

Critical Comment

New Zealand College of Critical Care Nurses



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Message from the Chair

Tania Mitchell

Welcome to the 3rd edition of the Critical Comment member newsletter for 2023.

I hope that the winter illnesses and pressures are nearing the end for you in your workplace, although, in recent years I feel that the pressures have been constant and those times of lower acuity are less, and shorter duration. Spring has sprung and there is an air of more positivity with the pay equity and MECA negotiations complete at this stage. I hope that the increase in pay rates will go somewhat towards helping with nurse retention as, after all, that is the key. Yes, we also need recruitment, but if we can retain the nurses we have, then that is a significant part of the staffing challenge.

Some things to update you on. Thanks to those who completed the survey monkey regarding your education needs, to help inform our member education plan for 2024 and beyond. The committee are soon meeting to discuss this and start planning. Te Whatu Ora critical care sector advisory group commissioned a stocktake of the current vocational and post graduate education available for critical care nurses in New Zealand. This stocktake will inform some of our work that both the college and advisory group undertake. I look forward to being able to share this with you shortly.

The work of the advisory group continues. As mentioned in my last Critical Comment report, I would like to reiterate the opportunity that we have as critical care nurses currently, to access additional, ring-fenced for ICU, funding for post-graduate and vocational training. This is to support both the upskilling and education of our nurses, as well as nurse retention. Every unit across the country has this funding. I encourage you to ask your manager about accessing this if you wish to study, and contact me at criticalcarenurses@gmail.com if you are having difficulty accessing this. This is a unique opportunity where additional funding is available and the directive from Te Whatu Ora critical care advisory group on how this is to be used is clear.

We formally welcome Nayda Heays from Hawkes Bay ICU to our committee. Nayda was seconded onto the committee and has now been nominated unopposed. Welcome Nayda. We have a vacancy in the Northern region, so if you are work in the Auckland region or Whangarei and are interested to know more about what is involved to being on the committee, please email me at criticalcarenurses@gmail.com.

As I am nearing the end of my term on the committee, David Aveyard from Waikato ICU will be taking over the chair role, and I will be stepping back into the vice chairperson role to support from there.



Noho ora mai
Stay well, look after yourself, goodbye.

Tania Mitchell
Chairperson NZCCCN

Message from the Vice Chair and Editor

David Aveyard

Hi and welcome to another addition of Critical Comment. This is a publication aimed at critical care nurses, produced by the NZCCCN team with contributions from critical care nurses throughout New Zealand.

This edition of Critical Comment includes an overview of the NZNO conference and AGM by David Aveyard (NZCCCN Vice Chairperson) and Alicia Osland (NZCCN Membership). Tania Wood (members of NZCCOF) writes about the recent New Zealand Critical Care Outreach forum meeting held in Auckland. A contribution from Richard Ferreira (NZCCCN committee member) outlines the 2023 ANZICS Safety & Quality/iSRRS Darwin Conference and Tania Mitchell (NZCCCN chairperson) shares her work around sustainability.

Over the last few months, the NZCCCN committee have sent out numerous emails asking our member to provide input, feedback and to vote on a number of topics including education and document remits. Member participation and involvement is very important and enables us to function as a committee, therefore the NZCCCN committee would like to thank all of those members who participated. All remits were passed and the information gained from the education survey monkey will be discussed in the next Critical Comment.

The NZCCCN committee would like to thank our outgoing Chairperson Tania Mitchell, and recognise her leadership, contributions, dedication, focus and hard work over the last 3 years. She was Chairperson during a very difficult time for ICU/Critical care nursing throughout New Zealand due to COVID and

nursing shortages. She has led our committee and represented New Zealand ICU/Critical care nurses with a strong and positive voice, putting ICU/Critical Care nursing into the spotlight, pushing the Ministry of Health to increased funding and highlighting staffing and educational issues as well as identifying the challenges ICU /Critical Care nurses face on a day-to-day basis.



