CCYN member survey 2017 – draft report

Summary:

Late in 2016, the CCYN executive decided to survey CCYN members about a range of topics to help guide strategic planning. The PNA prepared a draft of possible questions. This was achieved through consultation with the NZNO researcher, Leonie Walker, and review of questionnaires used in membership surveys of other NZNO Colleges and Sections. The draft was shared with CCYN Chairperson in November 2016. Reference to the survey was made in the 2017-2020 CCYN Strategic Plan prepared for the NZNO Business Manager in December 2016 and completion of the survey was scheduled for early 2017.

At the face-to-face committee meeting in Wellington on 10 February 2017, the questions were presented to the full CCYN committee. The committee undertook to pilot test the draft tool for comprehension, relevance and time taken to complete it. Five of the eight members responded with completion times between 4-8 minutes, which was deemed an acceptable length of time to ask respondents to commit to the process. Feedback on the draft questions was generally positive and mostly centred on the placement of question 22 (presentation of an outline of CCYN objectives, followed by a request for respondents to indicate from a list of options how they might be able to support the executive committee to achieve CCYN's objectives. Some felt that this question should be placed closer to the beginning of the tool, and others felt that the list of CCYN objectives could be deleted and the request for support stand on its own. One respondent familiar with creating survey instruments believed that it was important to include the CCYN objectives, as a means of informing respondents who may be unfamiliar with them. The same respondent also expressed reservations that making a request for help too early in the questionnaire might not yield the desired results, and might result in the abandonment of the survey by some. As a result, the placement and form of the question remained unchanged, and the reasons for this were explained to the whole committee.

Administration support was sought for finalising the survey instrument and presenting it for sending to members. The 25-question survey was accessible through an electronic link to the Survey Monkey system. A message from the chair and committee and the PNA was drafted to introduce the survey to prospective respondents in an email. This message explained the purpose of the survey, how the data would be used, how the findings of the survey would be available for respondents to view, and how CCYN undertook to uphold the confidentiality of respondents information – that responses would be anonymous unless respondents chose to identify themselves in order to be contacted by the committee as part of following up.

The survey was sent by email on Tuesday 28 February 2017 to all NZNO members listed on the CCYN membership list, including the ~ 206 "full" (annual levy-paying) members and other ~ 472 members who have not actively renewed their membership since the implementation of the levy and invoicing of that full list of members in February 2016. It was felt important to gain the views of more than the current CCYN membership, in order to learn why some had not renewed their membership, and to

have the largest possible sample of child and youth health nurses. The email about the survey also asked recipients to forward the invitation to any other colleagues/friends/networks who were involved in providing care for babies, children and/or youth and/or their parents, so it is not possible to know how far or wide the invitation was circulated. The reason for this was to receive responses from other child and youth health nurses who are not members of CCYN.

After the survey had been open for ten days, it was known that 111 respondents had completed it. A decision was made to have the administrator send a reminder email message to the same group of 678 CCYN members, from the CCYN chairperson, encouraging them to complete it if they hadn't already done so. This message was sent on 14 March 2017. Unfortunately, the incorrect link was attached to that email message, which was discovered on 15 March. No recipients of the message contacted the PNA in response to the error, so it is unlikely that the message reached more prospective participants who found they were unable to open it. No action was taken to remedy this error so that recipients had the correct link, and the survey closed on Friday 17 March as planned, with the completion of the survey by a further 8 respondents.

The data was accessed and analysed for presentation in a draft report for review by the CCYN committee. The draft report was completed on 31 March 2017 and circulated to the committee by email, prior to the planned conference call on 12 April 2017.

This draft report provides a really rich source of data for CCYN's executive committee to consider, in setting the strategic direction of the College from 2017 onwards. Further analysis and comment on the draft report by CCYN committee members is welcome.

Marg Bigsby
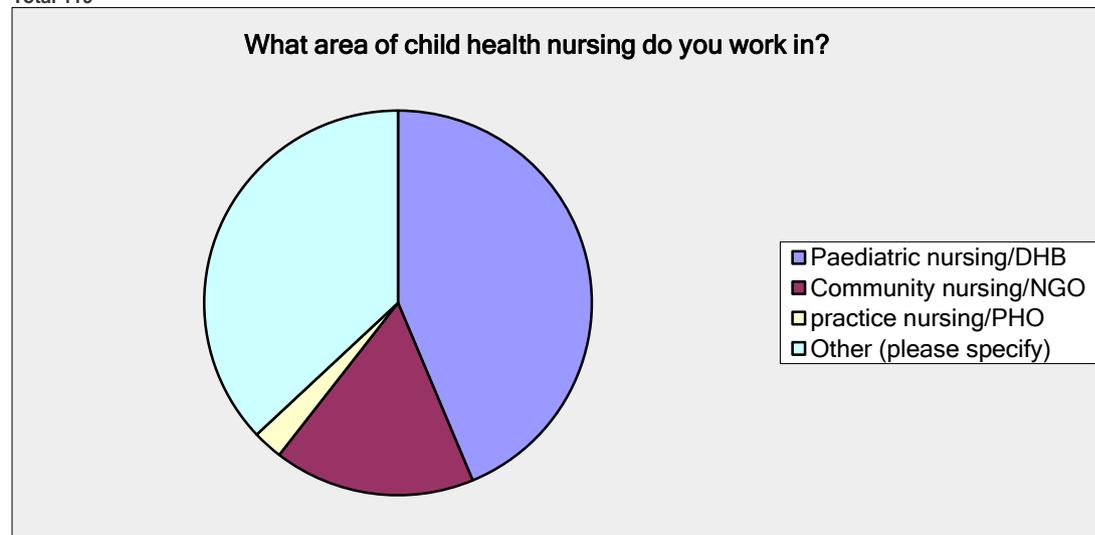Professional Nursing Advisor
New Zealand Nurses Organisation

31 March 2017

The 2017 CCYN Membership survey Draft Report:

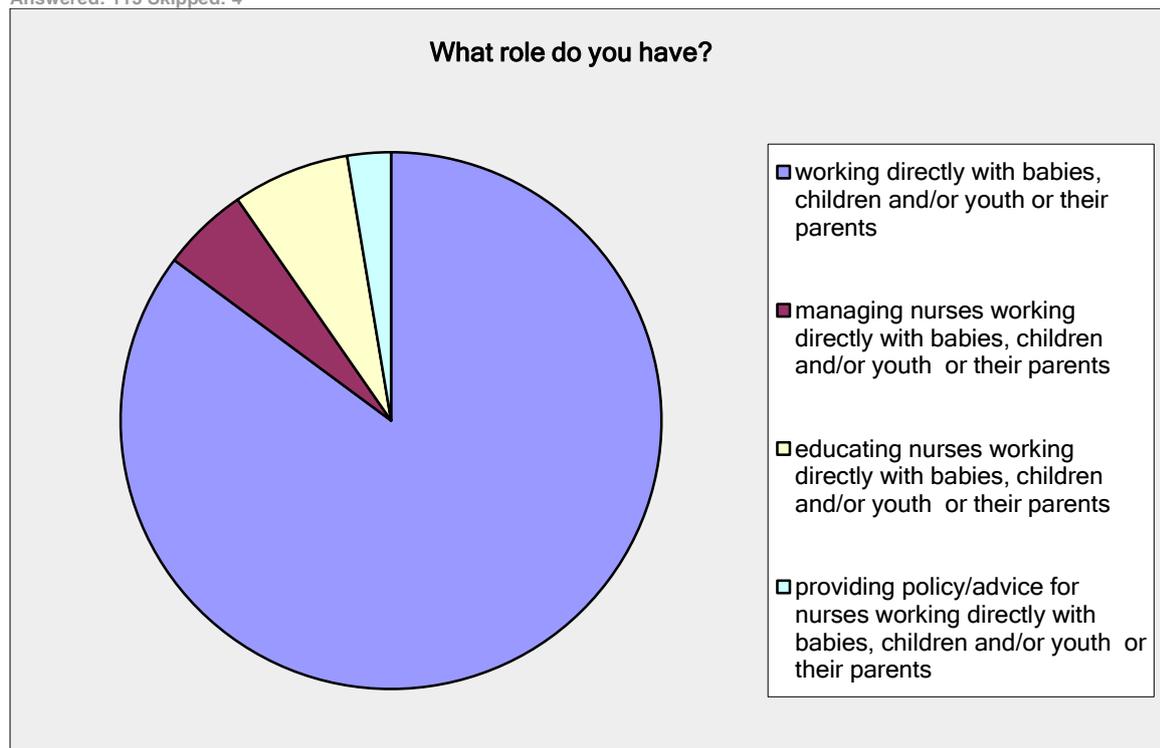**Q1** What area of child health nursing do you work in?
Answered: 119 Skipped: 0
Total 119

What area of child health nursing do you work in?

