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With the Public Sector Nurses and Midwives Enterprise Agreement 2016 registered in the Tasmanian Industrial Commission, it is now important to ensure all the agreed working parties develop outcomes, within the agreed timeframes. There are five working parties established; Ratios and NHPPD, ANUMs, Midwifery Group Practice, On-call and Classification and Career Structure review. ANMF will be consulting and providing feedback to members as the groups work through the key issues. Please review the Frequently Asked Questions on pages 4–5 for further information.

Aged Care will also be a key focus over the next few months, with ANMF Tasmania Branch contributing to a national strategy day to mount a national ANMF campaign to ensure the findings of the recent research determining the skill mix and nursing hours required per resident, is funded and implemented. This is vital to ensure safe resident care in the ever increasing complex environment and to ensure you have sufficient resources to provide quality care.

Our focus this month is on safe working environments and workplace health and safety, which may relate to unsafe staffing levels, overcrowding in ED, the physical environment and adequate systems. Health and Safety Representatives play an important role in ensuring their wards/units are safe and nurses are well positioned for this role.

Finally, on a positive note, ANMF is very excited to announce the introduction of a suite of new benefits for our members. You will be receiving a letter this month outlining a range of member discounts, including 5% discount at supermarkets and a range of local providers. Additionally, the not for profit Nurses and Midwives Health insurance has been launched for ANMF members and their families.

We hope you enjoy these new benefits as an additional component of your membership!

Neroli Ellis

Branch Secretary

Ruda

Changes to Infusion and ANMJ distribution

We are going green! During the months of March (this edition) and April 2017, ANMF will be sending members digital and hard copies of *Infusion* and ANMJ (unless otherwise indicated). From May onwards, you are required to have opted-in to continue receiving hard copy journals. For further information, or to opt-in, please visit the ANMF website (anmftas.org.au). We hope you understand that this is an important move towards reducing our environmental footprint. Please keep an eye out for our fortnightly e-News for up-to-date information.



Southern Roundup

Review of shift changes

It is well overdue that a review of shift times is undertaken into clinical units providing a 24 hour service and have shift change over times of; 15 minutes between the afternoon/night shift and night/morning shift; and 30 minutes morning/afternoon shift. ANMF is meeting with members to discuss preferred options and provide feedback to management. New Norfolk District Hospital is currently consulting with staff to reveiw shift times to increase shift change over times.

Mental health services suffering understaffing

The ongoing understaffing of mental health services continues to be problematic with recruitment difficulties in specialist areas. Both inpatient and community teams risk unsafe practice due to staffing shortages, and in some areas members report an unsafe work environment with risk to staff, clients and visitors. ANMF has written to MHSS management to seek urgent attention to the safety concerns.

Private sector workloads

Private sector members continue to report increasing workloads with unreasonable expectations from management. ANMF will continue to meet with members and management where problems are reported to seek satisfactory outcomes. Calvary Health Care has regular meetings to specifically address workloads. ANMF encourages interested members to contact ANMF Organiser Sue Darcey to join Calvary's Nursing Workload Monitoring Committee.

New year, new challenges

2017 will no doubt bring many challenges for the health system and our members with change continuing to be the norm. Wage increases have been low and it is important that improvements to conditions gained in

the recent Enterprise Agreements are implemented. ANMF will be working closely with members to ensure that all of your entitlements are implemented.

Northern Roundup

A busy start to the year

It has been a busy start to the year with numerous workload concerns amongst our public sector members. Members are reporting increases in patient acuity, staff sick leave and vacancies against base rosters. These matters are having a substantial impact on workloads. We have various outstanding workload grievances that we are passionately advocating for our members, to ensure safe patient and staff safety across the sector. As we are all aware, excessive workloads can cause fatigue, decreased morale and can be a potential high risk factor for errors. We will continue to work with our members in the North to enable them to provide safe patient care in a sustainable working environment.

New benchmark discussions

We have also been working closely with Tasmania Health Service (THS) management to benchmark some new areas that previously did not fit into the Nursing Hours Per Patient Day staffing model and had no alternate model of care. These areas include Launceston General Hospital (LGH) Pediatrics ward, Launceston Community Nursing and LGH Maternity Services wards 40/4B. This is a positive move forward in obtaining safe staffing levels for our members.

