# **On Target**

### **March 2018**

**Aotearoa College of Diabetes Nurses Committee:** 

Chair: Tricha Ball

**Secretary/Website:** Debbie Cunliffe Accreditation Portfolio: Bryan Gibbison Kerrie Skeggs

**Workforce Development & Membership:**Andrea Rooderkerk

Study Day Organiser: Bobbie Milne

**Seconded Members:** Anne Waterman, Hazel Philips



#### From the Editor

By the time you all read this, some NZNO members will have voted one way or the other with regards to the revised MECA agreement and strike action may be on the cards. It is disappointing (to say the least) to discover that only a third of the 29,000 DHB nurses covered by this MECA cast a vote in the first round of ratification and that the MECA was rejected by a very slim margin. Please be informed and make an participate. would effort to It unfortunate if national industrial action and the associated disruption was being determined by a few who bothered to participate.

We hope that this edition will be of interest to you all. Drop us a line via email (acdnnewsletter@gmail.com) if you have any feedback or comments you'd like to make for the next edition.

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### Annual General Meeting

Wednesday 2<sup>nd</sup> May, 8am-10am; Distinction Hotel, Hamilton



### **National Committee**

Tricha Ball - Chair Auckland trichab@adhb.govt.nz Debbie Cunliffe -**Bay of Plenty** acdn.secretary@gmail.com Secretary/Website /Communications Kerrie Skeggs - Treasurer Mid-Central kerrie.skeggs@midcentraldhb.govt.nz Bryan Gibbison - Accreditation Waikato bryan.gibbison@waikatodhb.health.nz Coordinator Andrea Rooderkerk - Workforce Hawkes Bay acdn.membership@gmail.com **Development and Membership Portfolio** Bobbie Milne (Study Day) Counties Manukau bmilne@middlemore.co.nz Waikato Anne.Waterman@waikatodhb.health.nz Anne Waterman **Hazel Phillips** hazel.phillips@huttvalleydhb.org.nz **Hutt Valley** 

**Debbie Cunliffe** comes to the end of her 3 year term on the ACDN National Committee at this year's AGM. Debbie has worked tirelessly in her role as Secretary for the Committee and her organisational skills will be sorely missed. Thank you Debbie for all of the work and energy you have put into your time on the National Committee.

There will be a vacancy to fill on the national committee at the ACDN AGM in Hamilton on the 2 May 2018. If you are thinking about expanding your horizons or looking for a challenge, please consider joining the National Committee.

"Joining our committee offers an excellent opportunity to be mentored by experienced committee members, to learn about the work of ACDN in promoting and supporting excellence in diabetes nursing in New Zealand." - Tricha Ball; Chairperson

The ACDN Committee meet together four times a year with regular telephone conferences at other times. Travel costs are covered, but members are asked to seek support from their Managers to be released to attend face to face meetings if appropriate. If you are a team player who strives for excellence and would like to join our friendly team, please feel free to contact one of the National Committee listed above: For nomination form — <u>Click here</u> and log in.

### **ACDN Study day**

Click here for full programme

Online registrations close on 23 April 2018, walk-ins available at additional cost. Register on the website: Registration page









# **Professional Development Grants**

The Aotearoa College of Diabetes Nurses (ACDN) has established professional development grants to assist nurses to attend or participate in events related to diabetes nursing that will further their knowledge base in their current field of work i.e. workshops, conferences, study days and seminars. The grants can also be used to cover the cost of ACDN accreditation application.

gratefully acknowledges the ACDN contributions from Pharmaco and NovoNordisk towards diabetes nurse education, via these professional development grants. Applications are considered twice a year and the next closing date is 31 July 2018.

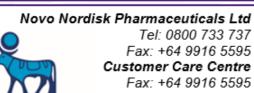
Please note, all applications must be submitted electronically on the ACDN Professional Development Grant application form which can be accessed on the ACDN webpage at NZNO website.