Legend:
- Paediatric nursing/DHB
- Community nursing/NGO
- practice nursing/PHO
- Other (please specify)

Answer Options	Response Percent	Response Count
Paediatric nursing/DHB	43.7%	52
Community nursing/NGO	16.8%	20
practice nursing/PHO	2.5%	3
Other (please specify)	37.0%	44

No.	Responses including Other responses	Responses	% of all respondents
1.	Paediatric Nursing/DHB	52	43.7%
2.	Community Nursing/NGO	23	19.3%
3.	Practice Nursing/PHO	3	2.5%
4.	Public Health nursing	14	11.8%
5.	School nursing	12	10.1%
6.	Youth health nursing	3	2.5%
7.	Emergency nursing	3	2.5%
8.	Neonatal nursing	2	1.7%
9.	Education	2	1.7%
10.	Nurse Practitioner – child and youth health	2	1.7%
11.	Nurse Practitioner – rural	1	0.8%
12.	Child and Adolescent mental health	1	0.8%
13.	Management role	1	0.8%
		119 respondents	

The largest group of survey respondents work in the area of Paediatric Nursing/DHB (43.7%), with the next biggest groups being Community Nursing/NGO (19.3%), then Public Health Nursing (11.8%) then School Nursing (10.1%). The next largest groups (tied at 2.5%) were Practice Nursing, Youth Health Nursing and Emergency Nursing.

Q2 What role do you have?
Answered: 115 Skipped: 4

What role do you have?

Legend:
- working directly with babies, children and/or youth or their parents
- managing nurses working directly with babies, children and/or youth or their parents
- educating nurses working directly with babies, children and/or youth or their parents
- providing policy/advice for nurses working directly with babies, children and/or youth or their parents

What role do you have?

Answer Options	Response Percent	Response Count
working directly with babies, children and/or youth or their parents	85.2%	98
managing nurses working directly with babies, children and/or youth or their parents	5.2%	6
educating nurses working directly with babies, children and/or youth or their parents	7.0%	8
providing policy/advice for nurses working directly with babies, children and/or youth or their parents	2.6%	3
Other (please specify)		9
answered question		115
skipped question		4

No.	Other Responses (in addition to above)	Responses	% of all respondents
1.	All of the above	4	3.5%
2.	More than one role	3	2.6%
3.	School-setting work	1	0.9%
4.	Project co-ordination work	1	0.9%
		9 respondents	**115** respondents

Most respondents (85.2%) are nurses that work directly with babies, children and/or youth or their parents, with the next largest group (7%) being the nurses involved in educating those nurses. The next largest group (5.2%) were the managers of those nurses. A few nurses (3.5%) identified that their roles encompassed all of the descriptions offered.

Q 3. **How do you keep up to date with CHN knowledge and skills?**

No.	Methods	Responses	% of respondents
1.	Postgraduate study	19	16.4%
2.	Attending workshops, short courses, seminars	16	13.8%
3.	Attending conferences	19	16.4%
4.	Completing online education courses	11	9.5%
5.	Reading (unspecified)	12	10.3%
6.	Reading newsletters	10	8.6%
7.	Reading professional journals, critiquing articles	31	26.7%
8.	Accessing websites, online reading	14	12%
9.	Accessing Lippincott	1	0.9%
10.	Participating in research	8	6.9%
11.	Journal club	2	1.7%
12.	Liaison & Discussion/networking/colleagues	15	12.9%
13.	In-service education, PD days	70	60.3%
14.	Grand Rounds	3	2.6%
15.	Reflective practice	1	0.9%
16.	Supervision – Peer/Clinical/Professional	2	1.7%
17.	Nurse Educator support, in-ward teaching	3	2.6%
18.	Participation in working groups – @ range of levels	3	2.6%
19.	Professional affiliations – SIG, prof associations	18	15.5%
20.	Agency protocols/MoH guidelines/core competencies	16	13.8%
21.	Teaching others	3	2.6%
22.	Engaging in clinical practice, simulation scenarios	6	5.2%
23.	Self-directed learning	3	2.6%
	TOTAL	**286** responses **116** respondents	**116** respondents

The 116 respondents to this question gave a total of 286 responses. The most frequently marked response was Participation in In-service education/PD days (60.3%), followed by reading professional journals/critiquing articles (26.7%), then Post-graduate study was tied with attending conferences (both were 16.4%). Next was respondents' professional affiliations (SIG/Professional associations) (15.5%) and then tied at 13.8% were attending workshops/short courses/seminars and becoming familiar with Agency protocols/MoH guidelines/core competencies.

Child and youth health nurses appear to use a number of methods to remain up-to-date with child health nursing knowledge and skills. Some of these are provided by the workplace (e.g. In-service education); some postgraduate study may be funded of may be at the student's own cost (the distribution of this was not established in this survey) while other methods are forms of self-directed learning.

Q4 Are you a full member of CCYN? (these members have paid the $20 journal levy for the current financial year) CCYN implemented a levy to cover the cost of the Neonatal, Paediatric and Child Health Nursing journal in 2014.
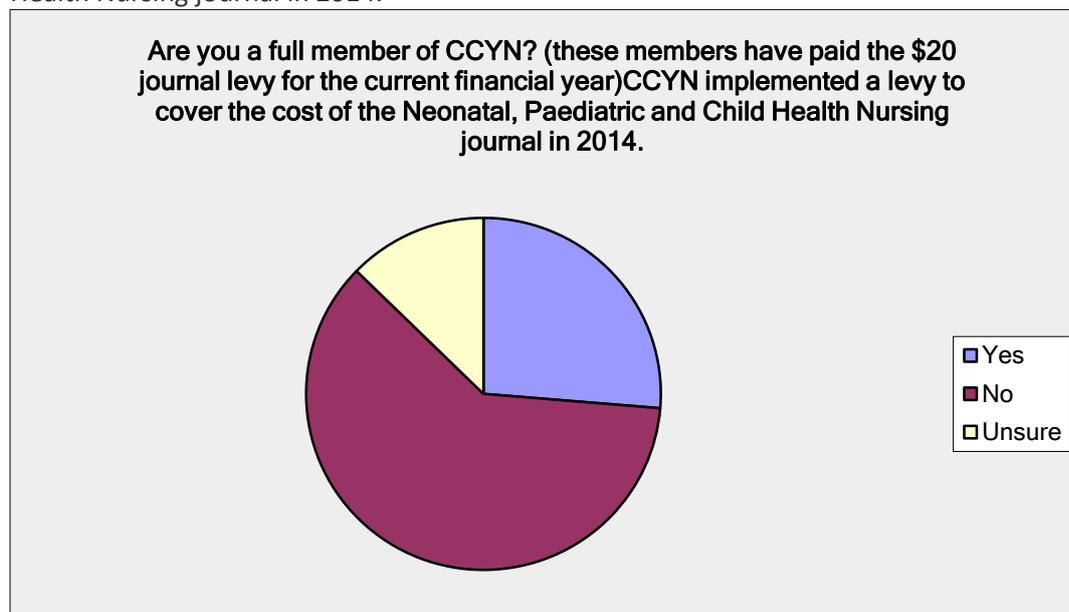
Are you a full member of CCYN? (these members have paid the $20 journal levy for the current financial year)CCYN implemented a levy to cover the cost of the Neonatal, Paediatric and Child Health Nursing journal in 2014.

