

Critical Comment

New Zealand College of Critical Care Nurses

Message from the Chair and Editor

Welcome to the first edition of Critical Comment for 2019. It seems that we have all had a very busy summer with lots of sick patients and high workloads. I hope that you managed to get a break or at least some good rest during that time.

The committee is about to have its first meeting of the year and with one new member to replace the one that have left this means an opportunity to look at the roles for the committee members. The big focus for this year will be commencing the working party for the knowledge and skills framework. We will still be very much focusing on the next education workshop in the south island and provision of scholarships for our members this may well be assistance to attend the world congress in Melbourne.

The NZ Regional ANZICS meeting in April 2019 hosted by Waitemata DHB in Takapuna was a good meeting with some stimulating and thought provoking presentations. In particular I was very much interested in the discussion around electronic records and the patients and family experience within the emergency call. The evening social line-up was excellent, a great opportunity to network.

The NZCCCN General Meeting was held on the 3rd April 2019. During the meeting we welcomed the new member to the national committee, provided the Chairpersons and financial reports, and updated members on the education standards, discussed some wording changes and agreed these to go for voting.

So now I welcome the new member to the committee:

Renee Holland an ICU nurse from Dunedin Hospital.

That means however that we sadly have to say goodbye to someone leaving the committee. Carrie has given a lot of her own time and energy to the NZCCCN and has been committed to developing the college to provide education and support to critical care nurses. I thank her and wish her well:

Carrie Wilhelmsen an ICU from Dunedin Hospital.

We have also had a change of PNA support from NZNO, Margaret Cain has supported the critical care nurses for many years as both a section and lately as a college. We thank her for all the time knowledge and support she has given us over the years. Replacing her I am able to welcome Angela Clark who joins us with a wealth of experience and knowledge as a PNA within NZNO and look forward to working with her in the coming years.

I am looking forward to the coming year and the work that we want to achieve in this time. We will continue to keep you updated of the progress we make and any activities we have as they are developed, both on our website and in this newsletter. But we do look back over the recent events in Christchurch with sadness and our thoughts are with our colleagues there. It is always very difficult when major events like this that are traumatic and emotionally challenging, and it makes the world seem a smaller and better place when we get international support. I am sharing a letter we received from our colleagues in Australia so that you all know what they have kindly said.

Steve Kirby, Editor and Chair

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Monday 18th March 2018

To: Steve Kirby
 Chairperson
 New Zealand College of Critical Care Nurses

Associate Professor Diane Chamberlain
 President ACCCN
di.chamberlain@flinders.edu.au

Dear Steve,

Re: Our condolences and support

I write on behalf of the Australian College of Critical Care Nurses, our members and our Board of Directors to provide and express our heartfelt condolences and support for our Critical Care Nursing Colleagues in New Zealand who are dealing with the aftermath of the massacre in the Mosques in Christchurch.

We would like to acknowledge and know too well the enormous role and service that critical care nurses provide in these circumstances. You have our respect and empathy. For all of you please accept our support and compassion, not just for now, but in the long term.

If there is anything we can do to assist, do not hesitate to contact me.



Yours sincerely,

Di

Associate Professor Diane Chamberlain
 President ACCCN
di.chamberlain@flinders.edu.au

Environmental Care in Critical Care

Helen Polley CCC Middlemore Hospital.

Climate change is not debatable anymore, 97% of scientists agree that it is occurring (Stager, 2011) and it is an accepted fact that the increase in greenhouse gas (GHG) emissions is causing the earth to heat up in a fashion that is faster than nature can adapt to. We are presently living in the anthropocene epoch (Kolbert, E. (2014), so named because the growth of the human population is dominating the geological changes we are experiencing. This is why our present climate change episode is so much different from past ice ages and hot periods, this time nature is not being given time to adapt. It is argued by some that science will provide the solutions, this will be the case in some instances but not all and, why waste resources when we don't have to?

New Zealand has pledged to be 5% below the 1990 GHG emissions and to be 50% below by 2050 (Ministry of Environment). There is a proposed bill to be totally carbon free by 2050 and this has had a lot of support. If you have not heard about the "Zero Carbon Bill" go on line and have a look – it's very easy reading. Health systems contribute 6-8% of GHG to the overall emissions of NZ so we really have to be proactive.



Throughout my nursing career I have been aware of the tremendous amount of waste there is within the hospital system, including but not exclusively, expired products, water, electricity, excessive packaging, unused products, single use instruments etc. On an individual basis I dealt with this as best I could by taking things home to put in my own recycling bin and finding an outlet that would take expired or unused dressing products and medical supplies so they could be used wherever the need was most. This has been a natural part of my career for the past two decades.