Funding changes for Aged Care

Recently, the Aged Care sector has been faced with many changes to their funding structures. We are yet to see the full impact that this will have on facilities moving into 2017. ANMF are enjoying regular site visits to Aged Care facilities around the state and look forward to assisting members with their industrial enquiries throughout the year.



Enterprise Agreement (EA) negotiations

EA negotiations will soon kick off for some facilities in the North, further reports will be provided to members throughout the year on Northern EA matters. If you see the ANMF team in your workplace please come up and have a chat to us.

North West Roundup

Ulverstone and Devonport Community Nursing

ANMF Organiser, Marita Meadows, has been attending a Joint Consultative Committee set up to for discussion between staff, management and ANMF in regards to the Tasmania Health Service (THS) change proposal. The change proposal will see evening shifts at Ulverstone Community Nursing cease, with evening patients required to use the Devonport Community Nursing service. Members from Devonport have raised concerns regarding increased workloads and the potential for more clients than can currently be managed. An increase of palliative clients may mean that nurses would not have the time to maintain the current level of care provided. Nurses at Ulverstone have also raised concerns regarding how the proposed change could affect workloads in the office. At the time of print, committee meetings are ongoing and ANMF continue to keep regular contact with members.

EA Updates

A number of Enterprise Agreements for private sector Aged Care are due to expire later this year. Organiser Marita Meadows has been visiting North West sites to discuss the EA process with members and workplace representatives. Tandara Lodge in Sheffield, is one of these sites; its General Staff Agreement is due to expire in June. Members completed a survey that ANMF will use to develop a Log of Claims to be endorsed by members, and presented to management at negotiation meetings. To ensure members have a say

in their own agreement, ANMF encourages workplace representatives to be a part of the negotiation team.

Aged Care Roundup

Aged Care across the state

The first two months of 2017 have seen Member Engagement Officer, Mandy Clark, visiting Aged Care facilities in the North and North West of Tasmania.

Through hosting morning and afternoon teas, Mandy has had the opportunity to engage with new and existing members. With discussions predominantly centring on current workplace issues, Mandy has been able to provide on the spot advice and where required, referrals for more complicated matters to the ANMF industrial team to follow up. It is exciting to see new members, nurses and carers engaging with ANMF. We extend a warm welcome and a big thank you to all our newest members.

Mandy will continue regular visits to Aged Care facilities across the state and hopes to see all ANMF members and non members in the near future to discuss any workplace concerns.

Concerning culture in Aged Care

ANMF have had an increasing number of concerned members contacting us with workload issues at Aged Care facilities. The impact of Federal Government funding cuts is continuing to affect members in the workplace. The latest Aged Care home affected is Queen Victoria Care. A members meeting is scheduled to discuss the impact of a new model of care implemented to mitigate against funding cuts. Southern Cross Care, Onecare, Bupa and Island Care (formally St Ann's) are also engaging in workplace changes which are affecting our members. ANMF will provide support via member meetings at these workplaces. We will keep you up to date on these meetings, as more details come to hand.





How can we trust the implementation of all conditions?

A steering committee has been established to proactively work to ensure the Agreement is implemented and projects completed by the specified time in the Agreement. Five sub-committees have been agreed; Ratios/NHPPD, Classification and Career Structure, Oncall Rostering, Associate NUMs, Midwifery Group Practice. ANMF is represented on all groups.

When will we receive wage increases?

It is anticipated that the Agreement will be registered with the TIC in early February 2017. Increase to be added to hourly rate pay after registration (date will depend on process) and backpay will be paid by the end of March 2017.

What is happening with Ratios?

A hybrid model needs to be developed by the parties recognising that the ratio is a simple daily staffing tool. However there is also a benefit in retaining some positive components of the NHPPD. The working party will commence within one month of the Agreement registration and finalise the review by 30 October 2017. ANMF note this is a significant part of our claim and settlement.

What is the Associate NUM and how will the role be implemented?

The offer consists of an ANUM rostered on every shift in every ward/unit across the state.

This position will replace the current myriad of in-charge roles on shifts, who currently receive the "in-charge" allowance. This allowance will not be paid to ANUMs as coordinating and being "in-charge" of shifts is part of their role.

