

June 2023 Newsletter

Neonatal Nurses College of Aotearoa (NNCA)

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Chairperson's Report

Merophy Brown, Chair

Kia ora koutou,

As autumn turns to winter, many of us might be thinking when did summer even begin? Except if you were in the South! Our country has seen its share of experiences this year with the recent flooding in Northland, Auckland and The Hawke's Bay region - with significant devastation occurring. During this time we have seen communities come together and support one another to get through. To our Hawke's Bay colleagues we want to acknowledge what you have been through and continue to face within your community.

In the neonatal space, we have seen the introduction of the Bexsero (MenzB) vaccine to the schedule, and the addition of prophylactic paracetamol given with it. This has raised questions around conversations with whānau and the use of paracetamol.

There has been a recent spike in whooping cough (pertussis) with two deaths in Starship, prompting the call to get older children and parents/whānau vaccinated.

Networking continues to be a priority amongst the NNCA executive team with members attending the Perinatal Society Scientific meeting, as well as the PSANZ conference in Melbourne. Feedback will be presented in our newsletter. We also took part in the College and Sections day with other colleges and sections, promoting what our college does.

We have 3 new executive members, and are excited to work alongside them strengthening our voice and bringing experience from different parts of Aotearoa. They will be introduced in our newsletter and on our website.

There are exciting opportunities coming for our members with the passing of the FINE course proposal. This will be the beginning of our college supporting this specialised developmental care practice being taught to all Neonatal Nurses throughout Aotearoa, leading to consistency in care for our patients and messaging given to whānau.

Thank you all for continuing to do the amazing work!

Nāku noa,

Merophy

Introducing our new members of the NNCA Executive Committee



Lauren has a clinical practice background in Neonatal Intensive Care and general paediatrics. Currently, Lauren works as the Associate Course Coordinator for the Neonatal Papers at Auckland University of Technology/ Te Whatu Ora. Prior to taking up a position at AUT Lauren has worked as a clinical nurse educator at a surgical NICU at The Children's hospital at Westmead, Sydney and as a nurse educator in a rural Paediatric unit and SCBU. Lauren also works as a CAP Tutor, and as a research nurse at the Liggins institute. Her clinical interests are management of the surgical neonate, nurse education and Developmental care.

Nina is the Clinical Nurse Educator for Paediatrics, Special Care Baby Unit and Paediatric Ambulatory Nursing Service in Hawkes Bay. She is originally from the Philippines where she worked for 10 years in a specialised cardiac hospital. Prior to becoming CNE, she worked as a senior nurse across Paeds and SCBU at HBDHB where she honed her abilities in career and process development providing a strong foundation for her role. She is passionate about caring for children and education. She enjoys mentoring staff and students to help them be able to attain their full potential and guide them through their career advancement and development.



Elisabeth has been a Neonatal Intensive Care nurse for the last 9 years. She currently working as a Clinical Nurse Specialist (Advanced Neonatal Practice) in Christchurch NICU while completing a clinical Masters in Child Health. She plans to apply for Nurse Practitioner this year after she graduate in July. She loves neonatal nursing and working with families in a developmentally supportive environment. She is new to the NNCA committee and is excited to connect with neonatal nurses outside her region. She is looking forward to increasing her knowledge from the latest research and support her nursing colleagues to implement this.



Neonatal Nurse of the Year Award – Fisher & Paykel Travel Scholarship

2021/ 22 Neonatal Nurse of the Year Fisher & Paykel Travel Scholarship Award winner Rosemary Escott



The Neonatal Nurses College of Aotearoa (NNCA) has great pleasure in announcing Fisher and Paykel's continued support of the **Neonatal Nurse of the Year Award**, established in 2014.

This award recognises an individual nurse's contribution to their organisation, local, national and/ or international communities. This travel scholarship is valued at \$2,000NZD, and awarded for excellence, research, innovation and contributions to neonatal nursing. It is for travel to develop the award recipient's career further, e.g. to attend a scientific meeting or conference, or to enable a visit to an overseas Neonatal Unit.

The Neonatal Nurse of the Year Award was last awarded at the NNCA Symposium 2021/22, and nominations were judged by the NNCA Executive Committee.

We are very grateful to Fisher & Paykel who again continue to support the NNCA. A big thank you to them.

[Get the 2023 Nomination Form from the NZNO Scholarships and Grants page - Apply now!](#) Nominations close 31st July 2023.