Answer Options	Response Percent	Response Count
Yes	26.3%	31
No	61.0%	72
Unsure	12.7%	15
answered question		**118**
skipped question		**1**

Just 26.3% of survey respondents are current members of CCYN.

Q 5.   If you are not currently a full member of CCYN, please tell us why not

No.	Responses	Responses	% of respondents
1.	Planning to renew/join	1	1.4%
2.	Forgot to renew	4	5.5%
3.	Not paid levy	4	5.5%
4.	Changed clinical area	1	1.4%
5.	Member of other NZNO college, section	6	8.2%
6.	Not a NZNO member	5	6.8%
7.	Meet professional needs through membership of other groups	3	4.1%
8.	Don't see CCYN membership as essential to role	2	2.7%
9.	Don't read the journal	2	2.7%
10.	Not interested	1	1.4%
11.	Unaware of CCYN before this	33	45.2%
12.	Levy cost is a barrier	9	12.3%
13.	Unsure if currently a member or not	2	2.7%
14.	Not applicable (i.e. am a member already) *	3 *	-
	(*responses not included in total % calculations)	76 responses	73 responses

The main reason for survey respondents not being a member of CCYN (45.2%) is that they were unaware of CCYN before completing the survey. The next most common reason given was that the levy cost is a barrier to CCYN membership (12.3%). Other reasons included that respondents are members of other colleges or sections (8.2%) or are not a member of NZNO (6.8%) therefore are ineligible for CCYN membership. The next most frequently marked responses (tied at 5.5% each) were that they were prior CCYN members who had forgotten to renew or had not paid their levy.
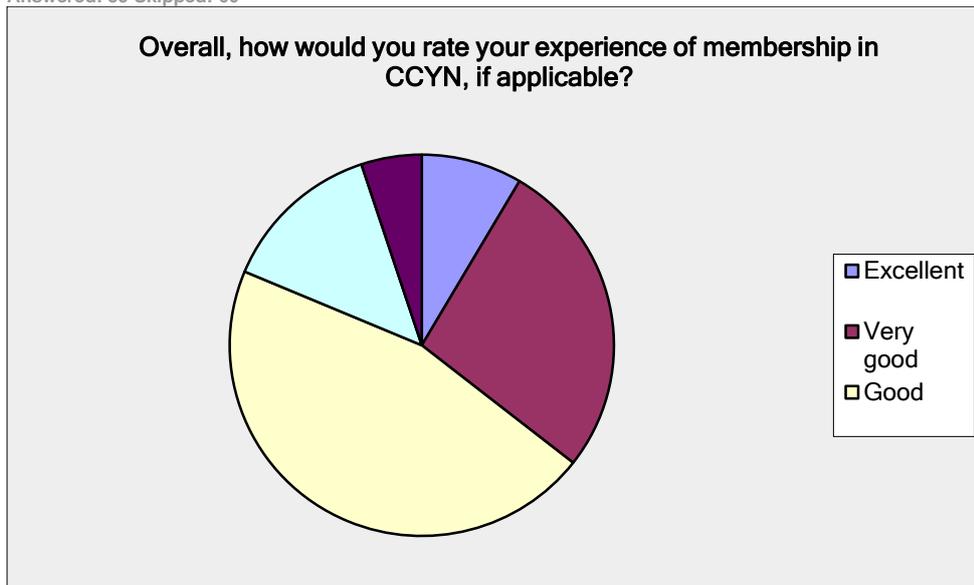
Q 6.   What does CCYN do really well?

No.	Responses	Responses	% of respondents
5.	Share information/communicate/connect	22	32.4%
6.	- Specific reference to SNIPs	10	14.7%
7.	- Specific reference to Face Book	2	2.9%
8.	Consultation about submission/issues/practice	4	5.9%
9.	Advocate for improved outcomes for children and youth	11	16.2%
10.	Support child and youth nurses	2	2.9%
11.	Development of Knowledge and Skills Framework	1	1.5%
12.	Not sure	31	45.6%
13.	Not applicable *	8 *	-
14.	NOT promote self well! (due to unawareness)	1	1.5%
15.	(have been a bit quiet lately)	1	1.5%
	(*responses not included in total % calculations)	**93** responses **76** respondents	68 respondents

The largest grouping of responses totalled 50% and was for Sharing information/communication/ Connection (32.4%), including SNIPs (Nursing Information Provision Service by Linda Stopforth, focusing on child and Youth health information) (14.7%) and Face Book (2.9%). The next largest group was Not Sure (45.6%), followed by Advocacy for improved outcomes for children and youth (16.2%), followed by Consultation about submission/issues/practice (5.9%).

It is heartening that, with only 31 current CCYN members responding to the survey, and 33 respondents unaware of CCYN before completing the survey, there were a total of 51 positive responses about what CCYN does really well.

Q7 Overall, how would you rate your experience of membership in CCYN, if applicable?

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Answer Options	Response Percent	Response Count
Excellent	8.5%	5
Very good	27.1%	16
Good	45.8%	27
Fair	13.6%	8
Poor	5.1%	3
answered question		59
skipped question		60

A total of 59 respondents answered this question, and of those, 81.4% marked that they had a good, very good or excellent experience of membership in CCYN. Other respondents marked that their experience was fair (13.6%) or poor (5.1%).

Q 8.   What changes would CCYN have to make for you to give it an even higher rating?

Answered: 78 Skipped: 41

No.	Responses	Responses	% of respondents
1.	None	4	10.3%
2.	Improve the visibility/promotion of CCYN	8	20.5%
3.	As above, using social media, email, newsfeeds	1	2.6%
4.	As above, detailing member benefits	1	2.6%
5.	As above, via improved website access	1	2.6%
6.	Organising improved conferences or workshops	4	10.3%
7.	As above, including making them affordable	1	2.6%
8.	As above, including holding workshops by VC	1	2.6%
9.	Providing financial support for PD, post-grad study	1	2.6%
10.	Sharing information about other professional development opportunities	1	2.6%
11.	Improved AGM access (no access to Telepaeds)	1	2.6%
12.	Offering more activity in regions	4	10.3%
13.	Improving the newsletter format	1	2.6%
14.	Sharing more information on current issues	6	15.4%
15.	As above, on topic of child and adolescent mental health	1	2.6%
16.	Sharing more information on nurses working with children, including nationally	2	5.1%
17.	Offer journal via hard copy	2	5.1%
18.	Offer journal via online	1	2.6%
19.	Be more independent of NZNO	1	2.6%
20.	Negotiate more support for CCYN from NZNO	1	2.6%
21.	Not sure	6	15.4%
22.	Not applicable *	10 *	-
23.	Acknowledgement made of voluntary efforts of CCYN executive committee	2	5.1%
	(*responses not included in total % calculations)	**61** responses **49** respondents	**39** respondents

The most frequently made response was to improve the visibility/promotion of CCYN (20.5%), with a call for CCYN to share more information on current issues tied with Not Sure, each on 15.4%. The next groupings each at 10.3% were None (that no changes are required), and for CCYN to Offer more activity in regions, as well as to Organise improved conferences or workshops.

**Q9** How likely is it that you would recommend CCYN membership to a friend or colleague?

Answered: 78 Skipped: 41

How likely is it that you would recommend CCYN membership to a friend or colleague?

