's the brutal truth: The biggest danger you face at a job interview is the danger of being forgotten altogether.

I was a corporate HR leader for ages. I used to walk around the building and ask the department managers: "How did your interview with Melissa [or Xiao, Charles or Mohammed] go yesterday?"

Often they would say: "It was fantastic! Melissa really understands e-commerce. I want to get her back in here as soon as possible."

However, many other times a department manager would say: "What?"

ME: Your interview with Melissa, how did it go?

MANAGER: Who?

ME: Melissa Sanchez, about 30 years old, my height, curly black hair — she had a green jacket on. You don't remember her?

No impression

MANAGER: Honestly, I don't.

ME: You met with her for an hour yesterday. Carla from HR brought Melissa to your office.

MANAGER: Oh, yeah, that's right! Honestly, Melissa left almost no impression on me. Now I remember — green jacket. She sat there. Maybe she was nervous. She gave me three-word answers. I couldn't get anything out of her.

ME: Oh, what a shame. Melissa and I had such a great conversation last week. She was energised and bubbly and full of ideas then.

MANAGER: Well, I didn't scare her intentionally. You always get people to talk.

After a conversation like that I would have to call Melissa and explain that while it didn't look like there was a great match between her and the position she had interviewed for, we might have other positions coming up that would be a better fit.

I would also coach Melissa to ask a few friends to help her practice her interviewing skills so that she would come out of her shell a bit more in future interviews.

A lot of people have the same problem Melissa had. They disappear into the chair in a job interview. They think their assignment at a job interview is to answer the interviewer's questions 'correctly'.

There is no correct answer to a job interview question. Even if an interviewer scowls at your

answer, that doesn't mean anything. They may change their mind overnight as they think about the soundness of your reasoning.

Your assignment at a job interview is not to please anyone, but to show your brain working.
In the best case, you'll get to see your interviewer's brain working, too.

Too many smart and capable people miss out on great job opportunities because they try so hard to play the part of the Good Little Sheepie Job Seeker.

That approach will not help you; it will hurt you instead.

Not everybody will resonate with your personality, but so what?
You wouldn't want to work for someone who doesn't get you, anyway.

Bring your full personality, your humour, your amazing story
and your mojo to a job interview, every time.

Why play the part of a person who isn't you?

The real you is a million times cooler, and won't be forgotten the way poor Melissa was.

CALL FOR EXPRESSIONS OF INTEREST

Editorial, writing and reviewing opportunities

Elsevier Australia is looking for practicing Nurses, Clinical Educators, Nurse Managers and Nursing Academics across Australia and New Zealand to work with us as section editors, contributors and reviewers on our Clinical Skills project.

Further information available at <https://elsevierclinicalskills.com.au/>

Applicants should be well versed in evidence-based practice with experience practicing in a clinical area, and be able to write well to a standard template. All contributors will be paid for their work.

To register your expression of interest, please email a brief outline of your experience and areas of expertise to colin.mcneil@elsevier.com. If you would like more information about these roles or the project please contact Colin McNeil by email or telephone +61 (0)407 921 448.

NEWS FROM APHRA

All registered nurses, enrolled nurses and midwives are required to practise in accordance with professional standards set by the NMBA, including the codes of conduct, codes of ethics and the standards for practice, in particular the social media policy and the guidelines for advertising regulated health services.

NURSES, MIDWIVES AND VACCINATION

The Nursing and Midwifery Board of Australia (NMBA) and AHPRA take their responsibility of public protection very seriously, and will take regulatory action on nurses or midwives who promote anti-vaccination statements to patients and the public.

The recently published NMBA position statement follows the Board's awareness that a small number of registered nurses, enrolled nurses and midwives have promoted anti-vaccination statements to patients and the public via social media, which contradict the best available scientific evidence. Current evidence indicates that preventative measures such as vaccination are a clinically effective public health procedure for certain viral and microbial diseases.

'The NMBA is taking this opportunity to make its expectations about providing advice on vaccinations clear to registered nurses, enrolled nurses and midwives. With no exceptions we expect all registered nurses, enrolled nurses and midwives to use the best available evidence in making practice decisions. This includes providing information to the public about public health issues.'