NZNO has a significant number of scholarships that members may also be eligible for. The NZNO website has all the relevant information about these, including criteria and the process for application. Here's the link:

http://www.nzno.org.nz/support/scholars hips and grants



Pharmaco (N.Z.) Ltd 4 Fisher Crescent, Mt Wellington, Auckland, New Zealand Tel: 09 377 3336





The Aotearoa College of Diabetes Nurses (ACDN) (NZNO) have recently updated the National Diabetes Nursing Knowledge and Framework (the Framework) providing a contemporary platform for all nurses to demonstrate that they are competent in diabetes care appropriate to the population groups they care for. The best Framework identifies practice continuing guidelines. education resources, websites for general information suggestions for health outcome measurement aligned with the Ministry of Health Living Well with Diabetes Plan. The Framework cross references each aspect of care and level of knowledge and skill to the Nursing Council of New Zealand (NCNZ) competencies for registration registered nurse.

Dr Helen Snell was the lead for this project and the process of updating included:

- Review of other specialty Knowledge and Skills Frameworks (KSF) to ensure alignment where necessary.
- A new assessment tool to include a selfassessment process along with assessor assessment.
- Integration of the first two levels (Fundamental and Generalist) into one level
- Collapsing four levels from 2009 document into three levels: All Nurses, Proficient and Specialist.
- Update of all existing aspects of care based on reviewer feedback.
- Development of new aspects of care include Psychological, Steroids, Bariatric surgery, Oral health, travel health,
- Existing aspects of practice on Diabetes in hospital, pregnancy and Children and Youth have been considerably expanded.
- New content includes throughout includes an awareness of individualising targets and treatment plans for specials groups, especially for



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the older adult; plus reference made to the older adult in other relevant aspects of care, such as hypoglycaemia and high risk feet. Health literacy has been given more prominence throughout.

The 2018 National Diabetes Nursing Knowledge and Skills Framework provides a refreshed and contemporary guide to all nurses caring for people with diabetes and directly links with ACDN accreditation requirements. The Framework is now available to download from the <u>ACDN</u> Education web page.

Read or download: 2018 National Diabetes Nursing Knowledge and Skills Framework (PDF)

#### **ACDN Calendar**

January		
February	National Committee	
•	teleconference	
	28 <sup>th</sup> Feb – closing date for ACDN	
	Professional Development grants	
March	National Committee Meeting	
	Closing date for applications for	
	accreditation	
	"On Target" published	
April	National Committee	
	teleconference	
May	ACDN Annual General Meeting	
· ·	ACDN study day	
	NZSSD ASM	
June	National Committee	
	teleconference	
July	National Committee meeting	
_	31st July – Closing date for ACDN	
	Professional Development grants	
August	National Committee TC	
	Closing date for applications for	
	accreditation	
September	National Committee	
	teleconference	
	"On Target" published	
	NZNO Annual Colleges &	
	Sections day	
	NZNO Annual General Meeting	
October	National Committee meeting	
November	ovember National Committee	
	teleconference	
December	"On Target" published	

### **Accreditation news**

Accreditation is a peer review process specifically for diabetes nursing where assessment is objective and against a set of nationally agreed criteria. Members of the ACDN, in primary, secondary and tertiary care sectors are encouraged to submit an application for accreditation at either Specialty or Specialist level. Accreditation is valid for 3 years. With the growing numbers of people living with diabetes, it's important that we, as a College, can assure our patients that they are receiving the very best education and support from nationally recognised accredited nurses.

#### Is your accreditation due in 2018?

Please check your current accreditation status and submit your portfolio. If you're not sure, please contact Bryan Gibbison: <a href="mailto:bryan.gibbison@waikatodhb.health.nz">bryan.gibbison@waikatodhb.health.nz</a>

### A reminder regarding confidentiality

Maintaining confidentiality for the people you work with and your patient/client is paramount. NZNO have updated their practice guideline titled "Privacy, Confidentiality and Consent in the Use of Exemplars of Practice, Case Studies and Journaling, 2016." This can be accessed from the NZNO website in Publications at the following link.

http://www.nzno.org.nz/resources/nzno publications and can be found under the section titled Practice.