Nomination for F&P Neonatal Nurse of the year 2022 – Rosemary Escott

I believe this wonderful woman deserves this recognition, and has done so for a while. She says she has no real idea how much longer she will continue in her role, but says she still "has things to do".

There is not a CV (researched this last year) as she has been the Charge Nurse Manager at Wellington NICU for 22 years, and was the Educator there for many years before that. She is one of those rare nurse managers who has never forgotten she is a nurse, and they just don't make Charge Nurses like that anymore. She is not, however "old fashioned" (except where it is needed) and obviously evolved alongside all the things that have happened within the health system over the last forty years or so, and I see every days how she deals effectively with the altered, and often really difficult, attitudes, priorities, and constraints within which we all practice.

Despite the enormous pressures of leading, and balancing budgets vs needs (it is indeed a battle!) she has never lost perspective, compassion, humour, and the ability to make common-sense and humane decisions. Of course she has to communicate and even make unpopular decisions sometimes, but always manages to rationalize the needs, and explain to staff to at least the understanding and acceptance of most.

She fights very hard for babies and their families, and for neonatal nurses - much of this unseen and unacknowledged. Certainly she has access to the seat of power - parliament is just down the road, and happily takes ministers, Health Departmental officials, etc on "tours" and wows them with visual reality - and this is not just for Wellington, it is for all neonates and whanau/families/staff in New Zealand. She shamelessly appeals to the better side of these individuals, knowing that she can, and that it works!

She established a nurse-led model of care, and the gestational care model used here, which is very successful – the unit has good outcomes, well-documented. We have recently achieved a human milk bank in Wellington NICU, and though the staff may do much of the leg work for such endeavours (supporting of CVs and PDRP requirements), Rosemary is the one who writes the final words in such a manner that the purse string holders eventually are persuaded to fund it (It has taken years, persistence, and a heap of patience).

I don't know how many national committees she is on - she quietly gets on with this enormous workload, looking at such important things as transitional care units, where the less ill babies and their Mums will be cared for together, to prevent separation and all the negative things that go with that, for example. She is innovative, inclusive, and she speaks the language of us all, and translates it up or down the chain as needed, and this wisdom ensures she walks the walk, talks the talk. Rosemary is articulate, composed, fierce when needed, and the neonatal community owes more to her than can be described.

Rosemary will always attend, for example, the funerals of staff and/or their families - this visible kind of caring is truly the sign of the kind of leader she is. She leads a group of senior NICU nurses who come in early on International Nurses Day – and they all make us waffles and all the things that go with that – a wonderful Wellington tradition!

Janet Black, NNS Advanced.

Personal and Professional Challenges: A Nurturing Retreat for Nurses – conference reflection

Yip, you hear it time and time again, oh you're a nurse - 'gosh that's hard', 'how exhausting', and most recently 'is it really as bad as the media is making it out to be?'...the answer, yes, yes and YES!

So what better time to take myself off to a conference in stunning Queenstown to not only learn about the 'implications of stress, grief and trauma' but also some new skills to help with resilience in the challenging world of healthcare.

The first day was a difficult one as our presenters Anne and Sue went deep in the water, defiantly above head level - as they tackled the topics of anxiety, panic attacks, adrenal fatigue and constant stress. And it continued in the afternoon with grief, bereavement and burnout...phew! So many things stood out to me, one of them being that depression is rapidly increasing and will be the leading cause contributing to healthcare demand by 2030 and the fastest growing market for antidepressants are young children/people - yes you read that correctly!

Luckily there was a personality test thrown in the day for a bit of light relief and a few 'ah ha' moments and surprise, surprise - I was pretty much in the middle of the personalities but erred on Type B and C.

Day Two discussed the important counselling techniques to use along with NOT what to do i.e. I'm not here to fix, take control and rescue this client, colleague or family member but to listen - fun fact 'listen' can be rearranged to spell 'silent'...I definitely need to practice this more. Another lightbulb moment for me was if that a person doesn't want to change then counselling/coaching won't be effective. Why a lightbulb moment you ask? I always think people would want to change behaviours about themselves so they can be more alive in who they are meant to be...but perhaps that's not always the case.

On the downhill now with the third day and a very busy descent with all the information that kept on coming...effects of shift work, challenging situations that affect mental and physical health, professional and personal boundary setting with narcissistic and bullying behaviour, exploring mindfulness, mediation and developing your very own tool belt to assist with this all.