I would also like to say farewell to Richard Ferreira who is leaving the NZCCCN committee after 1 year due to other commitments, we will miss his extensive knowledge, computer skills and sense of humour. We are always looking for contributions from NZCCCN members for the Critical Comment. If you are involved in a research project, change of practice, or anything of interest which you think other NZCCCN members would like to read about, please contact us on our email at criticalcarenurses@gmail.com.

Thanks, and enjoy the read.

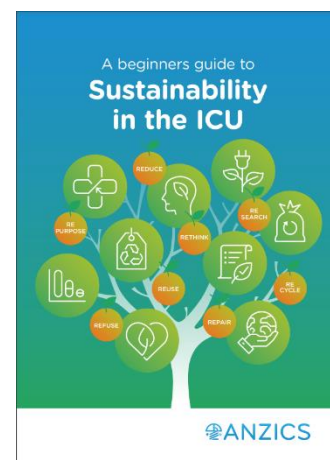
David Aveyard
Vice Chairperson and Editor NZCCCN

Sustainability made easy – Imbedding sustainability into your everyday work

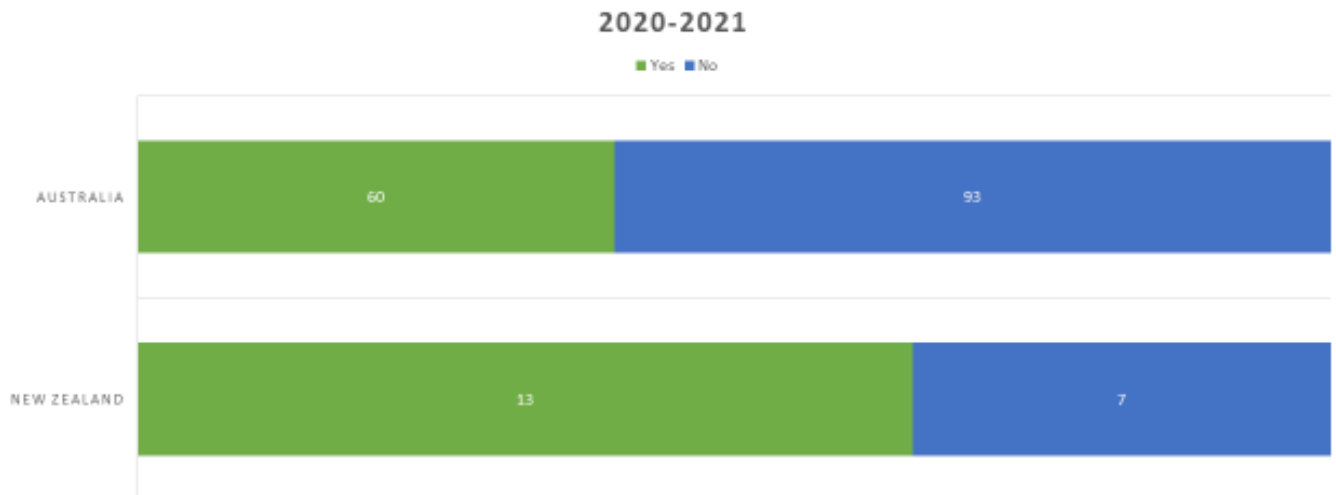
I was invited to speak on sustainability in the ICU at the Australian and New Zealand Intensive Care Society (ANZICS) Safety & Quality conference in July in Darwin. I have been asked to share here for you some relevant parts of my presentation that may be of use in your unit.

I was part of a team who wrote this sustainability toolkit for use in Intensive Care Units in New Zealand and Australia (ANZICS, 2022). This is a practical toolkit, designed to encourage and guide staff on how to move sustainability into the foreground rather than it be considered an optional extra. This includes practical guidelines and examples for many areas of the ICU, including establishing and imbedding a green team into your unit. I encourage you to look at this resource as it has actions for different staff members to be taking, as well as practical ideas on power saving, procurement, waste management, pharmaceuticals and all aspects of patient care. In addition, there is a section on how to form a sustainability team in your ICU, and advice on how to take personal and professional action.