Answer Options	Not at all likely - 0	1	2	3	4	5	6	7	8	9	Extremely likely - 10	Rating Average	Response Count
	2	2	4	6	3	14	9	10	13	4	11	-32.05	78
											answered question		78
											skipped question		41

Scores 0-6 **'Detractors'**	Scores 7-8 **'Passives'**	Scores 9-10 **'Promoters'**	Net promoter score
40	23	15	-32
51%	29%	19%	

The calculation of responses into categories of "Detractors" (51%), "Passives" (29%) and "Promoters" (19%) were made by the Survey Monkey software from the raw data. Details of the software would need to be understood to give context to these findings, however it appears that the "Net promoter score" for respondents is low.

Q10 How would you prefer to receive information from CCYN?
Answered: 101 Skipped: 18
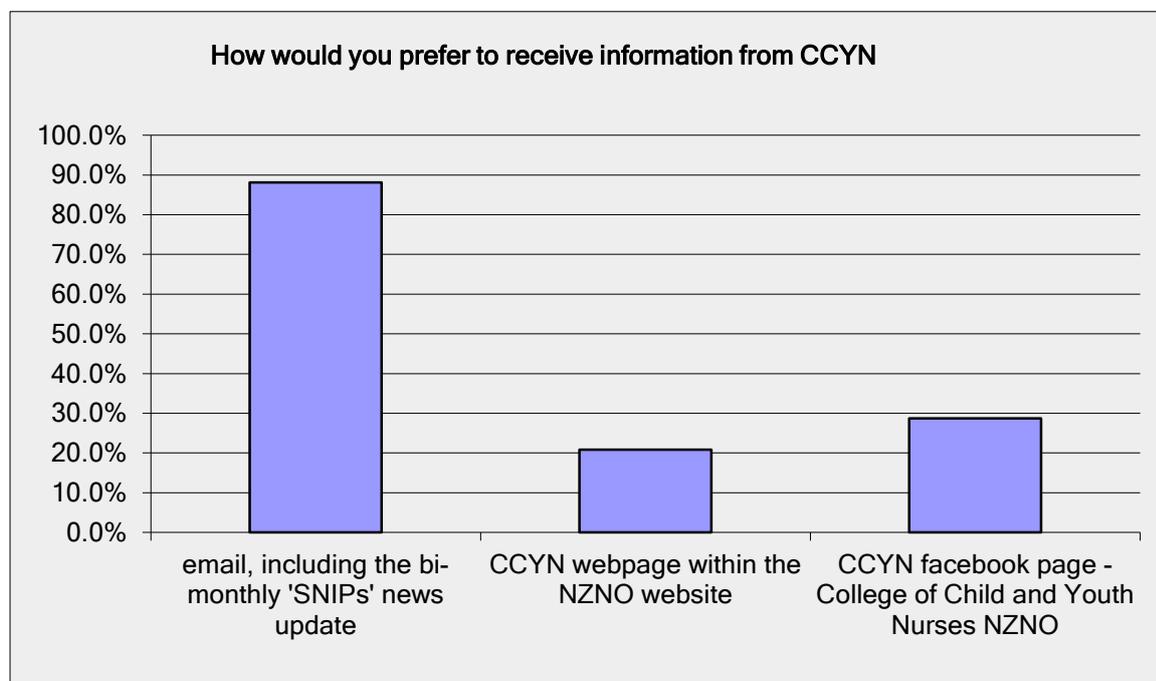
How would you prefer to receive information from CCYN

Answer Options	Response Percent	Response Count
email, including the bi-monthly 'SNIPs' news update	88.1%	89
CCYN webpage within the NZNO website	20.8%	21
CCYN face book page - College of Child and Youth Nurses NZNO	28.7%	29
Other (please specify)		7
	answered question	101
	skipped question	18

No.	Other responses	Responses	% of all respondents
1.	Journal	1	1%
2.	Journal – hard copy	1	1%
3.	All methods are ok	1	1%
4.	Email	2	2%
5.	Not applicable	1	1%
6.	Not engaged with SNIPs	1	1%
		7 respondents	**101** respondents

The majority of respondents said they preferred to receive information from CCYN by email (88.1%), with the Face Book page being next most popular (28.7%) and the CCYN web page within the NZNO website being third-most popular (20.8%).

Do you access the CCYN web page on the NZNO website?
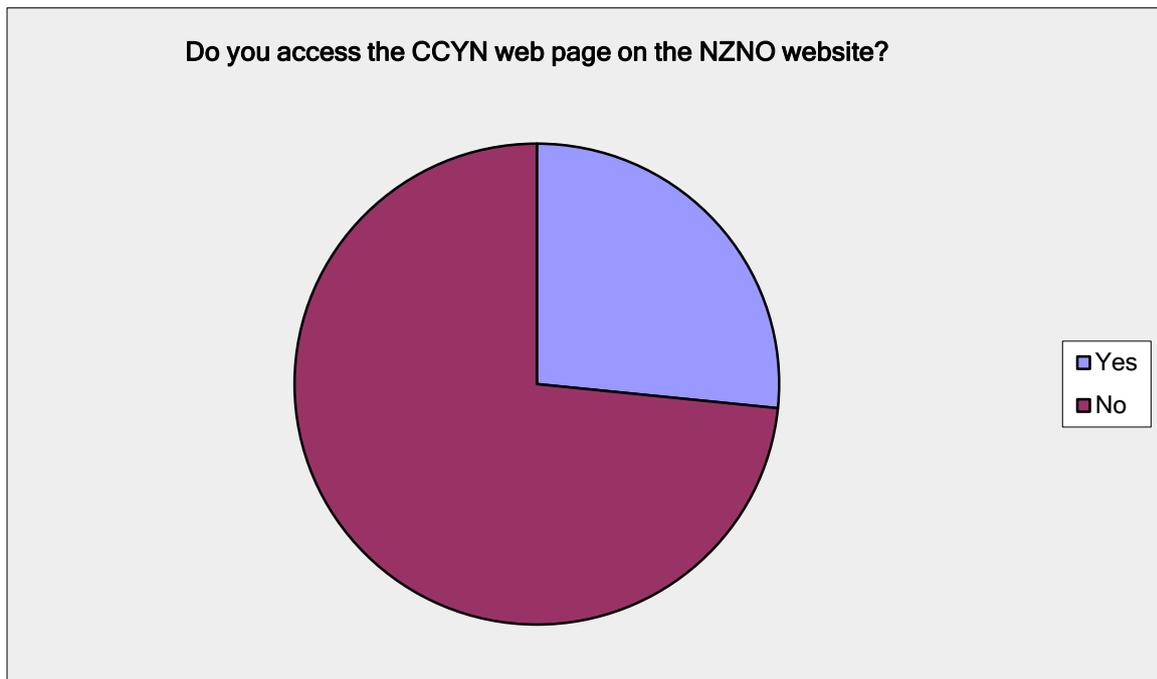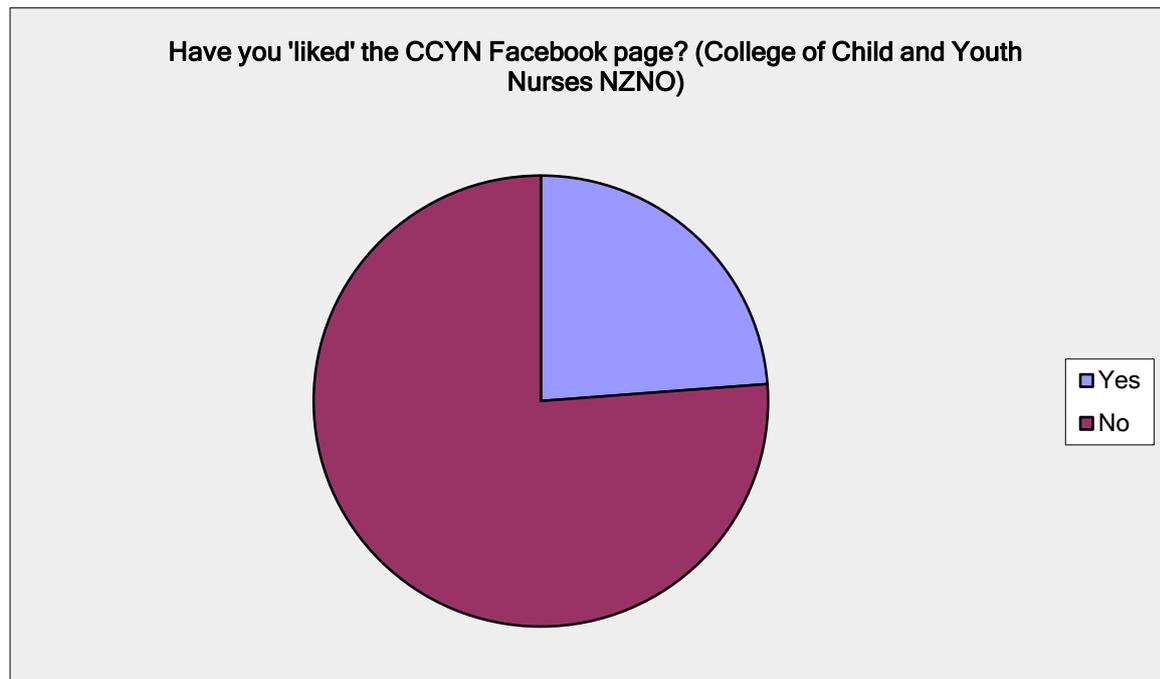