Latterly in 2014 I formed a group made up of likeminded staff in our Critical Care Complex, we named ourselves the EPICC group (Environmental Protection In Critical Care). We are fortunate to have a Sustainability Officer at Counties Manukau who is proactive and supportive; Debbie Wilson. Having a Sustainability Officer makes a huge positive difference as Debbie attends to the large organisational projects that positively change the organisations carbon emissions. For us, in the Critical Care Complex having the support of Debbie is fabulous as she is able to give advice or assist with a myriad of things from sourcing recycling bins to connecting me with other environmentalists in different departments. My colleagues in the CCC have been and are great at suggesting ideas and implementing new ways of doing things, most people are keen to participate in environmental endeavors it just has to be made easy to do.

We started with things like recycling glass vials, albumin bottles, paper and soft plastic. Glove boxes covered in green paper in the bedspace provide a visual reminder and makes it easy for staff to recycle; these can be decanted into larger receptacles later. We have large cardboard boxes painted green that we take into a bedspace when we are admitting or doing a procedure to throw all the packaging into. Recycling isn't a primary aim, waste minimisation is more important and we have tried to tackle this by removing polystyrene cups, encouraging keep cups and personal drink bottles.

It is great when companies take back what they produce; Baxter's recycle PVC (IV bags, tubing, oxygen masks and tubing) and Fonterra take back their milk containers. It would be fabulous if more companies were also this socially responsible; there is no harm in talking to suppliers about their product lifecycle and encouraging more responsibility.



We try hard to find ways of repurposing and have a contact who takes albumin bottles to be remodeled into vases; I have made some into outdoor lighting. Another department throws away large plastic bags with an elastic collar – perfect for our apron collection so we minimise their waste by using it ourselves. Some play centers take antibiotic caps and various other things; it's just a matter of doing a bit of investigative work. Many people are out there doing great things already in their area of work; even seemingly small actions have a larger impact than what is initially apparent. Small actions can be conversation starters and be role modeling for staff and visitors alike. For any of you who feel strongly about reducing your work carbon footprint my advice is to start with easy things or an action you feel is important, removing polystyrene cups for example or sending your single use instruments to be smelted and recycled.

I am very easily contactable if you want some ideas to get started:

polleyh@middlemore.co.nz

Kolbert, E (2014) *The Sixth Extinction*. Bloomsburg.

Ministry of Environment:

www.mfe.govt.nz/climate-change/what-government-doing/emissions-reduction-targets

Stager, C. (2011) *Deep Future*. Thomas Dunn Books



NZCCCN Education Workshop Report.

Rachel Yong.

The NZCCCN education workshop for the North Island was hosted by Whangarei Base Hospital on 13th March 2019. The theme of the workshop was "Sepsis and our patients". The education workshop was tailored for registered nurses from the ward areas with an interest in the management of patients with sepsis using case studies from Northland. This workshop aims to increase understanding of the physiological concepts underlying the EWS, to explore further these physiological concepts and ability to relate these concepts to the NDHBs Adult Sepsis Action Plan. It also allows a gained awareness of the different type of fluids used and oxygen delivery in the management of sepsis. This workshop was facilitated by Dr Alison Pirret (Nurse Practitioner PAR CMDHB), Martyn Gibson (Fisher & Paykel), Sarah Fallon (CNS PAR team), Davina Mannion (CNE ICU Whangarei) and Sarah Pickery (CNM for ICU & PAR team, Whangarei). 53 registered nurses attended this workshop travelling from upper north, mid-north to Whangarei. The day was organised impeccably and efficiently. Morning tea and lunch was kindly provided by Fisher & Paykel. Each 53 attendees received a study package which included note pads, pens and study slides for the day as well as chocolate for the afternoon pick me up.

The content presented was very relevant to the theme of the workshop. The day started with Dr. Alison Pirret explaining and identifying the deteriorating patient relating to the EWS. Dr Alison Pirret had explained physiological concepts in a very clear and concise manner. She had used examples from her nursing practice and made concepts relatable to everyday assessment in clinical practice. Discussion and group activities allowed the attendees to consolidate their learning and understanding of physiological concepts underpinning the deteriorating patient. The afternoon session ran concurrently in smaller groups with the other 3 facilitators at the venue. The sessions were 20mins each and groups rotated between sessions. The sessions included a case study, NDHB adult sepsis action plan, oxygen delivery systems and managing fluids in sepsis.

Overall, the education workshop was very well received by those attended as the feedbacks were overwhelmingly positive. The knowledge and skills gained is invaluable in clinical practice. They understood the importance and relevance of MAP and looked forward to applying that knowledge in the wards. It was a very good day in all.

NZCCCN

criticalcarenurses@gmail.com

Find us on the Web:

https://www.nzno.org.nz/groups/colleges_sections/colleges/new_zealand_college_of_critical_care_nurses



New Zealand College of
Critical Care Nurses

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Research participation opportunity

The Wellbeing in Critical Care Nursing Survey is still open for NZ nurses...



PARTICIPANT INFORMATION SHEET

Title: Can we predict biopsychosocial wellbeing in Critical Care health-care professionals? An International study and Sequential Equation Modelling approach.