Does your unit already have a sustainability team? ANZICS Centre for Outcomes & Resource Evaluation, known as CORE, recently introduced questions into their annual survey to capture data surrounding this. As you can see, New Zealand proportionally has more units focusing on sustainability compared to Australia. Since they began capturing this data, the number of units with a dedicated team or individual has increased. They also identified that units in either tertiary or metropolitan areas were more likely to have a sustainability team compared to rural/regional or private ICUs (Trent et al., 2023).



“Does your unit have a clinician or team with responsibility for considering and implementing environmental sustainability initiatives?”



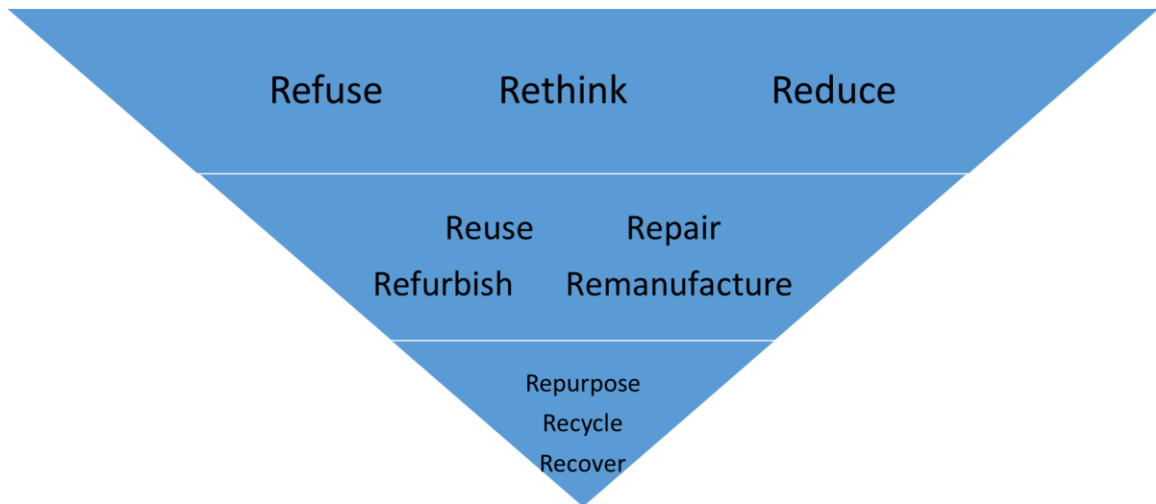
If your unit does not have a sustainability team, then form one. You simply need interested people, this toolkit, and then you can choose the easiest things as a starting point. It is common for sustainability teams to be nurse led, and include members of the multi-disciplinary team including health care assistants, doctors, cleaning and administration staff. Identify your sustainability champions, recognise them, and celebrate them. Speak to your quality team about embedding sustainability into quality frameworks.

Thinking sustainably can easily be integrated into your existing way of working. For example, including sustainability articles or articles where the evidence base supports doing less into your journal club. Consider environmental as well as financial cost if you are involved with purchasing decisions. Use less consumables, rationalise what you use and don't open things just in case. Advocate for appropriate goals of care discussion and early recognition and diagnosis of dying to prevent overtreatment. Choose the oral or enteral route for drug administration as opposed to intravenous, where appropriate. Focus on accurate waste streaming and role model these changes. Seemingly small changes are worth the effort.

The toolkit working group are hoping to update the toolkit with version two, including research and new ideas. In addition, we are aiming to provide further resources on life cycle analysis, which is an analysis of the carbon footprint of natural resource extraction, manufacturing, packaging, transport, use-reuse, and recycling/waste disposal of certain products or processes. These analyses are always influenced by regional factors for example energy source (coal, wind), transportation etc. Material flow analysis tool can be useful to provide a quantitative understanding of all the goods and waste flows that enter and leave the system and can be used to manage systems and waste flows. Helping to measure your carbon footprint.