'As trusted health professionals, nurses and midwives, play a key role in helping people make decisions about their healthcare. The Board's statement makes clear its expectations of nurses and midwives when providing advice about vaccinations,'

Chair of the NMBA, Dr Lynette Cusack

The Board's expectations of nurses and midwives are clear and set out in the NMBA's Codes of professional conduct. The NMBA's Social media policy also provide clear guidance to nurses and midwives when using social media and is unambiguous in stating that when using social media, in any context, the National Law, the NMBA's code of ethics and code of conduct, and the Guidelines for advertising regulated health services apply.

If someone has a concern about a nurse/midwife they contact the NMBA on 1300 419 495.

Accessed <http://www.nursingmidwiferyboard.gov.au/News/2016-10-20-statement.aspx> 12/11/2016

BMJ WEBINAR: HOW TO WRITE PAPERS THAT EDITORS WILL WANT TO PUBLISH

Through the magic of email (and signing up to websites which I then forget about) I received an invite to attend a webinar from BMJ on 'How to write papers that editors will want to publish'. I promptly completed the registration form to be informed I was on a waiting list due to the session being fully-booked. A short time later I received another email identifying a place was available.

The webinar was held in England and commenced at 2030 Adelaide time with 250+ online participants with questions live by chat box available. Presented by Dr Trish Groves, Director of Academic Outreach BMJ; Editor In Chief BMJ Open and Honary Deputy Editor The BMJ.

The presentation stepped through the process of 'writing for publication'

Key Points:

- What not to do when developing the question
- Ensuring YOU have a substantial role in the research as an investigator, reviewer, author with peer review is undertaken
- Each author takes responsibility for credibility and integrity of the work to be published
- Write for the 'lay' person by telling a story that they can provide an overview even though they may not understand
- Keep language simple

IMRaD

- Introduction - why ask the question. State this clearly in the last paragraph
- Method - choose in relation to the question most important section for the research to be repeated or included in a systematic review if the method is understood
 - PICO or PECO
 - descriptive what is happening
 - Analytical/observational why or how happens
 - Analytical / experimental can it work
 - Describe elements
 - Follow reporting guidelines
 - Describe measures (ethics)
 - References for statistics / results
 - Study protocol if required
- Results as identified (warts and all - be negative or inconclusive)
 - Primary outcomes identified first
 - Confidence intervals for main results
 - Essential summary of statistics
 - Main findings identified
 - Tables for evidence with raw data and metadata available if requested
- Abstract accurate and clear

- Often only section available to the reader if a cost associated with journal articles
- Invite peer reviewers to provide feedback
- Discussion study actually done not what you wished you had done
 - Beware of repeating the introduction
 - Main findings with strengths and weaknesses identified
 - Potential implications in practice
 - Any future research / study

Journal of choice for submission

- Read ever all editions to match suitability to your article
- Scope, Index and impact factor, Language, Acceptance level
- Frequency of publication
- Advice from peers and colleagues
- Open access, Publication fees
- Utilise peer review to improve the article prior to submission
- Submission to one journal at a time
- Choice of keywords makes a publication available on searches
- Use journal guidelines for heading and formatting article for submission

Websites of note

- icmje.org - medical journal editors meet annually to provide core guidelines for reporting across health journals
- Equator-network.org - Online (free) library for planning and reporting research
- rtop.bmj.com - eLearning program comprising of (6) courses; (200) hours of tuition; (48) specific topics as an introduction research to publication with an introductory (2) modules at no cost
 - The [full programme](#) offers a comprehensive set of 6 courses, comprising 48 self-study modules that will allow you the flexibility to choose what to study, at your own pace, and in any order you like
 - How to write a paper
 - What editors and peer reviewers look for
 - Publication Ethics
 - Designing clinical research
 - Responsible conduct of research
 - Introduction to clinical trials

In closing the e-Bulletin has a peer review section. Over time several articles have been submitted and peer reviewed and returned to the author(s) for 'tweeking' and not returned. The ANTS e-Bulletin Peer Review Section welcomes your articles as many are of great interest and require suggested changes for publication in the peer section. The other option is to return the article to be published in the general section.