Other aspects of this role include working with NUM as delegated and comprising the ward/unit management team. It is anticipated that the role will co-ordinate patient flow and clinical oversight of patient care, coordination of complex discharge planning, staffing and resource planning, mentoring and support of other nurses and may assist the NUM in Grade 4 application assessment, PDAs and interview and staff selection. However the SoD is yet to be determined and finalised.

The current small number of Clinical Coordinators are working on wards as day workers, however the ANUM will be shift working to cover all shifts. It is anticipated that many Clinical Coordinators will translate to the ANUM roles at their current level. Negotiation will occur and if there is as mutual agreement, these positions may convert from day worker to shift worker but this cannot be forced.

Where current 'in-charge' positions have a patient load, that will continue but the majority of wards have incharge positions with no patient load which are included in direct hours. The new ANUM positions will not be included as direct hours in the NHPPD.

Once the Classification Descriptor and new Statement of Duties are drafted and agreed, advertisement will begin to recruit to these senior Grade 5 clinical positions using a merit based process.

Who is eligible for the in-charge allowance?

The in-charge allowance will only be payable to Grade 3's and 4's if they cover the ANUM for short term cover on a shift. Longer term planned cover will attract a Higher Duty Allowance and enable other nurses to gain experience as acting ANUMs.

The in-charge allowance has increased to \$23.20 for Grade 3 and Grade 4s when sole Grade 4 rostered and \$15.47 for Grade 4s when other Grade 4s rostered.



What is in it for enrolled nurses?

An Advanced Enrolled Nurse role is to be considered in light of the broadening scope of practice and specialisation of EN's. An enrolled nurse who has upgraded to a RN role (and is appointed to such) will directly enter as a Grade 3 Year 3.

How has non certified personal leave improved?

The provision and intent is for nurses to have five shifts, regardless of length, available for uncertified leave. The draft proposed award clause reads:

A medical certificate is required for each personal leave absence for personal illness or injury after the employee has taken five (5) full rostered days regardless of shift length (e.g. 8, 10 or 12 hours) and/or an aggregate of no less than 38 hours without a medical certificate in any personal leave year.

I am RN, Year 4 and how can I now access Grade 4 role?

The Agreement enables nurses and midwives at Year 4 and beyond, to apply rather than at Year 6 as in previous Agreement. The Formal Capability Assessment criteria remain but the guidelines will need to reviewed and updated. Applications will be accepted from the date of registration of the Agreement.

What are the improvements for nurses working in the community and uniforms?

In addition to normal uniform entitlements, an agreement to provide a warm, breathable, windproof jacket and protective clothing to each nurse and midwife working in community settings, including outreach roles is now in place.

How have the on-call entitlements improved?

Nurses and midwives rostered on-call will have improved entitlements. Nurses who are rostered on-call and working beyond the completion of their rostered shift, in excess of one hour, will be paid the first hour at overtime rates and after that hour will be paid a call back payment of four hours, regardless of how much longer they work. This issue has been occurring predominantly in theatre suites as lists extend.

A working party will be established to increase the pool of on-call nurses and midwives in specialty areas and report of good rostering practices and the use of on-call.

Additionally, it is recognised that some nurses work excessive on-call which is impacting on their work life balance, and discussion continues as to whether additional benefits will be paid to this small group of nurses and midwives.

When does the extra two weeks of maternity leave and one week of paternity leave apply?

The Award is to be amended. Nurses on paid maternity leave at the time of the award variation will have their period of paid leave extended by two weeks. Nurses who have already entered into the unpaid period of maternity leave will not be entitled to any further paid leave.

For further information about the EA please contact ANMF on (03) 6223 6777 or 1800 011 241 if you are outside Hobart, or email info@anmftas.org.au. More information can also be accessed online at anmftas.org.au/ratios





ANMF are concerned at the increasing number of reports being received from members in regards to unsafe and unacceptable workplace environments.

These concerns include, but are not limited to; unsafe staffing, overheating or underheated working environments, unreliable duress alarm systems, secure access, unsafe fittings and furniture, cramped work spaces, and excessive noise.

All employees have the right to a safe and healthy workplace, it is the responsibility of the employer to maintain and address this regularly.

Workplace Health and Safety (WHS) legislation requires persons who conduct a business or undertaking (PCBU), to manage all work health and safety risks, so that the health and safety of workers and other people are not affected by an organisation's conduct.

Employees also have a responsibility to ensure that any identified hazard or risk is reported to their manager or Health and Safety Representative (HSR).