The waste hierarchy is useful to guide us in our sustainability journey. The reduce, reuse, recycle mantra has evolved as we have learnt more about reducing waste. Recent literature on sustainability in the ICU refers to the 10 R's. At the top of the waste hierarchy, the most sustainable are to refuse, rethink and reduce. This relates to the effect on greenhouse gases, and indicates where we should spend the majority of our focus for maximum impact. There are a multitude of actions that reduce what we do and our impact on the environment, and reduce the consumables we use in the ICU, without compromising quality care. As you can see, recycling is the lower

impact end of the waste hierarchy, therefore more beneficial to focus your energy on other options for larger impact



In summary, start where you are, do what you can. If your unit does not have a green team, form one. We are more than just clinicians, we are custodians of our country and world. Every single decision to act sustainably matters, however small – let's get going.

There is a New Zealand ICU sustainability network led by Dr Louise Trent from Hawkes Bay ICU. We are collaborating to share ideas and resources. If you wish to know more about this group, please email me on Tania.Mitchell@ccdhb.org.nz. Get involved as together we are stronger.

References

ANZICS (2022) Beginners guide to Sustainability in the ICU. <https://www.anzics.com.au/safety-quality-resources/>. Accessed 18 July 2023

Trent, L., Law, J. & Grimaldi, D. Create intensive care green teams, there is no time to waste. *Intensive Care Med* **49**, 440–443 (2023). <https://doi.org/10.1007/s00134-023-07015-w>

Tania Mitchell
Chairperson NZCCCN

Conference report - Richard Ferreira

The New Zealand College of Critical Care Nurses (NZCCCN) had a strong presence at the 2023 ANZICS Safety & Quality/iSRRS Darwin Conference. Several NZCCCN members attended the conference, and two members, including the chairperson Tania Mitchell, gave presentations. They represented the NZCCCN and showcased our expertise and dedication to critical care nursing on an international level.

The conference, which took place from July 20th to 22nd, 2023, focused on rapid response systems and ICU patient safety and quality. The ANZICS Conference is highly respected as a platform for networking, knowledge sharing, and exploring the latest advancements in critical care nursing. It attracts professionals from around the world, providing an opportunity for our representatives to highlight the outstanding work done in our national ICUs and build new relationships for the benefit of NZCCCN members.

The ANZICS Safety & Quality/iSRRS Darwin Conference featured plenary sessions on topics such as workforce, environmental sustainability, rapid response, sepsis, and medication safety. Experts in the field, including Professors Daryl Jones, Johanna Westbrook, Naomi Hammond, and David Pilcher, delivered these sessions. The conference also included concurrent sessions on Rapid Response and Safety and Quality.

During the conference, Tania Mitchell and Richard Ferreira presented on behalf of the NZCCCN. Their presentations were well received and provided valuable insights into the latest developments in New Zealand's critical care nursing. Tania Mitchell's presentation on environmental sustainability was particularly captivating, as she emphasized the important role of critical care nurses in achieving positive patient outcomes while ensuring environmental sustainability. Her extensive knowledge and ability to engage the audience made her presentation one of the highlights of the conference.

Keynote speakers at the conference included Professor Deepak Bhonagiri, Chair of the ANZICS Safety and Quality Committee and a senior Intensivist from Sydney, Australia, and Dr. Michael DeVita, Professor of Critical Care Medicine at the University of Pittsburgh School of Medicine and a pioneer in the development of Rapid Response Systems.

In addition to presenting at the ANZICS conference, the NZCCCN is a standing member of the ANZICS Safety and Quality Committee, representing New Zealand and bringing back valuable lessons and topics from the meetings to our hospitals.

To access the comprehensive scientific program from the ANZICS Safety & Quality/iSRRS Darwin Conference, please visit the official ANZICS website at <https://www.anzics.com.au/a-joint-anzics-safety-quality-conference>

A number of our NZCCCN members also participate in numerous other conferences. We encourage you to share your professional achievements and endeavours with the NZCCCN community when participating in conferences. Your successes inspire and motivate others within our community. Together, we can celebrate the significant impact of critical care nursing in New Zealand and promote collaboration among our members.