When I reflect into the NICU working environment, it's interesting where all our boundaries are with tolerating disrespect, being overburdened and the feeling of not being heard when the workloads are high. The key is, in order to have healthy boundaries, we must 'respond not react' by having a voice that is 'assertive' not 'passive' or 'aggressive' or both! Clearly I can't cover everything otherwise this reflection would be pages long. One of the things that was also covered was various medications such as anti-depressants, statins and anti-reflux...the research coming out about them for long term users are truly eye watering (google it!).

Would I recommend this course, absolutely. Do I think it should be compulsory for nurses to attend, unquestionably...starting with the senior nursing teams throughout the NZ healthcare system.



To sum up this conference in just three words (which is not that easy...ha!) I felt validated, challenged and inspired. Thank-you Anne and Sue for coming and sharing your wealth of knowledge and experience with us all, and digging into some deep truths with the utmost respect to all our journeys within our nursing worlds.

Now off to use one of my tools in my tool belt to help with my resilience and mental health - walking Te Komama - The Routeburn track, magnificent!

[Calendar of events - Health Ed Professionals Pty Ltd](#)

Claire Annan - Nurse Educator

Newborn Services / NICU | Te Toka Tumai | Auckland

CAnnan@adhb.govt.nz

Referenced as required from conference slides/notes from Anne Evans-Murray and Sue Walker.

Conference Feedback – PSANZ 2023

The PSANZ conference is an annual event that brings together perinatal and neonatal researchers, clinicians, and policy makers from Australia and New Zealand. The theme of this year's conference was "Laneways to Better Perinatal Outcomes", inspired by the vibrant and diverse culture of Melbourne. The conference took place from the 5th – 8th of March at the Melbourne Convention and Exhibition Centre.

The conference featured a range of keynote speakers, symposia, workshops, oral and poster presentations, covering topics such as maternal health, foetal development, neonatal care, long-term outcomes, and health equity.

A number of poster abstract submissions were accepted from staff in Dunedin's NICU, as well as other researchers connected with our unit. The poster sessions provided a great opportunity to discuss research and practice.

I am grateful for funding support from my employer (Te Whatu Ora Southern), the Ngaio Fulton Trust, Donald Malcolm Research Fund and Neonatal Nurses' College Aotearoa.

Pre-conference workshops Saturday 4th & Sunday 5th March

Arrival in Melbourne was delayed by a day due to flight changes, so I missed some of the pre-conference workshops. The Eat, Sleep, Console workshop was cancelled due to the presenter being unable to travel.

Workshops were hosted by the Foetal and Newborn Network with a focus on discovery science research. There were 35 sessions over the 2 days sharing research on preterm lamb, piglet and guinea pig models, as well as studies of preterm babies, and systematic reviews.

Highlights from these sessions:

Staphylococcus epidermidis (staph epi) sepsis and physiological stability (Perth)

Aim to develop a preclinical model of sepsis. Preterm lambs were delivered at the equivalent of 28 weeks gestation, managed with usual neonatal care, and at 2 hours of age lambs were either inoculated with staph epi or a control medium. The study tracked the course of physiological stability and cytokine analysis, lambs were humanely killed and lung tissue examined. Results showed decreased white cell count and decreased lung compliance in the presence of staph epi, and demonstration of intense pro-inflammatory response systemically and localised in lung tissue. Ongoing analysis aims to develop clinically relevant early indicators of sepsis.

Low Blood volume, cardiovascular deterioration and inadequate lymphatic return (Queensland). There is little known about lymphatic function in preterm infants and the role it plays in fluid filtration from capillaries. The premise is that if filtration is not matched by lymphatic return, then hypovolaemia may occur. The aim was to understand lymphatic return and blood volume using a term and preterm piglet model. Results showed significantly lower lymphatic return in preterm piglets compared with term piglets, both with and without fluid volume correction, making preterm piglets vulnerable to hypovolaemia and cardiovascular deterioration. If this is also the case in preterm babies, then strategies could be developed to support blood volume through improved lymphatic return.