- A hazard is a situation that has the potential to harm a person
- A risk is the possibility that the harm (i.e. death, an injury or an illness) might occur when exposed to a hazard

General working environment (workplace facilities)

A person conducting a business or undertaking (PCBU) at a workplace must ensure that the following is provided and maintained, so far as is reasonably practicable, without risk to a person's health and safety:

• a means of entry, exit and movement within the workplace

- an appropriate workspace
- adequate lighting to enable each person to carry out work
- access and knowledge of evacuation procedures in an emergency
- adequate ventilation and adequate facilities for workers (including toilets, drinking water, washing and eating facilities)
- a workspace that is maintained, in good working order, clean, safe, and accessible

Health & Safety Representatives

ANMF encourages all members to ensure they have at least one HSR in their workplace to facilitate appropriate action when hazards or risks are identified. The Work Health and Safety Act sets out specific powers and functions that an HSR can perform in the interests of the workers they represent.

Please contact ANMF if you have any workplace safety concerns or want information on the role of the HSR. The Tasmanian WorkSafe website is also a valuable resource.

Resources

ANMF

Phone: (03) 6223 6777 or 1800 001 241 (outside Hobart) Email: info@anmftas.org.au anmftas.org.au

WorkSafe Tasmania Phone: 1300 366 322 worksafe.tas.gov.au



Workers Compensation leave accrual entitlements

Any members that have been on workers compensation should check their leave accruals. A case in New South Wales identified that under the Fair Work Act, the accrual of leave entitlements during a compensation period may be permitted by compensation law.

WorkSafe Tasmania has recently updated its website to reflect these findings and acknowledge that Tasmania's Compensation Laws do not prevent the accrual of leave entitlements. The WorkSafe Tasmania website currently advises that you are entitled to any leave that accrues while you are receiving weekly compensation payments, including sick leave, annual leave and long service leave.

As above, it is important to note that the case in New South Wales referred to NSW workers compensation law, and although information from WorkSafe suggests implications for Tasmania, a case has not yet been tried here. If you believe that you are entitled to leave accruals please contact ANMF on the information below.

Payments

Once your employer receives your claim for compensation, they must start making weekly payments of compensation if you have been certified as totally or partially incapacitated for work. There are 2 options for this:

- 1. Where the worker's first pay day is within 14 days of lodging their claim, weekly payments must start on this pay day (if it is not reasonably practicable to do this, payment must be made no later than 14 days after the employer received the claim), or
- 2. Where the worker's first pay day is more than 14 days after lodging their claim, weekly payments must start on this pay day (this usually happens where workers are paid monthly).

They must also start paying for medical and associated expenses up to \$5,000, unless they think the claimed expenses are unreasonable or unnecessary.

These payments are to start regardless of whether the employer disputes liability for your claim.

Medical expenses

Your employer is liable for the cost of all reasonable expenses you necessarily incur for:

- medical services
- hospital services
- household services, for the proper running and maintenance of your home (such as cleaning, laundry and gardening)
- nursing services
- constant attendant services, including the constant or regular personal attendance on you provided by someone who is not a member of your family (for example, to shower, dress or feed you)
- rehabilitation services
- · ambulance services

Travelling

Your employer is also liable to pay reasonable expenses for you to travel to any medical, hospital or rehabilitation service or to attend any medical examination organised by your employer.

The amount payable for using a private vehicle is calculated with the occasional user rates set out in the Tasmanian State Service Award under Public Sector Awards (tic.tas.gov.au).

Medical accounts

When you receive an account for medical or other expenses, forward this to your employer within 7 days. Once they receive the account, your employer must forward it to their insurer within 7 days.

If you are concerned your workplace is not adhering to the guidelines above, or if you have any questions regarding entitlements, we can help. Contact ANMF on (03) 6223 6777 or 1800 011 241 if you are outside Hobart, or email info@anmftas.org.au. For more information about WorkSafe visit worksafe.tas.gov.au/safety.

Aged Care Conference 2017———

Consumer Directed Care

Exploring choices for the Aged.



Held in Launceston this April, this event is sure to be Tasmania's most prominent conference for nurses and care workers. It will deliver high quality professional development with a focus on issues affecting care delivery to the elderly in residential aged care, the community, and also the acute care setting.