> "Accreditation is an assurance for me and for my employer that I have met a set of criteria to demonstrate my clinical practice in diabetes nursing at expert level, regardless of my job title or where I am employed" Andrea Rooderkerk; Hawke's Bay



### **Special Interest Groups**

If you are interested in being involved with a SIG or have ideas regarding other possible SIG's (e.g. Pregnancy, Inpatient care etc.), ACDN would be very keen to hear these. Contact: <a href="mailto:acdnmembership@gmail.com">acdnmembership@gmail.com</a>.

### **Indigenous Diabetes Nurse SIG (**as part of ACDN)

The aim of this group, which falls under the umbrella of the Aotearoa College of Diabetes Nurses (ACDN), is to offer indigenous nurses the opportunity to meet, share information and discuss cultural activities that may assist with improving engagement, delivery and management for people living ACDN encourages its with diabetes. members to get involved and inform other indigenous nurses working in diabetes to consider how they might be able to link into this SIG. To learn more about this special interest group, or to get involved please contact: Gina Berghan (MN, DNS); Specialist-Diabetes

T: 09-3074949 E: <u>gina@adhb.govt.nz</u>

The Indigenous Diabetes Nurse SIG will be meeting in Hamilton on Tuesday, 1st May 2018. Further details will be circulated via email. Contact Gina directly for further information.

**Paediatrics:** (as part of the Paediatric Society of NZ – National Diabetes Clinical Network for Child & Youth)

I will be stepping down as Lead of the Paediatric Nursing Work stream for the Network on 31 March, 2018. This work stream will continue to explore innovation and initiatives that can be shared nationally but will now be known as the Paediatric Diabetes Allied health stream. Dr Jo McClintock (Clinical Psychologist) and Shelley Mitchell (Diabetes Dietitian) will be sharing the role of work-stream lead. Dr Philippa Carter (Starship Child Health) has taken over as Chair. Expressions of Interest

for the CRG Facilitator role close at 5pm, 29 March, 2018.

The Memorandum of Understanding (MOU) between Aotearoa College of Diabetes Nurses (NZNO) and the Paediatric Society Clinical Network continues to facilitate collaboration and sharing of information. The Network will continue to keep ACDN updated of all Network activities via quarterly reporting. MOU review date: 2019.

The School and Kindergarten Action and Management plans for National use remain available for download via the CN website https://www.starship.org.nz 2018 versions of these resources are in review process. There has been some delay with the review of these due to the need to incorporate changes in the resources based on feedback received by the Network. National feedback within NZ has resulted in significant proposed changes to better suit a NZ context. After much negotiation it has been agreed that from 2018 the resources will no longer bear the logos of Diabetes Australia. The Royal Children's Hospital and Monash Medical Centre but will acknowledge these agencies as original source agencies with versions from this point forward to be created specifically by the Clinical Network for NZ populations. The 2018 versions will include appendices relating to continuous blood glucose monitoring. Release of reviewed documentation is anticipated to be available by April 2018 via the Network website.

The "Streetwise" collection of educational resources for teens adapted from the Royal College of Nursing, UK, and inclusive of the NZ specific resource regarding Management of Type 2 diabetes have undergone CRG review in March 2018. These resources continue to be available for download via the CN network website.

NZQA/Cambridge medical certificate templates and associated information sheets for both type 1 diabetes mellitus and type 2 diabetes mellitus treated with insulin, that are used to support 'special assessment



condition' applications for students with diabetes, have undergone CRG review in March 2018. Feedback received by the Network has resulted in some changes to the documents and revised documents are anticipated to be available via the website from April.

In 2016-2017, a needs analysis survey for health care professionals was undertaken alongside a consumer survey to collect data on current transition practices throughout NZ as the first phase of the National Transition Project. The second phase developing a National Consensus Statement and associated transition toolbox has been completed and is available via the CN website. This work will be presented at the NZSSD Paediatric Study Day in May 2018.

Network projects in the area of camp planning consumer resources and consumer guidelines for CGM are top priorities for the Network in 2018. Please let us know if you would like to be involved in project work in either of these areas. If anybody has any feedback or would like to propose changes to any of the existing Network resources or have ideas about other areas in which resources are needed for **Paediatric** populations in your local area please do contact the Network. All resources are reviewed bi-annually in response feedback received.