Creatine for Neurological Health (UNICORN Study) (Melbourne & Wellington)

Understanding the importance of creatine for brain development. This study was an assessment of circulating and cerebral creatine levels in preterm infants, the correlation with neurological outcomes, and creatine availability in nutrition provided to preterm infants. Results show normal creatine levels at birth (cord blood) irrespective of gestation, with decreasing levels over time postnatally, and by discharge extremely preterm infants had 45% lower serum creatine than moderate-late preterm infants. Ongoing analysis is needed to understand links between creatine profile, nutritional intake and neurological outcomes. There may be indications for the use of creatine supplementation for extremely preterm infants.

Short apnoea and periodic breathing in preterm infants (Melbourne)

Looking at the relationship between central apnoeas and developmental outcomes. This work studied a cohort of babies born between 28-32 weeks at various post-menstrual ages looking at total sleep time (TST) and the percentage of time spent having central apnoeas (apnoeas included periodic breathing). Time spent in respiratory events is a significant predictor of language and motor scores independent of gestational age, birth weight and sex. Post-discharge, clinically stable preterm infants continued to have respiratory events during sleep and these events, particularly periodic breathing, were related to a reduction in language and motor outcomes at 6 months corrected age. The take home message is that periodic breathing is not a 'benign' feature of preterm infants, and response to reverse an apnoea should be prompt regardless of gestation or post-menstrual age.

Disruption of noradrenergic receptors (preterm guinea pig model) (Newcastle & Wellington)

Preterm infants have an increased likelihood of developing neurodevelopmental disorders such as ADHD and anxiety. Generally these disorders have a sex-based bias – males show increased incidence of ADHD, females show increased incidence of anxiety. These disorders are characterised by neurotransmitter imbalances such as noradrenaline, which has a role in attention regulation and stress-modulation. Preterm birth disrupts noradrenergic neurotransmission and may account for sex-based bias. This study compared expression of noradrenergic receptor genes in preterm and term guinea pigs, specifically ADRA1 and ADBR1, in both the frontal cortex and hippocampus. Results showed ADRA1 was significantly higher in preterm males, and ADBR1 was significantly higher in preterm girls compared to term offspring. Major changes in noradrenergic receptor expression is demonstrated following preterm birth in a sex-based way, and more so in the frontal cortex. This supports the finding of sex-based distribution of neurobehavioural disorders and may have indications for developmentally appropriate care and treatments based on the sex of preterm infants.

Maternal asthma and links to allergy and asthma in offspring (Perth)

Systematic review exploring whether in utero maternal asthma exposure increases asthma risk for offspring. The mechanism of effect is being investigated in relation to the impact of asthma-related inflammatory cytokines and hypoxia on foetal surfactant suppression. Of 126 studies identified, 120 were included in the meta-analysis. Findings show that maternal asthma at any time was associated with greater risk of food allergy, allergic rhinitis, allergic dermatitis, wheeze and asthma relative to offspring of non-asthmatic mothers. Uncontrolled or poorly controlled maternal asthma during pregnancy was associated with greater risk of asthma in offspring. Children of mothers with asthma are at risk of developing allergic conditions. Further investigation is needed to understand whether overall improved asthma control for mothers during pregnancy could reduce the risk of development of allergic conditions in offspring.

PSANZ Conference 6th - 8th March

Melbourne Convention Centre

More than 400 posters were presented over 2 sessions, as well as viewing during breaks. NICU posters from the Dunedin team were well received and there was a lot of discussion and questions about transitional care in NZ.

Oral presentations covered a wide range of clinical topics across the continuum of perinatal and neonatal care, as well as a broader view of maternal and family well-being, and indigenous health and systemic inequity.

All abstracts presented at PSANZ 2023 are now available to view in the Journal of Paediatrics and Child Health, Volume 59, Issue S1, Perinatal Society of Australia and New Zealand (PSANZ) 2023 Annual Congress "Laneways to Better Perinatal Outcomes", 5-8 March 2023, Melbourne Convention Centre, Melbourne, Victoria; March 2023.

Highlights of the oral presentations:

Parent perspectives

The opening session of the conference was delivered by Brooke Hanson, Australian Olympic swimmer, who advocates for support of families of preterm babies, as well as being a motivational speaker. Hanson had a complicated pregnancy and her son Jack was born at 28 weeks and five days, and weighed 663 grams. Sadly, after nine-months in the neonatal unit, Jack passed away. "I really didn't even know if I was going to survive, let alone him," Hanson said. Hanson now works as a motivational speaker delivering a program called Empower-Inspire-Transform.