Do you access the CCYN web page on the NZNO website?

Answer Options	Response Percent	Response Count
Yes	26.6%	29
No	73.4%	80
Other (please specify)		11
answered question		109
skipped question		10

No.	Other responses	Responses	% of all respondents
1.	Variations of 'yes'	3	2.8%
2.	Variations of 'no'	2	1.8%
3.	Only on prompting	4	3.7%
4.	Unsure	2	1.8%
		11 respondents	**109** respondents

It is most likely that the 29 (26.6%) of respondents who access the CCYN web page on the NZNO website are from the group of 31 current CCYN members within the respondent group.

Have you 'liked' the CCYN Facebook page? (College of Child and Youth Nurses NZNO)

| Have you 'liked' the CCYN Facebook page? (College of Child and Youth Nurses NZNO)		
Answer Options	Response Percent	Response Count
Yes	23.8%	25
No	76.2%	80
Other (please specify)		20
answered question		105
skipped question		14

No.	Other responses	Responses	% of all respondents
1.	Not aware of the page until now	10	9.5%
2.	Not a Face Book user	8	7.6%
3.	No access to Face Book at work	2	1.9%
		20 respondents	**105** respondents

Again, it could be assumed that a large proportion of the 25 (23.8%) of respondents who access the CCYN web page on the NZNO website are from the group of 31 current CCYN members within the respondent group.

Q13 Have you received the SNIPs bimonthly e-newsletter? (a Child-health focused Nursing Information Provision Service, started in October 2016. It contains brief details about sector news, links to online resources, etc)

Answered: 115 Skipped: 4
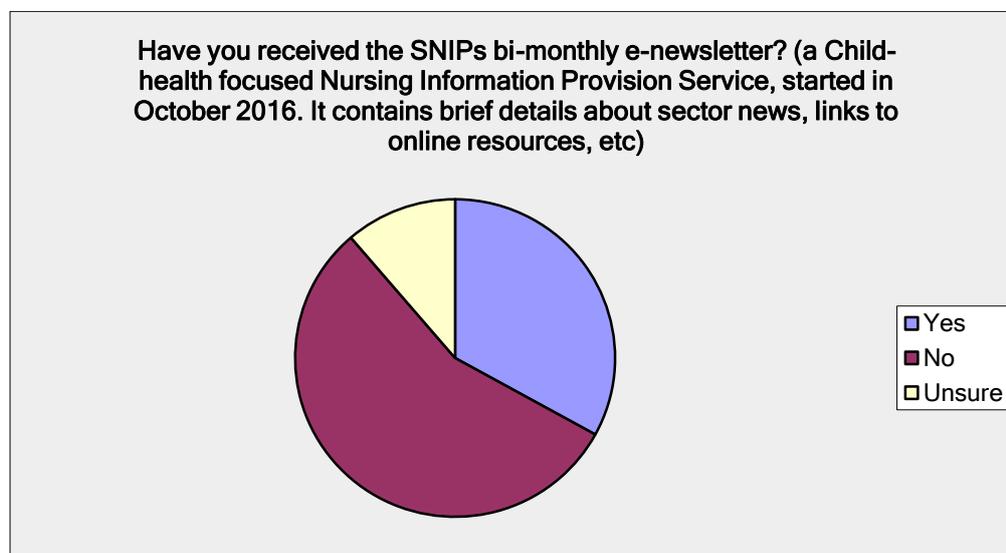
Have you received the SNIPs bi-monthly e-newsletter? (a Child-health focused Nursing Information Provision Service, started in October 2016. It contains brief details about sector news, links to online resources, etc)

| Answer Options	Response Percent	Response Count
Yes	33.0%	38
No	55.7%	64
Unsure	11.3%	13
	answered question	115
	skipped question	4

Q 14.   If you have received the SNIPs bi-monthly e-newsletter, please tell us what you think about it

No.	Responses	Responses	% of respondents
1.	Useful – great, relevant, really like it, amazing, really good, excellent, fantastic, interesting	12	40%
2.	Informative – current, topical, great links, up-to-date articles	8	26.7%
3.	Good range of topics	1	3.3%
4.	Good options for choosing what topics to read	2	6.7%
5.	OK/sometimes relevant	2	6.7%
6.	Very 'general nursing' focused	1	3.3%
7.	Not informative/inviting – all 'jumbled', 'don't need to out everything you find in it'	3	10.0%
8.	Contains nothing about what's current or how we as CCYN members can help	2	6.7%
9.	I would prefer a hard copy	1	3.3%
10.	I have not read it	1	3.3%
11.	Not applicable *	3 *	-
	(*responses not included in total % calculations)	**36** responses **33** respondents	**30** respondents

The most frequently made responses referred to perceptions of SNIPs' usefulness (40%) and the next biggest grouping was about how respondents found it informative (26.7%). The third biggest grouping of responses showed a different view – that 10% of respondents found SNIPs to be all 'jumbled' and overfull of information. The next biggest groupings were formed by respondents who found SNIPs to give "good options for choosing what topics to read" and being "OK/sometimes relevant" (both at 6.7%). This indicates a generally positive view of SNIPs however some respondents hold some reservations about it, which needs further examination.