Richard Ferreira

Charge nurse for quality and safety

Auckland City Hospital Cardiothoracic and Vascular Intensive Care Unit (CVICU)

NZNO conference and Annual General Meeting (AGM) report

This year's Tōpūtanga Tapuhi Kaitiaki o Aotearoa/NZNO national AGM and Conference was held at Te Papa in Wellington on the 20 and 21st September. NZCCCN was represented by Alicia Osland (Membership) and David Aveyard (Vice Chair). Below is a brief outline of some of the people who presented, topics, and discussions covered during the national AGM and Conference. It was a very informative two days with multiple speakers and a lot of passionate discussion about the health care system and the challenges, struggles and frustrations RN, HCA and EN are faced with on a day-to-day basis.

The AGM was opened by the then Health Minister Ayesha Verrall, who spoke about COVID, waiting lists and work force issues, the direction of health care, the big picture of health reforms, sustainability, and funding. NZNO President Anne Daniels then spoke about NZNO strategies including Maranga Mai and the 5 fixes. Daniels spoke of the year that has been, the future, negotiations, and the fact that there is still no safe staffing or equity. Daniels identified that staff need to be safe and nurses need to be the change and not just accept the status quo. Then NZNO Kaiwhakahaere Kerri Nuku spoke of the crazy year that had been, that NZNO members needed to stand united, the importance of the Te Tiriti o Waitangi, and to rising up and unit the nursing voice.

Paul Goulter, the NZNO Chief Executive highlighted the many issues in health and why NZNO created Maranga Mai. Goulter outlined the multiple employment disputes and negotiations NZNO is involved in and the need to fight for the respect NZNO members deserve from the Government and Te Whatu Ora Health New Zealand. The NZNO Financial statement for the year was discussed by Andrew Casidy, the NZNO Director of Operations and Membership Support. Casidy reported that NZNO membership had grown, with an increase in income and investment, but also expenses. NZNO was in surplus this year, but this was reportedly needed as a buffer for future years. There was then a discussion around the constitution review, including feedback received from members surveyed, and the need to continue to engage with all NZNO members including colleges and sections.

During day two, Paul Goulter (NZNO Chief Executive) spoke about the challenges in the health care system. He introduced a new framework, which was a triangle with the patient and Whanau in the centre, and at the points of the triangle were Māori, workforce, and the health system. He then discussed individual aspects of this framework. He identified the NZNO plan for the coming year, ongoing discussions with Te Whatu Ora Health New Zealand and how other professions are doing nurses roles and how this is undermining nursing.

We then heard from three Māori nurses, who described their journeys through nursing within the health care system. They shared their experiences of racism and the lack of equity in the health care system and their workplace. Then Rob Campbell talked about his perspective of Te Whatu Ora Health New Zealand. Annette Sykes then spoke about the challenges for Māori within the Aotearoa health system, and the importance of the Te Tiriti o Waitangi. We then split into groups and completed an exercise and came up with ten ways to actualise Te Tiriti o Waitangi in our workplaces.

There was then a passionate panel discussion about the challenges of nursing from five nurses in different areas within the health system. The NZNO representatives for HCA and EN identified that they should have also been on the panel. The national Conference and AGM was then closed by the NZNO President Anne Daniels and NZNO Kaiwhakahaere Kerri Nuku.

David Aveyard
ICU ACNM Waikato hospital

Alicia Osland
RN Dunedin hospital

NZ National Critical Care Outreach forum – summary

The NZ National Critical Care Outreach forum (NCCOF) was hosted by the Patient At Risk (PAR) Team, Te Whatu Ora Counties Manukau, Middlemore hospital on the 5th October 2023. The attendance was impressive with 47 nurses in attendance from 13 hospitals around NZ as well as a large contingent on zoom.

The programme was varied with six guest speakers presenting sessions which included identification of sepsis and the six key points to sepsis management, debriefing critical incidents including the Te Toka Tumai Hot Debrief Guide, latest pharmacological guidelines relating to electrolytes and their replacement, common haematological disorders and stroke management. The sessions were interesting, interactive and received positive feedback.