Key speakers

Honorable Julie Collins MP Shadow Minister for Ageing and Mental Health

Andrew Robinson

Co-Director, Wicking Dementia Research and Education Centre

Date

7 April 2017

Registration

Online anmftas.org.au
In person HERC office,
182 Macquarie Street, Hobart
More information (03) 6223 6777 or
1800 001 241 outside the Hobart area

Location

Tailrace Centre, Launceston

Thanks to our sponsors:











The wait is almost over! We are excited to confirm that the much-anticipated Member Benefits program is launching at the end of the month. As most of you have heard, this is an exciting member exclusive program full of great discounts and offers.

The ANMF members only program gives you access to a huge range of discount services both locally and nationally. With over 4,500 businesses involved, the program inlcudes deals from restaurants, retailers, accommodation, lifestyle and so many more.

From March 31 you will receive your Members Benefits pack in the mail. This will include a discounts book, new members card and welcome letter with instructions and login details for online access.

We want to ensure that each of our members receive their welcome packs and enjoy all that the program has to offer. In order to do this, we are asking members to take the time to update their info. And if the discounts aren't enough to get you excited to do this, we are running a competition that sure will!

Win a full year of ANMF membership free!*

filling out the form online at anmftas.org.au will go free! Alternatively, you may use the form below.

* Available to fee-paying ANMF members only.



Please answer the below to go in the draw Work details to win one year free ANMF membership! Employer Personal details Workplace Given name Ward/Area/Unit Surname Work phone Member No. Please send me Infusion and ANMJ via email only Email Mobile phone Please continue to send me printed *Infusion* and *ANMJ* Home phone Please send your updated details to Postal address Change of details competition Reply Paid 70389 ANMF (Tasmanian Branch) 182 Macquarie Street, Hobart TAS 7000



As part of the Tasmanian Liberal Government election commitments. \$5.8 million was provided over four years (2015–16 to 2018–19) to introduce a contemporary model of primary and secondary school health nurses across Tasmanian Government schools.

Pilot Project Commencement

The School Health Nurse program grew out of a School Nurse Pilot Project conducted at Wynyard High School in 2012 and 2013; an initiative supported by DHHS Youth Health Service (North West). This project involved a 'Nurse on Campus' model of service with the aim being equity of access and ensuring high levels of student (client) participation. This project stimulated significant interest within the Tasmanian Youth Sector and the broader community and was the seed for School Health Nurse Program, with the appointment of Julia Taylor - School Nurse project manager in mid-2014.

Evaluation of the Pilot Project

Pre and post-intervention data was gathered to measure the effects of the Pilot Project and evaluate its success in improving population-level, subpopulation-level, and individual knowledge about:

- Healthy relationships, healthy living, and the effects of peer pressure; and
- Risks to personal health, wellbeing and safety.

Student surveys and focus groups were also used to gather qualitative data at key intervals about perceived self-efficacy in making healthy choices and taking appropriate actions to improve, maintain and protect personal and peers' health, wellbeing and safety.

This Pilot Project paved the way for the current School Health Nurse Program.

School Health Nurse Program Development

The Director of Nursing (Mr Anthony Millward) and the DoE team have worked extensively with the Australian Nursing and Midwifery Federation Tasmania and within the governance of the Australian Health Practitioner Regulation Agency around the nurses' statement of duties and workloads for the nursing team. By working with the nursing governing bodies the DoE has been able to develop a policy, framework and guideline tailored to the program. The contemporary model moves away from the school nurse providing head lice checks, first aid or giving medication and has developed into a health education, health promotion role enabling students and families to become empowered by informed choice.

School Health Nurse Program Rollout

The first 10 FTE School Health Nurses commenced from 1 July 2015 with a further five FTE employed from 1 July 2016. Due to the success of the program the third phase of the program has been brought forward from July 2017 to January 2017; where we will see a total of 81 schools receiving benefit from a School Health Nurse.

Schools have been selected using a variety of data including the index of community socio-educational advantage, the Australian Early Development Census, Australia Bureau of Statistics data, the DHHS's Kids Come First program, number of enrolments and input from internal and external stakeholders.

Duties of the Primary, Secondary and School Health Nurses

The duties of the school health nurses are split into three distinct streams: Primary School Health Nurse, Secondary School Health Nurse and School Health Nurse.