Karen Simunov, ANTS Member | eBulletin Editor

PROFESSIONAL ASSOCIATION | CNSA CANCER NURSES SOCIETY OF AUSTRALIA

Cancer Nurses Society of Australia (CNSA) was founded in 1998, and is now representing over 1200 cancer nurses across Australia.

In 2012 a Memorandum of Understanding between the Cancer Nurses Society of Australia and the HSA NZ Nurses Group established a professional affiliation between the groups with a common commitment to optimise outcomes for the health care of the community affected by cancer and for cancer control initiatives

As the peak professional body for cancer nursing, the CNSA thrives to promote excellence in cancer care through the professional contribution of cancer nurses. The Strategic Plan 2014-2016 highlights the following five areas of focus for the Society-

- Engaging membership and building partnership
- Ensuring the financial growth of the CNSA
- Influencing cancer control policy and initiatives
- Facilitating cancer nurses' professional development irrespective of geographical location, and
- Sustaining a rigorous governance and strategic framework.

The CNSA website is a major channel of communications with our members and the greater public. The Member Hub is specifically designed to allow members to easily access high quality materials and presentations for their professional development.

If you are not yet a member, join CNSA today and partner with over 1200 other Australian cancer nurses to achieve excellence in cancer care



<https://www.cnsa.org.au>

CANCER AUSTRALIA | NEW RESOURCES

Cancer Australia has recently released new resources relating to:

BREAST CANCER IN MEN

A website and information flyer that provides information about breast cancer in men, including

- symptoms,
- risk factors,
- treatment,
- living with cancer and
- finding support

<https://breastcancerinmen.canceraustralia.gov.au/home>

<https://canceraustralia.gov.au/publications-and-resources/cancer-australia-publications/understanding-breast-cancer-men>

TRANSITION TO PALLIATIVE CARE GUIDE

A guide to assist people diagnosed with metastatic cancer with the transition to palliative care.

The guide *Finding the Words* - starting a conversation when your cancer has progressed provides information, guidance, and helpful quotes and stories from people with cancer.

<https://canceraustralia.gov.au/publications-and-resources/cancer-australia-publications/finding-words-starting-conversation-when-your-cancer-has-progressed-0>



Australian Government
Cancer Australia

Adapted from Monthly newsletter from Chief Nursing and Midwifery Officer,
Adjunct Professor Debra Thoms - November 2016 Accessed 12/11/2016

CONFERENCE DIARY

| SAVE THE DATES 2017

International Conference: *Impact of Global Issues on Women& Children* | 9-12 January
| Manipal, India | <http://conference.manipal.edu/ic2017/>

World Cancer Day - We Can I Can | 4 February | www.worldcancerday.org/

Anniversary of the Apology (2008) | 13 February

7th Emirates Diabetes & Endocrine Congress | 15-18 February | Dubai
<http://www.edec-uae.com>

8th National Dementia Conference | 23-24 February | Adelaide | <http://ow.ly/wMGM3050zTg>

35th Annual Dermatology Nurses Association Conference - *Embracing the World of Dermatology* | 1-4 March | Orlando, Florida <http://www.dnanurse.org>

International Women's Day | 8 March | www.internationalwomensday.com/

6th International Conference on Vascular Dementia | March 6-8 | Brisbane
Email: vascular dementia@neuroconferences.com

Australasian Cardiovascular Conference | 10-11 March | Brisbane | www.acnc.net.au

41st AASTN Conference - *Into the sunshine: Storytelling in Stomal Therapy* | 12-15 March | Brisbane | <http://stomaltherapyconference.com>

National Close the Gap Day | 17 March
<http://www.oxfam.org.au/what-we-do/indigenous-australia/national-close-the-gap-day/>

HEMI Advanced Debridement Course | 17-18 March | Brisbane | www.hemi-australia.com/registration

Earth Hour | 19 March

Harmony Day Australia | 21 March | www.harmony.gov.au/

6th eMedication Management Conference | 14-15 March | Sydney
<http://www.informa.com.au/conferences/health-care-conference/electronic-medication-management>