Can I please take this opportunity to thank everybody who has supported the Clinical Network and the development of projects throughout my tenure as CRG Nursing Work stream Lead and more recently as CRG Facilitator? It has been my absolute pleasure to work with you all and I feel privileged to have had the opportunity to do so.

Rosalie Hornung

BSc, MN, NP Child & Youth Clinical Nurse Specialist | Starship Paediatric Endocrinology

Young People with Diabetes {15-25 years} (as part of NZSSD)

For those who are already members of the Special Interest Group (DiabetesYoungPeople), we are holding our first official meeting at NZSSD conference May 2018. This will be a breakfast meeting 7-8am Wednesday 2nd May at the conference centre (room to be advised). Please email me if you intend to go to NZSSD to assist with catering. An agenda will be sent out in April 2018 through the Google Group email tree. This meeting gives us an opportunity to discuss future directions and to have a presence within NZSSD, alongside other SIGs.

Vickie Corbett, Nurse Practitioner, Waikato Regional Diabetes Service.

If you work with young people aged 15-25 years with diabetes and you would like to join the DiabetesYoungPeople SIG, please contact Vickie via the following email address: diabetesyoungpeople@googlegroups.com



**Pumping SIG** (as part of NZSSD) are meeting in Hamilton on 2nd May 10am-12pm. Agenda for this meeting below:

TIME:	TOPIC:	SPEAKER:
10:00	- Introduction - "the story of now"	Sarah Price
	<ul> <li>Update on SIG general business</li> </ul>	
10:05	PHARMAC Discussion To discuss an update on the future of pump/CGMS and other technology used in diabetes funding in NZ.	Brian Betty
10:45	Guest Speaker- Endocrinologist	TBC
11:20	<ul><li>10 minute presentation from pump companies</li><li>Intermed</li><li>NZMS</li></ul>	Chantelle Summerton Trish Snegirev
11:40	Medi-Ray Presentation General discussion on Libre + Q and A session	Mediray team
12:00	Finish	Sarah Price



#### **Regional Networks**

All of us understand the value of collegial networking and support. Some of us are fortunate to work in large teams where that support comes from within the team. For those members who work in isolation, either geographically and/or on their own, it becomes vital to be able to travel to meetings where this networking and support is available. This is often done at a cost to the individual in terms of their time money. Nowadays. opportunities are becoming more scarce and difficult for people to attend due to changes in the way pharmaceutical companies are able to support meetings, travel costs and time and meetings having limited capacity.

ACDN is considering how it might provide regional opportunities for professional development, networking and support. We are planning what is hoped will be the first of ongoing regional meetings. This first meeting will be held in Rotorua later this year with a view to replicating the format in other regions if it is successful in meeting the needs of members. Details are still forthcoming and we will keep you posted.

### For your interest

The evidence for using a weight based method for treating hypoglycaemia – Lindsay McTavish (CCDHB)

To read or download, click here: Hypoglycaemia Studies

# Some "Gems" from the Goodfellow Unit

Cold cabbage leaves may be as good as cold gel packs for breast engorgement, and better than nothing at all

A randomised trial of cold cabbage leaves cold gel packs versus versus control¹ reported that cabbage leaves were as good as the gel packs at reduction in pain at three time points after application compared with a no treatment control group. Additionally, cabbage leaves were superior to gel packs at all three time points following application for hardness of breasts. Both intervention groups were better than the control group for hardness of breasts.

The study had some methodological flaws in the design. For example, the cabbage leaves were applied to both breasts in the leaf group and it is unclear if the application was to one or both breasts for the gel pack.

There was high satisfaction with the cabbage leaves. The leaf intervention used 3 large leaves over each breast. The leaves were rinsed in cold water and chilled in a zip-lock bag in the freezer for 15 minutes, or the fridge for one hour. The cold gel packs were chilled like the leaves. A Cochrane review had reported cabbage leaves as a promising intervention but more research needed. There was no difference in duration of breast feeding at 3 months.2 and This Gem has been checked by Dr Karen Associate-Professor, Hoare Massey University.