Q15 CCYN has recently hosted two online seminars to support nurses seeking to develop their journal writing skills, which were attended by a small number of members. CCYN recently cancelled the conference planned for 15 November 2016 in Tauranga, due to low registrations. What forms of professional development would you like CCYN to offer members?
Answered: 102 Skipped: 17
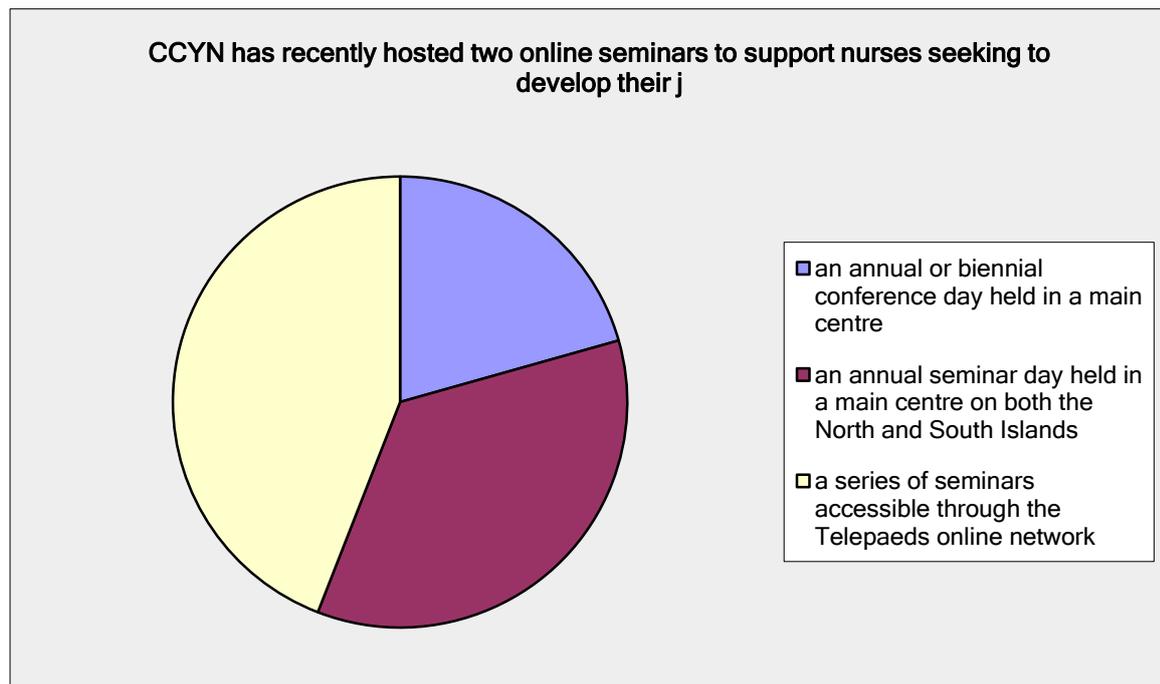
CCYN has recently hosted two online seminars to support nurses seeking to develop their journal writing skills, which were attended by a small number of members. CCYN recently cancelled the conference planned for 15 November 2016 in Tauranga, due to low registrations. What forms of professional development would you like CCYN to offer members?

Answer Options	Response Percent	Response Count
an annual or biennial conference day held in a main centre	20.6%	21
an annual seminar day held in a main centre on both the North and South Islands	35.3%	36
a series of seminars accessible through the Telepaeds online network	44.1%	45
Other (please specify)		23
	answered question	102
	skipped question	17

Other comments in addition to the 102 responses outlined on the chart, about what forms of professional development would you like CCYN to offer members, are listed here:

No.	Responses	Responses	% of all respondents
1.	Find it hard to get funding to attend PD sessions	3	4%
2.	Find it hard to get leave to attend PD sessions	4	4%
3.	Smaller, more affordable presentations	1	1%
4.	Webinars, Telepaeds sessions	2	2%
5.	(Telepaeds is not accessible by all)	2	2%
6.	Online learning	4	4%
7.	podcasts	1	1%
8.	A combination of options	1	1%
9.	(was unaware of 2016 conference)	1	1%
10.	(was uncertain about appeal of 2016 conference topics)	1	1%
11.	Unsure	1	1%
12.	Not applicable *	2 *	-
	(*responses not included in total % calculations)	**125** responses **23** respondents	100 responses

The largest response was for the option of accessing a series of seminars through the Telepaeds network (44.1%), followed by an annual seminar day held in a main centre on both the North and South Islands (35.3%), and then an annual or biennial conference day held in a main centre (20.6%). Some of the 'other' comments gave conflicting views – 2 respondents called for webinars or Telepaeds sessions whilst 2 more noted that Telepaeds is not accessible by all.

Q 16.   Please suggest your preferred day of the week for professional development
Answered: 88 Skipped: 31

	Mon	Tues	Wed	Thurs	Fri	Sat
No.	**16**	**14**	**26**	**19**	**20**	**4**
%	**18.2%**	**15.9%**	**29.5%**	**21.6%**	**22.7%**	**4.6%**

Some respondents listed more than preferred day and marked more than one option.

No.	Additional responses included	Responses	% of respondents
1.	No preference	22	25.0%
2.	unsure	3	3.4%
3.	Not likely to attend	1	1.1%
4.	Need lots of notice of have to apply for A/L	1	1.1%
		126 responses **88** respondents	**88** respondents

The most preferred day for professional development is Wednesday (29.5%), then Friday (22.7%), then Thursday (21.6%), followed by Monday (18.2%) and Tuesday (15.9%). A quarter of respondents noted that they had no preference. Four respondents suggested a Saturday worked best for them. It is possible that the higher the FTE a nurse works, the more options they have for attending professional development in work time. Conversely, if a nurse works part-time and has limited flexibility to schedule Professional Development activities on their work days, then they may prefer to attend sessions held out of work time. This makes it hard to schedule sessions to meet needs of all interested nurses.

Q 17.   Please suggest your preferred time of day for professional development
Answered: 83 Skipped: 36

No.	Responses	Responses	% of respondents
1.	8am	3 *	3.6%
2.	9am	1 * ∑	1.2%
3.	10am	1 * ∑	1.2%
4.	11am	0 * ∑	0
5.	"morning" *	10 * + 5 = 15	18.1%
6.	12md	3 # ∑	3.6%
7.	1pm	3 @ ∑	3.6%
8.	2pm	2 @ ∑	2.4%
9.	"handover time"	2 @	2.4%
10.	"early afternoon" @	3 @ + 7 = 10 ~	12.0%
11.	3pm	0 ^	0
12.	"late afternoon" ^	2 ^ + 4 = 6 ~	7.2%
13.	4pm	3 ^	3.6%
14.	5pm	1 ^	1.2%
15.	"afternoon" ~	8 ~ + 16 = 24	28.9%
16.	"evening"	10	12.0%
17.	"school hours" ∑	14 ∑ + 10 = 24	28.9%
18.	"lunch time" #	12 # + 3 = 15	18.1%
19.	"not over the middle of the day"	2	2.4%
20.	"weekend"	1	1.2%
21.	"all day"	2	2.4%
22.	"any time"	13	15.7%
23.	unsure	1	1.2%
	NB: Some responses have been counted in more than one grouping, depending on term used e.g. times comprising early afternoon, other times comprising late afternoon, etc. See symbols	**83** responses **83** respondents	**83** respondents

Responses were recorded as described, however they have also been collated into relevant groupings that were less specific, therefore the total percentages of responses is more than 100%. Overall, the "Afternoon" and "School hours" were tied for the most popular time for professional development (28.9%). "Lunchtime" and "Morning" were tied for next place at 18.1% each. ("Anytime" was suitable for 15.7% of respondents, whose preferences have not been included in with other groupings.) The next groupings that had the highest scores were "early afternoon" and "evening", both at 12%.

It is possible that the same factors at play mentioned above with choosing a preferred day of the week also influence a nurse's preference for time of day - the higher the FTE a nurse works, the more options they have for attending professional development in work time. Conversely, if a nurse works part-time and has limited flexibility to schedule Professional Development activities on their work days, then they may prefer to attend sessions held out of work time. This makes it hard to schedule sessions to meet needs of all interested nurses.