Another session "Helping parents cope in the NICU" was presented by Annie Janvier. Both she and her husband, Keith Barrington, are neonatologists. In 2005, their daughter Violette was born at 24 weeks gestation. Janvier described having to face the situation "from the other side" as a parent. She described the dilemma of being a neonatologist and knowing about clinical care and the science of NICU, but the situation made her realise that she knew little about the experience of being a NICU parent. She came to realise that she did not appreciate the feelings experienced by parents such as guilt and uncertainty. She also realised that the approach of clinicians was generally based on what clinicians assumed was 'right' for everyone, without engaging with,

and asking parents what they needed. Janvier's experience changed the way she practices in NICU and led to her write a book aimed at both parents and clinicians, "Breathe, Baby Breathe".

Indigenous Health

Throughout the conference there were several sessions addressing healthcare issues for indigenous populations in both Australia and New Zealand. Sessions included maternity care models in Australia, research showing disparities in care and outcomes, and models of care showing improved outcomes. Alongside co-design of care models, insights into cultural safety priorities should guide recommendations for antenatal and neonatal care for Indigenous families. Also evolving within perinatal and neonatal research is the use of Intersectionality as a framework. Intersectionality refers to the interconnected nature of social groups such as gender, race, socio-economic and education levels. Viewing social constructs as overlapping and interconnected or interdependent aspects of care helps to expose systems of disadvantage and discrimination. An intersectional analysis considers how multiple experiences of disadvantage or discrimination must be navigated by some people, within systems often built on power structures such as patriarchy or racism.

In Australia, "Birthing on Country" is a movement aiming to address the negative impact of colonisation by delivering childbirth services for First Nations communities with control sitting with First Nation communities. The session highlighted the work of the Molly Wardaguga Research Centre. The term 'Birthing on Country' recognises that when women give birth in Australia, they are doing so on the sovereign lands of the First Peoples of Australia. Throughout the conference reference was made to the Indigenous Voice referendum seeking to alter the Australian Constitution to recognise the First Peoples of Australia by establishing an Aboriginal and Torres Strait Islander Voice within parliament, and acknowledging that the First Nation people have never ceded ownership of their land, seas and sky.

In New Zealand, preterm birth rates amongst indigenous peoples shows differential outcomes, with persistent advantage seen in non-indigenous populations. One presentation explored the work of a research team who focussed on tackling preterm systemic privilege in the maternity system in Aotearoa. The kaupapa Māori approach to the research situated Māori wāhine and pēpi as the norm or reference group, and demonstrated significant privilege for non-Māori within our maternity system. This research also highlighted that collection of ethnicity data is important for delivering equitable outcomes. However this remains challenging due to the different data collection systems within our healthcare system, as well as variability of the collection of ethnicity data by healthcare clinicians, and the lack of a national data system for perinatal medicine in Aotearoa.

Overall, the PSANZ conference was a stimulating and enjoyable experience that showcased the latest perinatal and neonatal research and practice from Australia and New Zealand. The conference also highlighted the challenges and opportunities for improving outcomes in the context of a changing healthcare system. [The next PSANZ conference will be held in Christchurch in 2024 PSANZ 2024 Congress | Perinatal Society New Zealand](#)

Juliet Manning, Charge Nurse Manager, NICU, Dunedin



Kia ora!

I want to start off by saying a huge THANK YOU to all of you who reacted to our 'Crisis Appeal' earlier in the year. During the six weeks that we ran the campaign we managed to secure \$72,000 which make a big dent in the hole created in January/February of 2023 where our regular donation income completely dried up.

Looking back over years of accounting and budgeting showed us that we could never have predicted what we experienced, which in some ways is comforting but also a reminder of how fragile things still are in the world. In addition to the generosity of our supporters we have seen a return to normal; which is heartening, but continue to need the regular support of those around us. So, if you haven't done so already I do ask you to promote our work and get friends and whanau to sign up to a regular giving donation at <https://littlemiraclestrust.org.nz/support-us/donate/>

I've recently returned to covering some of our frontline work in Auckland NICU and have loved being able to support whanau during their time in the NICU, it's always been my favourite part of the Trust and so heartwarming to see and hear about the significant difference we're making on a daily basis across the country. Sitting with parents beside their baby's incubators as a listening ear, being introduced to their beautiful baby is a massive honour and something I will never take for granted.