Building Children's Nursing for Africa Conference - *Pillars of Practice* | 28-30 March | South Africa | www.buildingchildrensnursing.co.za

15th World Congress on Public Health - *Voices-Vision-Action* | 3-7 April | Melbourne
www.wcph2017.com/

14th National Rural Health Conference | 26-29 April | Cairns
in conjunction with

WONCA 14th World Rural Health Conference | 29 April-2 May | Cairns
www.ruralhealth.org.au/14nrhc

National Sorry Day | 26 April

International Council of Nurses (ICN) Congress - *Nurses at the Forefront Transforming Care*
| 27 April - 1 May | Barcelona, Spain www.icnbarcelona2017

National Reconciliation Week | 27 April-3 May | www.reconciliation.org.au/nrw

APNA National Conference - State of the Art | 4-6 May | Hobart
<http://www.apna.asn.au>

Holistic Nurses/Midwives Retreat - *Relax, Recuperate, Renew, Replenish* | 8-13 May | Bali
<http://nurses-healing.com/holistic-nurses-retreat-bali-may-2017/>

HEMI Advanced Debridement Course | 12-13 May | Perth | www.hemi-australia.com/registration

International Council of Nurses (ICN) Congress | 27 May-1 June | Barcelona, Spain
<http://www.icn.ch/>

20th Cancer Nurses Society of Australia Annual Congress - *Evolving cancer care: Enhancing quality Embracing innovation* | 15-17 June | Adelaide
www.cnsa congress.com.au

31st International Confederation of Midwives Triennial Congress - *Midwives - Making a Difference in the World* | 18-22 June | Toronto, Canada www.midwives2017.org/

Communicable Diseases Control Conference 2017 | 26-28 June | Melbourne
<https://www.phaa.net.au/events/category/conferences>

5th Annual WNC: *The Role of Nursing in Leading and Advancing Global Health* | July 24-25 | Singapore | <http://nursing-conf.org>

HEMI Advanced Debridement Course | 25-26 August | Adelaide
www.hemi-australia.com/registration

18th Australasian Nurse Educators Conference - *Transition, Technology, Transformation* | 28-30 September, Christchurch | <http://anec.ac.nz/programme/>

Global Alcohol Policy Conference 2017 - *Mobilising for Change - Alcohol policy and the evidence for action* | 4-6 October | Melbourne | <http://www.gapc2017.org.au/>

ADSNA National Conference | 14-15 October | Glenelg, Adelaide | www.adsna.info

ANZSVS 2017 - *Vascular Surgery in Times of Economic Pressure* | 14-16 October, Perth
<http://www.medicon.com.au/conference/anzsvs-vascular-2017-australian-and-new-zealand-society-vascular-surgery-annual-scientific>

ANZONA Conference - *Let's Articulate, Align and Unite* | October 25-27 | Perth | <http://www.ona.asn.au/conference2017.html>

| SAVE THE DATE 2018

16TH NATIONAL NURSE EDUCATION CONFERENCE (NNEC) | MELBOURNE

1 May | Pre-conference Workshops

2-4 May | Nursing/Midwifery/Health Education Conference

AUSTRALIAN NURSE TEACHERS SOCIETY

2015-2017 NATIONAL EXECUTIVE CONTACT DETAILS

President	Michelle GIRDLER	South Australia
Vice President	Julie SHAW	Queensland
Secretary	Didy BUTTON	South Australia
Treasurer	Christine TAYLOR	New South Wales
Membership Officer	Stuart TAYLOR	New South Wales
e-Bulletin Editor	Karen SIMUNOV	South Australia
General Committee	Mandy GALLACHER	South Australia
	Peter TEEKENS	South Australia
	Crena MITCHELL	Queensland
	Suzzanne OWEN	Queensland

E-BULLETIN CONTRIBUTIONS

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SUBMISSION / ADVERTISING DEADLINES (EXCEPTIONS BY ARRANGEMENT)

Autumn Edition	15 th March	Winter Edition	15 th June
Spring Edition	15 th September	Summer Edition	15 th December

Submissions from members AND non-members are accepted
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