Q 18.   What child or youth health topics are of greatest interest to you?
Answered: 89 Skipped: 30

No.	Responses	Responses	% of respondents
1.	Children's voice in health care	1	1.1%
2.	Ethics	1	1.1%
3.	UNCROC implementation, government policies	3	3.4%
4.	Māori and Pacific People's health	1	1.1%
5.	Determinants of health	1	1.1%
6.	And specifically impacts of child poverty	4	4.5%
7.	Equity of health outcome	3	3.4%
8.	Primary health, health promotion, prevention	3	3.4%
9.	- Including nutrition, weight management in young obese	15	16.9%
10.	Public health issues	5	5.6%
11.	Health literacy	4	4.5%
12.	- Including teaching self-management to children and youth	2	2.2%
13.	Care and Protection – including FV, neglect, sexual	9	
14.	Assessment	1	1.1%
15.	Birth – 6 years topics	2	2.2%
16.	As above, including immunisation	4	4.5%
17.	As above, including SUDI	2	2.2%
18.	As above, including Tongue tie	1	1.1%
19.	As above, including attachment	1	1.1%
20.	As above, including Parenting	2	2.2%
21.	As above, including congenital dysplasia of hips	1	1.1%
22.	As above, including squint	1	1.1%
23.	As above, including development	4	4.5%
24.	As above, including management of skin conditions	4	4.5%
25.	As above, including sleep	3	3.4%
26.	Primordial infections	1	1.1%
27.	Fetal Alcohol Syndrome	1	1.1%
28.	Encopresis, eneuresis	2	2.2%
29.	Childhood disease management	1	1.1%
30.	Pain management	3	3.4%
31.	Medication safety, reviews	2	2.2%
32.	Chronic illness	3	3.4%
33.	Care of technology-dependent, medically fragile children	4	4.5%
34.	Diabetes	4	4.5%
35.	Managing acute presentations, wound care	6	6.7%
36.	Secondary care, inpatient care	2	2.2%
37.	Reducing ASH – Ambulatory Sensitive Hospital admissions	1	1.1%
38.	Elective general paediatric surgery	1	1.1%
39.	Orthopaedics	1	1.1%
40.	Neurology	1	1.1%
41.	ENT	1	1.1%
42.	Respiratory conditions	8	9.0%

43.	Haematology	1	1.1%
44.	Oncology palliative care	2	2.2%
45.	Mental health	19	21.3%
46.	Children of Parents with Mental Illness COPMIA	1	1.1%
47.	Sexual health, family planning	6	6.7%
48.	Transgender health/gender identity	2	2.2%
49.	At-risk youth topics	4	4.5%
50.	Online behaviour, safety	1	1.1%
51.	Bullying	1	1.1%
52.	Youth and disability	1	1.1%
53.	- Including transition to adult services	3	3.4%
54.	- Including funding streams for low-income families with high needs youth	1	1.1%
55.	Supporting and engaging with families	4	4.5%
56.	Addressing challenging topics/difficult conversations	1	1.1%
57.	Youth health nurses in schools	1	1.1%
58.	Family integrated care	1	1.1%
59.	Learning through case studies	2	2.2%
60.	All topics	5	5.6%
		175 responses	**89** respondents

The full range of topics has been left as requested by respondents, in order to facilitate planning of activities or sharing of articles in future. There was a wide range of topics requested, ranging from topics that support clinical decision-making (e.g. ethics), to determinants of health and equity of health outcome, to the setting of care (primary vs. secondary) and a focus on well child care vs management of childhood diseases. Nurses' professional interests are broad indeed!
The most commonly requested topic was Mental Health (21.3%), followed by the topic of Nutrition and Weight Management in young/obese (16.9%). The third largest group (10.1%) requested the topic of Care and Protection – including FV, neglect and sexual abuse. The next largest group was interested in Respiratory conditions (9%), while fifth-equal at 6.7% were Sexual Health/Family Planning and also managing acute presentations and wound care.

Q 19.   Are you familiar with the NZ Child Health Nursing KSF? (e-Link to document given in survey)
Answered: 116 Skipped: 3
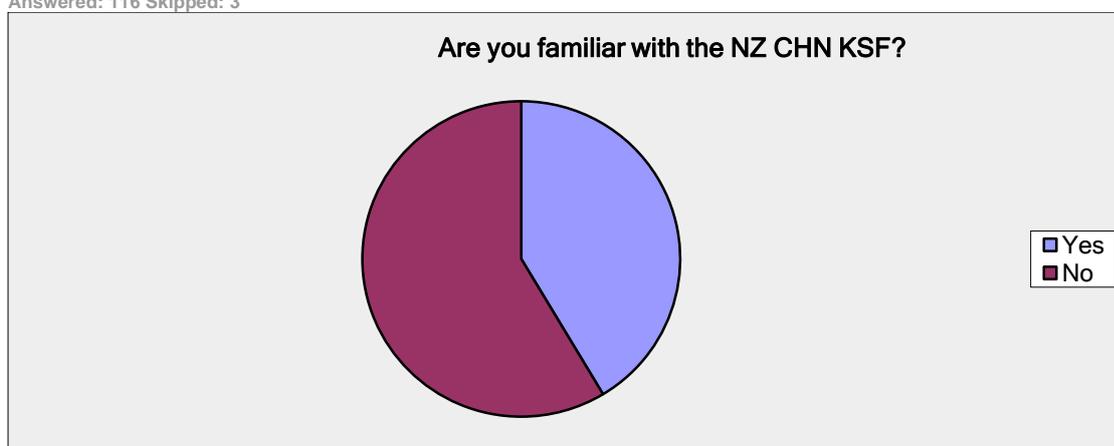
Answer Options	Response Percent	Response Count
Yes	41.4%	48
No	58.6%	68

Q 20.   If you are familiar with the Knowledge and Skills Framework KSF), can you please tell us if/how you use it in practice? (48 respondents said they were familiar with the KSF in Q 19.)

No.	Responses	Responses	% of respondents
1.	I work within the framework	4	10%
2.	I refer to the framework, including when preceptoring new staff	2	5%
3.	I refer others to the framework	2	5%
4.	To update competencies	1	2.5%
5.	To complete my PDRP	3	7.5%
6.	To aid completing performance appraisals	2	5%
7.	I use it in an education role	7	17.5%
8.	I use it to inform policy development	1	2.5%
9.	I have compared it with other KSFs under development	2	5%
10.	I use a different KSF (youth, diabetes)	3	7.5%
11.	I haven't used it (yet)	13	32.5%
12.	I am not sure	1	2.5%
13.	Not applicable *	3 *	-
	(*responses not included in total % calculations)	**44** responses **43** respondents	**40** respondents

If the 24 responses from respondents that use the KSF are grouped together, they represent views of 60% of the respondents. The largest group of responses (32.5%) is the group that haven't used the Framework. The next largest group are those that use it in an education role (17.5%), followed by those that work within the KSF (10%). Two groups tie for next most frequent responses (7.5%) – those that use it to complete their PDRP portfolio, and those that use a different KSF (e.g. Youth Health, Diabetes).

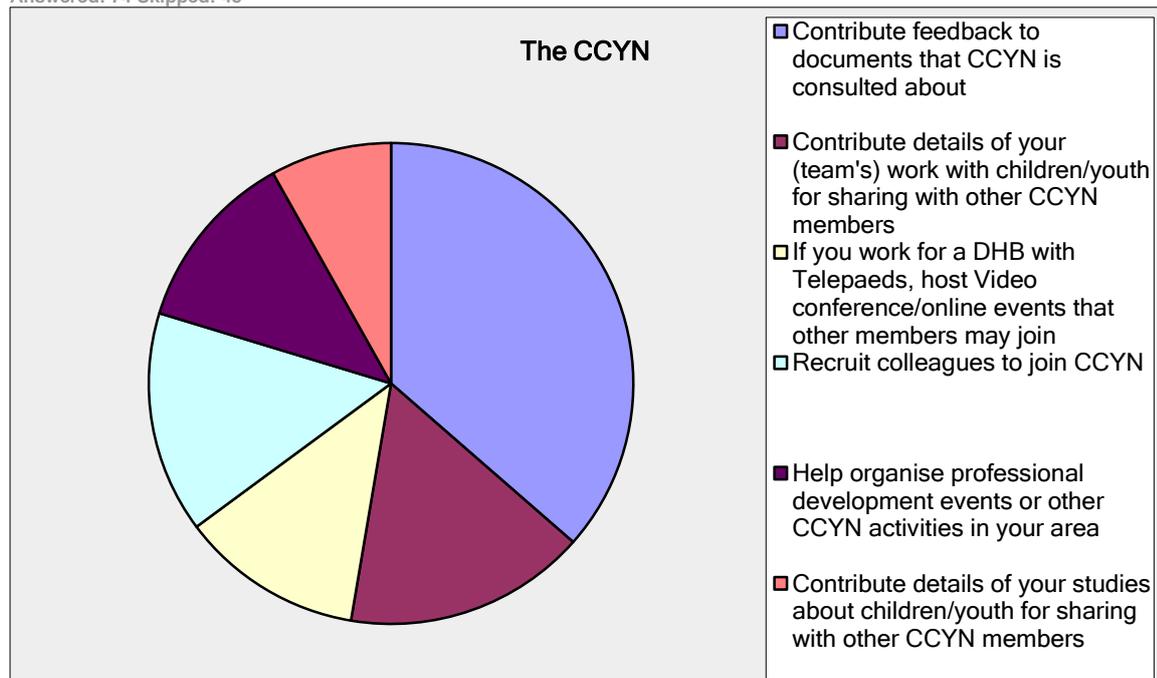Q 21.   What could support you to make greater use of the NZ Child Health Nursing KSF?