The outreach forum is a wonderful opportunity to network with colleagues from around the country, to share experiences, celebrate success and support each other through challenging times. The round table discussions at the end of the day provided a forum for this.

During the round table discussions, we heard from some hospitals who have newly established outreach/PAR teams, others who are growing their teams and from areas that have well established teams, but we all shared common successes and challenges.

Successes included seeing more Nurse Practitioners working in PAR teams/outreach roles and PAR/outreach nurses currently going through the Nurse Practitioner training programmes. Many education programmes including simulation are being provided by PAR/outreach services across the country teaching skills in recognising and managing patient deterioration. Sharing these programmes and other initiatives is both an opportunity to gain ideas and to celebrate success.

Common challenges amongst PAR/outreach teams were often focused on resources or lack of resources. We are all facing the same challenge of an increasing population of physiologically unstable patients, more demand on our services and how to meet this need. Clinical areas are facing significant staffing challenges. One strategy that was discussed to meet this challenge was the value of data collection and methods to collect data in order to support the need for more resources.

A common frustration was the expectation that PAR/outreach take on additional roles that may not necessarily relate directly to patient deterioration, an example given was the Patient/Whanau Call for Concern. As many calls to this service are often not directly related to patient deterioration and are mainly focused around poor communication, medical and nursing management. These calls can take up a lot of PAR/outreach hours for a service that is often already stretched.

The value of the NCCOF is in providing that opportunity for us all to come together, for learning, sharing and support - all aimed at improving the outcome for our patient population and acknowledging that our roles in PAR/outreach are making a difference. Looking forward to the next NCCOF, if you work in a PAR/Outreach role and haven't been to a NCCOF come along to the next one venue to be confirmed.

Tania Wood
PAR team
Middlemore hospital

Australian and New Zealand (ANZ) Intensive Care Foundation

The Australian and New Zealand (ANZ) Intensive Care Foundation is a charity, founded over 30 years ago by the Australian and New Zealand Intensive Care Society, Australian College of Critical Care Nurses and the College of Intensive Care Medicine of Australia and New Zealand (ANZICS, ACCCN, and CICM).

The Foundation is committed to improving the care, treatment and quality of life of critically ill people in Australia and New Zealand by raising funds for clinical research projects as well as the education of health professionals responsible for intensive care.

Our core operations are covered each year by our member organisations ACCCN, ANZICS and CICM and we fundraise so that we can:

- (a) provide research, education and quality improvement grants for projects in areas of intensive care and critical illness or issues related to those subjects;
- (b) promote awareness and education in the general community about intensive care and critical illness or issues related to those subjects; and
- (c) deliver high quality professional training and education to intensive care staff.

The Intensive Care Foundation consists of a Board of Directors and an independent Scientific Review Committee. The New Zealand Directors are Associate Professor Rachael Parke (CVICU, Auckland) and Dr Shay McGuinness (CVICU, Auckland).

The Foundation's annual grant program seeks Expressions of Interest to apply for funding grants each year. We seek applications from a broad and diverse range of investigators, teams and project designs. Clinicians, researchers, *and educators* that care for ICU patients in ANZ are welcome to apply.

The Foundation will be awarding grants in 3 categories this year:

1. PROJECT GRANTS

EDUCATION PROJECT GRANTS

To fund the development and dissemination of educational products, and pedagogical research related to the clinical management of critically ill patients. Examples of educational products include learning packages, videos, and other online resources.

RESEARCH PROJECT GRANTS

Our usual research grant program continues its emphasis on supporting early career investigators and providing seed money for pilot projects from research programs with great potential for major, successful future grant applications from peak funding bodies.

2. EDUCATION PERSONAL DEVELOPMENT GRANTS

Scholarships to support the professional development of talented early career clinician educators who will become future leaders in health professional education. We seek to promote diversity, equity and inclusiveness, and especially encourage applicants from professional backgrounds and geographic locations that are frequently under-represented among grant recipients.