Primary School Health Nurses provide:

• Evidence based practice, both one on one or as group health promotion/health education focusing on Kindergarten student health checks.



- Both hearing and vision and developmental assessments.
- Ongoing support and advice for students, families and school staff on child health, physical wellbeing, mental wellbeing and nutrition, growth and development, healthy relationships, adverse behaviours.
- Assistance to schools with the management process for medication and the care of students with complex medical conditions by liaising with the appropriate health professionals.

Secondary School Health Nurses provide:

- Evidence based practice, both one on one or as group health promotion/health education focusing on promotion of good health and wellbeing.
- Positive parenting for teenagers with babies, body esteem, sexual health and healthy relationships, addictions and risky behaviours (including drugs and alcohol).
- Mental wellbeing (including resilience).
- Targeted hearing and vision screens.
- Assistance to schools with the management process for medication and the care of students with complex medical conditions by liaising with the appropriate health professionals.

School Health Nurses are an amalgamation of both Primary and Secondary School Health Nurses and are aimed at nurses who cover both Primary and Secondary Schools. The nurses achieve their duties through a range of ways, including parent sessions, drop in clinics, health promotion local, state and national and student education running in line with the Australian Curriculum.

Liaison with Key stakeholders and Evaluation

School Health Nurses work and liaise collaboratively with other support service staff including school psychologists, speech pathologists, social workers, vision and deaf services, autism consultants and physical impairment coordinators and have built a number of valuable

partnerships with external agencies in and around the Tasmanian Health Service.

We are currently evaluating the School Health Nurse Program with the Department's Educational Performance and Review unit; looking at the raw quantitative data produced by the nursing team and also independent research conducted by UTAS exploring qualitative data from staff, students and parents.

How are our School Health Nurses finding their new roles?

Below are some anecdotes and quotes from our School Health Nurses:

"I have been working full time as a primary school health nurse for five months. These last five months have been the greatest time of my nursing career yet! I work across five primary schools in the north of Tasmania."

"I am able to develop programs tailored to the very specific needs of the individual child or class, for example sessions on hygiene for Years 5 and 6 classes, Growth and Development for all years from Prep to Year 6."

"I am extremely grateful that this fantastic role is here in our beautiful Tasmanian schools to support and provide quality primary health care for our next generation"



"I am part of a team within the schools and work closely with teachers, parents, social workers, psychologists and community police. Together we help our students, it is certainly not a one man band. It is vital to have an entire team approach in dealing with the health and wellbeing of our students."

"I am proud to be a School Health Nurse and love seeing the changes in students that are due to having the program in the school."

How are our School Health Nurses making a difference?

"At lunch time I head to the staff room. This is a good time for teachers to approach me and we discuss a variety of health issues that range from individual student concerns to whole school ideas for health promotion."

"The focus of the Primary School Health Nurse is not to deliver first aid or provide care to the sick, rather it is a primary health care focus. I have the scope to deliver programs in the schools that are in line with both the national curriculum and the needs of the school."

"I have been told countless times how grateful people are that I am present in their school for that one day per week and how they couldn't imagine how they coped without me previously."

"This year I had a student who could not come to school for a number of health and social issues and since working with the team we have successfully assisted them to return to school and set achievable goals of attending college and university. The student told me that without the team helping they would not have been able to come back to school and achieve."

"Today I have rechecked a child's vision and found it still to be outside normal range so with parent consent I have referred this child to the optometrist."

School Health Nurses are making a difference for Tasmanian students and their families and are promoting a healthy environment that optimises lifelong learning and a healthy wellbeing.



Article written by Anthony Millward Director of Nursing, Department of Education



WorkSafe, Better Work and ANMF Tasmania present:



WEDNESDAY 22 MARCH FROM 4-6PM

Venue:

Wellington Room, Wrest Point, Hobart

NETWORKING SESSION FOR HEALTH & COMMUNITY SERVICES

Focus topics include:

- Fatigue management
- Manual tasks
- Violence and general mental health

Key note speaker:

Natasha Lazareski discussing fatigue management and general mental health in the workplace.

For more information and registrations visit: www.worksafe.tas.gov.au









YOUYRE ARIIIT



Caring for the carers

We all know that nurses and midwives play a vital role in our communities. It's time a health fund exists to support the needs of those who care for so many.

For more information visit **nmhealth.com.au** or call **1300 344 000**

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