No.	Responses	Responses	% of respondents
1.	I already use it *	1 *	-
2.	Improve nurses' awareness of it	14	29.2%
3.	Facilitate improved access to it – e-link, hard copy on ward	3	6.3%
4.	Provide time for nurses to familiarise themselves with it	10	20.8%
5.	Facilitate mentorship with other areas who have implemented it	1	2.1%
6.	Offer Professional Development about KSF	5	10.4%
7.	Integration into DHB/departmental guidelines	3	6.3%
8.	Adjust the focus of the tool (to have a greater emphasis on mental health, biopsychosocial health)	1	2.1%
9.	Don't know	8	16.7%
10.	Not Applicable *	2 *	-
11.	(*responses not included in total % calculations)	**51** responses **51** respondents	**48** respondents

The largest group of respondents called for an improved awareness of the KSF to enhance its use (29.2%), and the next largest group called for time for nurses to familiarise themselves with it (20.8%). The next largest group of respondents didn't know what supports could assist greater use of

the KSF (16.7%), then others suggested that Professional Development on its use (10.4%) might be helpful. Two further suggestions were to facilitate improved access to the KSF (a couple of options noted) and for the KSF to be integrated into DHB/Departmental guidelines (both at 6.3%).

Q22 The CCYN committee consists of 8 volunteer members (Chair, Secretary, Treasurer, Membership co-ordinator, Newsletter editor, Webpage co-ordinator, & committee member) who work in a range of child or youth health nurse roles, interests and locations, and who work as a team to fulfil the objectives of the College: (CCYN objectives were listed)
How can you contribute to CCYN achieving these objectives?
Answered: 74 Skipped: 45

The CCYN

Legend:
- Contribute feedback to documents that CCYN is consulted about
- Contribute details of your (team's) work with children/youth for sharing with other CCYN members
- If you work for a DHB with Telepaeds, host Video conference/online events that other members may join
- Recruit colleagues to join CCYN
- Help organise professional development events or other CCYN activities in your area
- Contribute details of your studies about children/youth for sharing with other CCYN members

can you contribute to CCYN achieving these objectives?

Answer Options	Response Percent	Response Count
Contribute feedback to documents that CCYN is consulted about	36.5%	27
Contribute details of your (team's) work with children/youth for sharing with other CCYN members	16.2%	12
If you work for a DHB with Telepaeds, host Video conference/online events that other members may join	12.2%	9
Recruit colleagues to join CCYN	14.9%	11
Help organise professional development events or other CCYN activities in your area	12.2%	9
Contribute details of your studies about children/youth for sharing with other CCYN members	8.1%	6
Other (please specify)		17
answered question		74
skipped question		45

No.	Other Responses included:	Responses	% of all respondents
1.	I would choose more than 1 option if allowed	12	16.2%
2.	I could help when my situation changes	1	1.4%
3.	I will decide when I find out more	1	1.4%

4.	"Raise standards of employment for those nurses employed within the education system"	1	1.4%
5.	unsure	2	2.7%
6.		**17** respondents	**74** respondents

The incorrect format was used for this question that allowed respondents to make only one selection. This limitation was addressed by some through their 'other' comments. Despite this, a surprisingly high number of respondents (74) indicated a willingness to contribute to achieving CCYN's objectives, especially seeing as only 31 respondents are current members. This is really encouraging, especially after the ambivalent response to Question 9 (the apparently low likelihood of respondents recommending CCYN membership to a colleague or friend).

The largest response was for the option of contributing feedback to documents that CCYN is consulted about (36.5%), followed by being willing to inform other CCYN members about their (team's) work with children/youth (16.2%). The next largest group was those who expressed willingness to recruit colleagues to join CCYN (14.9%) followed by two groups tied with 12.2% of the responses each – hosting VC/online events at DHB Telepaeds site, and Help organise professional development events or other CCYN activities in your area.

Some respondents gave their contact details as part of Question 225, so the category of help they indicated willingness to give is noted alongside those details for the CCYN committee to follow through.

Q 23.   Are there other activities you think CCYN should be involved in?

No.	Responses	Responses	% of respondents
1.	Lobby for child & youth health issues and resources	3	14.3%
2.	- Including at ministry level	2	9.5%
3.	Liaison with other clinical networks and feedback on their work to CCYN members	2	9.5%
4.	- Including UNCROC reporting	1	4.8%
5.	Greater engagement with NZNO Regional Councils to improve engagement and communication	1	4.8%
6.	Increased promotion of CCYN	1	4.8%
7.	Promotion of work of CCYN members	1	4.8%
8.	Facilitation of social networking of nurses working in same geographic area but in different roles	1	4.8%
9.	Development of professional standards for nurses working in the school setting	1	4.8%
10.	Provision of training opportunities for community-based nurses	1	4.8%
11.	No	6	28.6%
12.	Not sure/don't know	3	14.3%
		23 responses **21** respondents	**21** respondents

It seems that some of the activities suggested by respondents are those that CCYN already does – so may indicate a need for greater promotion of these. The largest group of respondents to this question said that there were no other activities that CCYN should be involved in. Then if the responses around lobbying are grouped together (general lobbying for child and youth health issues and resources = 14.3%) and lobbying at the ministerial level (9.5%) this comprises the next largest number of responses to this question (23.8%). If the responses for the group requesting liaison with other clinical networks, including feeding back on the work of those networks to CCYN members (9.5%), are added to those requesting UNCROC progress reporting (4.8%) this totals 14.3% of

respondents. The group that said they didn't know if there were any other activities that should be attempted by CCYN represented 14.3% of respondents. The remaining other suggestions were each made by individuals.

Q24 Do you have any other comments, questions, or concerns?
Answered: 20 Skipped: 99

No.	Responses	Responses	% of respondents
1.	No Comment	9	45%
2.	Questions about membership	3	15%
3.	"I guess, from my perspective – we need to improve the profile of the group"	1	5%
4.	"I couldn't seem to tick the boxes so just wrote in comment boxes. Great to know about CCYN!"	1	5%
5.	"Sorry for the gaps in my responses. My role is clinic-based and have a very small nursing team. Mainly work with paediatricians"	1	5%
6.	"The model seems to be highly focused on 'sickness'. A significant portion of child health nursing is 'well health'. This approach needs to have equal billing"	1	5%
7.	"I think a contributor to me engaging is I perceive myself to be more moderate politically and am not sure if an NZNO-led group would be focused positively on professional issues or just political and negative"	1	5%
8.	"We are continually losing experienced, skilled school nurses due to lack of equitable pay and no medical management (ie currently (ministry of) Education managers). This does not improve health for NZ Youth. We need a supported and united front for better working conditions for all nurses employed within the NZ Education system."	1	5%
		20 respondents	**20** respondents

Q 25.   If you would like to be contacted in response to this survey, please provide details so we can do so.
(Identifying information deleted from report)