Investigators: Associate Professor Diane Chamberlain (Principle), Professor Clare Rees, Professor Desley Hegney, Dr Rebecca Osseiran-Moisson, Professor Marion Mitchell, Dr Brody Heritage, Professor Paula Brough, and the International Collaboration of Occupational Resilience (ICOR)

Project Support: Partially funded by the Intensive Care Foundation

Purpose of the study

This is a multidisciplinary survey to measure, to describe and predict biopsychosocial wellbeing in Critical Care Health Professionals. The survey will generate data from a specially constructed and tested survey of demographic questions and several psychological measurement scales and questions that give precise information about the health and wellbeing status of the person completing the survey and the workplace environment in which they work as a team. The information will inform the development of professional policies and further research of interventions by the related Societies, Colleges and Associations for Critical Care Health professionals.

Who is eligible to participate?

We are looking for all critical care healthcare professionals currently employed in any critical care setting.

What will I be asked to do?

You will be invited to participate in an online survey in the link provided.

What benefit will I gain from being involved in this study?

The completion of the online survey will contribute to generated data from previous work so that we can find specifically what may be associated with biopsychosocial wellbeing. This will be used to inform policies and interventions to support critical care healthcare professionals' state of wellbeing.

What will happen to information about me?

Your participation in this survey and the information you supply is not identifiable once it is submitted. The data collected is anonymous and will be sought solely from you. There will be no information collected via a third party.

All information and results obtained in this study will be stored in a secure way on a password-protected computer or on a secure server at Flinders University and Curtin University with restricted access to people bound to the same confidentiality conditions as the researcher.

The outcomes of the project are to be presented at a conference, and the results will be submitted for publication to a peer reviewed journal.

Are there any risks or discomforts if I am involved?

The researcher anticipates no risk from your involvement in this study. However, given the nature

of the project, some participants could experience emotional discomfort. The following organisations can provide support.

- Beyond Blue 1300 22 46 36 (Australia)
- Doctors Health Advisory Service (All Australian states and New Zealand)
- Lifeline 13 11 14 (Australia)
- Lifeline NZ 0800 543 354
- The Lifeline App CA
- Lifeline helpline Northern Ireland 0808 808 8000.

How do I agree to participate?

Participation in this project is entirely voluntary and you are free to withdraw without penalty. If you decide you want to take part in the research project, your consent is implied by your completion and submission of the survey.

By agreeing to proceed, you are telling us that you: understand what you have read and consent to be involved in the research described

How will I receive feedback?

On completion of this study, the results will be published in the Societies, Colleges and Associations journals and publications and other related journals.

Thank you for taking the time to read this information sheet, and we hope that you will accept our invitation to be involved.

*This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee (Project number: 7927).
For more information regarding ethical approval of the project only, the Executive Officer of the Committee can be contacted by telephone on (+61 8 8201 3116), or by email to human.researchethics@flinders.edu.au*

Reflections on publishing an article

Fiona Yu

I found getting an article published far more difficult than I expected. After several submissions and subsequent rejections, I learned it is crucial to follow set criteria. Repeated negative feedback was initially demoralising until I realised that I should view it as constructive criticism. Furthermore, I recognised that carefully and thoughtfully answering the reviewers' questions was key to getting an article published. You have to be determined and prepared to accept rejection (multiple times). Never give up!

Fiona Yu

PhD student at the University of
Auckland RN in Intensive Care Unit,
Waikato Hospital

Fiona's article: Yu, F., Raphael, D., Mackay, L., Smith, M., & King, A. (2019). Personal and work-related factors associated with nurse resilience: A systematic review. *International Journal of Nursing Studies*, 93, 129-140. [Personal and work-related factors associated with nurse resilience- A systematic review](#)

NZ College of Critical Care Nurses [NZNO]
2019 national committee members

Position	Name	Term	Region
Chair	Steve Kirby	4 th	Northern
Vice Chair	Rachel Young	2 nd	Northern
Secretary	Sarah Rogers	3 rd	Midlands
Treasurer	Erin Williams	3 rd	Midlands
Membership	Tania Mitchell	2 nd	Central
Website/Newsletter	Vacant		Mid-South
Consultation Documents	Lara Millar	2 nd	Central
Committee	Renee Holland	1 st	Southern
NZNO Liaison	Angela Clark	N/A	NZNO



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New Zealand College of Critical Care Nurses



Are you a member? Membership is FREE

- ✓ Join a large community of likeminded nurses
- ✓ Scholarships available for courses and education
- ✓ Discounted registration to ANZICS conferences
 - ✓ Critical Comment Newsletter
- ✓ Support education and safe staffing standards



For more information or to join, visit our website:

www.nzno.org.nz/groups/colleges_sections/colleges/new_zealand_college_of_critical_care_nurses

or



New Zealand College of Critical Care Nurses



Update your NZNO or NZCCCN Membership

If you move address, change your name, change your job/position, or no longer want to be a member of a college of section please update your details with NZNO. You can do this by emailing Sharyne Gordon: Sharyne.Gordon@nzno.org.nz with NZNO number and a simple request to alter your details or remove you from the membership database.