In May we marked Mother's Day, which for some neonatal Mums can be bittersweet, so I hope that our gift pack left by baby's cot shone a ray of happiness on their day and they felt reassured and cherished. Do let us know if you've had any feedback from whanau about these gifts.

I hope you enjoy this update and do ask you to get in touch if there is any way the Little Miracles Trust can work with you and your unit teams.

Arohanui,

Rachel
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The Little Miracles Trust
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Neonatal
Nurses
College
Aotearoa

The Neonatal Nurses College Aotearoa (NNCA) is a college of NZNO that is **free to join** if you are an NZNO member. NNCA is proud to represent neonatal nursing on national policy and raise public awareness of issues relating to the care of neonates. It offers neonatal specific national and international networking, educational, and funding opportunities to its members.

It is easy to join:

Just follow the QR code, or visit

www.nzno.org.nz/groups/colleges_sections/colleges/neonatal_nurses_college/join_us



SCAN ME



The 2023 NNCA symposium date and location has been decided
Friday 10th November 2023

Hosted by Tauranga SCBU at the
Papamoa Surf Club.

More details to follow!

TE MATAU A MĀUI, HAWKE'S BAY

SOARING TO CLEARER SKIES RECOVERY & RESILIENCE



CALLING FOR
ABSTRACTS

NOV 23-24, 2023
NAPIER



Call for Abstracts

We invite abstract submissions for presentation at the COASTN Symposium to be held at the Napier War Memorial Centre, 48 Marine Parade, Napier, on Thursday and Friday, 23rd and 24th November 2023.

Our programme will include presentations and we want to encourage discussion from a wide range of practitioners across New Zealand. Additionally, this symposium is an excellent forum for presenting your research. As COASTN organisers, we strongly support this opportunity for you to share your knowledge and ideas with a wider audience.

We are encouraging submissions from the following areas:

- ~ Cyclone Gabrielle - response ~
- ~ Resilience ~
- ~ CRM ~
- ~ Interesting cases - experiences learnt ~
- ~ I wish I knew before ~

We look forward to receiving your submissions and joining us as part of this exciting Symposium in 2023.

Submissions close on Monday 24 July 2023.

Please forward abstracts to Jackie Hardy - Jackie.Hardy@hbdhb.govt.nz
COASTN Symposium Committee Member

ANZNN CPI 2023



AUSTRALIAN AND NEW ZEALAND NEONATAL NETWORK
CLINICAL PRACTICE IMPROVEMENT CONFERENCE

SUNDAY 22 OCTOBER - TUESDAY 24 OCTOBER

Dear ANZNN colleagues,

The ANZNN CPI2023 Conference has been confirmed for 22nd to the 24th October this year at the Manly Pacific, Sydney, Australia. Registration for the conference will open soon! In the meantime we invite you to start submitting abstracts which will form part of the dynamic conference program!

ABSTRACT INVITATION

Abstracts are invited for any areas relevant to CPI. The intention is to report and share experiences on CPI activities within member units.

Abstracts for ANZNN CPI2023 will be accepted across the following categories:

Reporting on progress of ongoing CPI activities using the PDSA cycle or other CPI approach, documenting process, progress and outcomes

Quality Improvement (QI) to reduce clinical variation/standardising practice

QI retrospective audits

Other noteworthy QI projects and

CPI Lessons Learned (new for 2023). This category can focus on CPI success stories or failures and should outline the critical learnings achieved from the quality improvement process.

Nursing and allied health participation in authorship and presentation is strongly encouraged.

Abstracts are to be submitted to: anznn@unsw.edu.au with subject line: ANZNN CPI2023 CONFERENCE - ABSTRACT SUBMISSION.

Closing date for receipt of abstracts: 5pm AEST Monday 26th June 2023.

ABSTRACT FORMAT

- No more than one A4 page with 2.54 cm margins.
- Arial font, size 12, single spaced.
- Abstract title should be in CAPITALS at the top of the page.
- Author(s) name(s) with the initials followed by the surname and the name of the sponsoring unit should follow the title starting on a new line.
- Institution details of each author should follow, starting on a new line.
- Underline the name of the presenting author.
- Do not indent paragraphs.
- Paragraphs should be fully justified.
- Use standard abbreviations.
- Maximum one small table or figure is allowed within the space of the one page.