In 2022 a total of \$147,597 (AUD) was awarded to projects including:

1. A Phase 2 safety, dose-finding and efficacy study evaluating VET tPA treatment in ARDS. **Chief Investigator: Luis Schultz, Liverpool Hospital, NSW.**
2. Reducing Barrier Gown Use in ICUs – An Environmental Sustainability Project. **Chief Investigator: Kerriane Huynh, Sunshine Hospital, VIC.**
3. Evaluation of a novel sleep monitoring technology in the ICU. **Chief Investigator: Laurie Showler, Royal Melbourne Hospital.**
4. Digital health to assist recovery after critical illness. **Chief Investigator: Nina Leggett, Western Health, VIC.**

The results of the 2023 grant round will be available very soon.

For further information check out the website <https://www.intensivecarefoundation.org.au/> which also has information for patients, families and friends or do feel free to contact Rachael (rparke@adhb.govt.nz) or Shay (shaymc@adhb.govt.nz).

“ The ICF is pleased to continue supporting exciting research ideas and talented researchers that improve patient outcomes and the Intensive Care specialty. We ask the Intensive Care and broader community to continue working with us to raise funds to support the annual ANZICF grants round and its amazing impact.”

Professor Claire Rickard & Vanessa Baic, ANZICF co-chairs.



Migrant workers research

See below for a great opportunity to participate in a research project. Please follow this link for further information or contact hina.karim@waitematadhb.govt.nz:

[participant information and consent form](#)



Te Whatu Ora

Health New Zealand

Waitematā

RESEARCH INVITATION

We are seeking the voluntary participation of Migrant Nurses (Overseas Trained Nurses) working in the adult intensive care units in New Zealand.

If you are

- An Overseas Trained Registered Nurse (Bedside, Clinical, Nurse Educator, Clinical Coach, Research Nurse, Unit manager, Quality nurse)
- Working in an adult intensive care unit
- With ≤10 years of New Zealand ICU experience
- Agree to complete an online survey

then you are invited to participate in a study about the


“Migrant Nurses’ Cultural Competence in New Zealand Intensive Care Units: A Cross Sectional Survey”

I am Hina Karim, an overseas trained migrant nurse working in the ICU at North Shore Hospital as a research CNS and I am conducting this study with my other colleagues as part of the nurse-led research at North Shore Hospital Intensive Care Unit and School of Nursing, Massey University.

If you are interested in taking part, please read the attached Participant Information Sheet about the survey. The survey includes cultural questions to explore your knowledge, beliefs, and actions as you interact with patients/whanau admitted to your service.

We believe that through this research will improve Cultural Awareness and Sensitivity and enhance the acculturation process that will benefit the Migrant nurses.

Thank you





Message from the WFCCN for WFCCN Members

We would like to offer all members an opportunity to place a link on their association website or Facebook page that provides their members direct access to the 2nd edition of the International Best Practice in Critical Care E-book from the WFCCN.

Access the E-book [here](#).

We hope your members find this resource helpful in their care of critically ill patients.

Dr. Violeta Lopez, RN, MNA, MPET, PhD, FACN
Board of Director (Secretary) and Ambassador, WFCCN

New Zealand College of Critical Care Nurses [NZNO]
2023 national committee members

Member	Role	Region
Tania Mitchell	Chairperson	Central
David Aveyard	Vice-chairperson/Critical Comment	Midlands
Rachel Atkin	Treasurer	Midlands
Rachel Yong	Secretary	Northern
Richard Ferreira	Consultation Documents	Northern
Alicia Osland	Membership	Southern
Diane Pollard	Committee	Mid-Southern
Nayda Heays	Committee	Midlands
Angela Clark	Professional Nursing Advisor	NZNO



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 section please update your details with NZNO. You can do this by emailing Sharyne Gordon: SharyneG@nzno.org.nz with your NZNO number and a simple request to alter your details or to remove you from the membership database of the college.



NZCCCN

New Zealand College of Critical Care Nurses

Critical Care and Coronary Care Unit 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