#### References:

- Application of cabbage leaves compared to gel packs for mothers with breast engorgement: Randomised controlled trial. Int J Nurse studies 2017. <u>Click here</u>
- 2. Treatments for breast engorgement during lactation. Cochrane Database of Systematic Reviews 2016. Click here



### Two screening questions can rule out depression

A recent Alberta Tools for Practice<sup>1</sup> notes that two questions can be used to rule out depression when the answer is no to both questions (this is similar to a negative brain natriuretic peptide (BNP) to rule out congestive heart failure). If the patient scores positive on either question a more detailed assessment to confirm or refute depression needs to be made using the PHO-9). (e.g. The two questions are "During the past month have you often been bothered by:

- 1. Feeling down, depressed or hopeless?
- 2. Having little interest or pleasure in doing things?"

Whether screening alters outcomes is debatable, but the 2-question screen may be reasonable for case-finding or screening higher risk patients.

#### Reference:

1. Alberta Tools for Practice #203. Click here

To subscribe to the Goodfellow unit for further "Gems", go to www.goodfellowunit.org

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### **Dual Action** NovoMix® 30<sup>2,3</sup>



### NovoMix® 30 is a prescription medicine that is fully funded. Before prescribing please review NovoMix® 30 Data Sheet available at www.medsafe.govt.nz

NovoMix® 30 (insulin aspart (rys)). NovoMix® 30 contains soluble insulin aspart (rys) and protamine-crystallised insulin aspart (rys) 100 units per mL, in the ratio of 30:70. Indication: Treatment of diabetes mellitus. Contraindications: Hypoglycaemia. Hypersensitivity to insulin aspart or excipients. Precautions: Inadequate dosing or discontinuation of treatment, especially in type 1 diabetes, may lead to hyperglycaemia and diabetic ketoacidosis. Where blood glucose is greatly improved, e.g. by intensified insulin therapy, patients may experience a change in usual warning symptoms of hypoglycaemia, and should be advised accordingly. The impact of the rapid onset of action should be considered in patients where a delayed absorption of food might be expected. Do not use in insulin infusion pumps. No studies in children and adolescents under the age of 18. No clinical experience in pregnancy. When thiazolidinediones (TZDs) are used in combination with insulin, patients should be observed for signs and symptoms of congestive heart failure, weight gain and oedema; discontinuation of TZDs may be required. Insulin administration may cause insulin antibodies to form and, in rare cases, may necessitate adjustment of the insulin dose. Interactions: Oral hypoglycaemic agents, octreotide, larreotide, monoamine oxidase inhibitors, nonselective beta-adrenergic blocking agents, angiotensin converting enzyme (ACE) inhibitors, salicylates, alcohol, anabolic steroids, alpha-adrenergic blocking agents, quinine, quinidine, sulphonamides, oral contraceptives, thiazides, glucocorticoids, thyroid hormones, sympathomimetics, growth hormone, diazoxide, asparaginase, nicotinic acid. Adverse Effects: Hypoglycaemia. Dosage and Administration: Dosage as determined by physician. NovoMix® 30 should be administered immediately before a meal, or when necessary after the start of



a meal. Resuspend immediately before use. Discard the needle after each injection. Subcutaneous injection only. NovoMix® 30 must not be administered intravenously. (May 2014). **References: 1.** Liebl A *et al. Drugs* 2012; 72(11): 1495–520. **2.** Wu T *et al. Diabetes Ther* 2015; 6(3): 273–87. **3.** NovoMix® 30 Data Sheet. Novo Nordisk Pharmaceuticals Ltd., G.S.T. 53 960 898. PO Box 51268 Pakuranga, Auckland, New Zealand. NovoCare® Customer Care Centre (NZ) 0800 733 737 www.novonordisk.co.nz ® Registered trademark of Novo Nordisk A/S. TAPS(DA) PP9131. NZ/NM/0216/0020a. January 2017. MIX0098.