ANZNN CPI 2023



AUSTRALIAN AND NEW ZEALAND NEONATAL NETWORK
CLINICAL PRACTICE IMPROVEMENT CONFERENCE

SUNDAY 22 OCTOBER - TUESDAY 24 OCTOBER

ABSTRACT OUTCOMES

Abstracts will be reviewed by an ANZNN CPI panel who will nominate which abstracts are allocated to oral or poster sessions.

Abstract outcomes will be announced by late July 2023.

ORAL PRESENTATIONS

You will be notified by early August if your abstract has been accepted for oral presentation at one of the ANZNN CPI2023 Conference plenary sessions.

You should be available to present in person on Monday 23rd October 2023.

If accepted, you should prepare an oral presentation of 10 minutes duration.

There will be time allocated for questions and discussion at the end of the symposium session.

All presentations will be due by 9th October 2023.

All presentations should be in PowerPoint (16:9) and PC computers will be available at the conference.

POSTER PRESENTATIONS

You will be notified by early August if your abstract has been accepted for poster presentation at one of the ANZNN CPI2023 Conference poster sessions.

You should be available to take questions in person from delegates and the ANZNN CPI abstract review panel on Monday 23rd and Tuesday 24th October 2023 during the poster sessions.

Poster presentations will be displayed on provided poster boards on the days of the conference.

A0 size in portrait recommended.

Poster boards are 1m wide and 2m high. Velcro dots will be available to attach your poster to the poster board.

If you have any questions regarding abstract submissions please refer to the anznn website or reach out to Evelyn at anznn@unsw.edu.au.

Best regards,

Malcolm Battin, Chair – ANZNN Clinical Practice Improvement Committee



PSANZ 2024 Congress

Whiria te Tāngata

“Weave our people together”

www.psanz2024.com

7 - 10 April 2024

Te Pae Convention Centre
Ōtautahi, Christchurch, New Zealand

PERINATAL
SOCIETY
of Australia &
New Zealand
PSANZ



TENA KOUTOU (GREETINGS),

It's our privilege to invite you to Ōtautahi, Christchurch for PSANZ 2024. The Congress will be held at Te Pae Convention Centre in the heart of the city. Pre-Congress meetings will commence on the 5th of April and the main event will be held from the 7th to the 10th.

Our theme “Whiria te Tāngata – Weave our people together” represents the collaborative and multidisciplinary nature of our society, woven together by our collective goal to improve the hauora (wellbeing) of wāhine (mother) and pēpi (baby).

Our logo is a woven whariki (mat) made up of strands representing the whānau and supporters (including the society professionals) that are protecting our wāhine and pēpi. You can read more about the significance of the logo on the [Congress website](#).

The congress programme will celebrate this theme by bringing together a diverse group of speakers and through addressing a wide range of topics. We are engaging with the various special interest groups and the programme is shaping up well. We are looking forward to welcoming you to our vibrant and rejuvenated city. Why not extend your stay to soak in the majestic sights and culture of Te Waipounamu/The South Island?



On behalf of the local organising committee,

Nicola Austin

Chair, PSANZ 2024 Christchurch, Aotearoa / New Zealand.

He aha te mea nui o te ao? He tāngata he tāngata he tāngata!

What is the most important thing in the world? It is people, it is people, it is people!

PSNZ supported PSANZ Geoffrey Thorburn Visiting Lecture, Auckland 13th Oct 2023

Save the date: Friday 13th October 2023

Distinguished Professor Dame Jane Harding DNZM

The PSNZ supported PSANZ Geoffrey Thorburn Visiting Lecture for 2023 is happening in Auckland on the 13th October. Distinguished Professor Dame Jane Harding will headline a day of invited speakers that promises to be a memorable, interesting and fun event not to be missed.

Save Friday 13th of October 2023 in your diaries, with further details to follow.



ON TRACK NETWORK
BETTER HEALTH FOR MOTHERS AND BABIES
Te Awhi Rito

The ON TRACK Network aims to engage with anyone interested in clinical trials research for better health of mothers and babies across New Zealand.

Our clinician-led Network is inclusive of all professional groups in New Zealand concerned with maternal, foetal, neonatal and paediatric health. We cover the geography of Aotearoa New Zealand with regional representatives across the district health boards.

We have an established consumer forum to optimise the impact of what we do, and our activities are overseen by a National Executive Committee.

Find out more at On Track Network (perinatsociety.org.nz)