



Te Wheke

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Issue 47

http://www.nzno.org.nz/groups/colleges_sections/sections/nzno_nurse_managers_new_zealand

Committee Report

From the Chair, Sarah Tweedale

Warm Greetings

As 2019 starts to draw to a close and we embark on the last two months it is with reflection that the committee look back over the year. There have been numerous highlights a great conference at the end of 2018 in Napier and one to look forward to in Auckland in two weeks. The successful mentoring and coaching workshops, distribution of funds in the form of grants and the committee hosting regional forums across the country. There have also been some struggles as Nurse Managers have been part of and also on occasions misrepresented within the MECA negotiations, by our nursing workforce. While this is now far behind us we look forward to another productive year in 2020.

The Committee will be changing with myself and Jeni stepping down following completion of our four year Term. We would encourage those of you interested in joining the committee to get in touch, or talk to us at the Auckland conference if you are attending in a couple of weeks time.

Our focus has remained how we can best serve our membership and to this end we have pursued the Coaching and Mentorship Workstream over the course of this year culminating in we hope, (after a number of technical challenges) a national network for our section membership to be able to access coaching and mentorship opportunities among our peers.

One other important aspect has been the proposal to change the name of the section to the; NZNO Nursing Leadership section. NZNO Tapuhi Mana Whakatipu.

Following a survey and the unanimously positive result from the section in favour, this will be passed at AGM and we will proceed to adopt the name that has been gifted from Kerri Nuku the NZNO Kaiwhakahaere in consultation with Poari o Te Runanga O Aotearoa (Te Poari)

The Nursing Leadership Section will aim high and continue to be the voice of and the recognised representative within NZNO of nurses who are leaders in their workforce.

We are aware that nurses in leadership position need on the ground support and while many get this from the organisation they work for, the committee feel strongly that they wish to continue to offer support and education in many aspects of nursing leadership, we will continue to channel funds in the form of educational forum's, study days and grants in support of this goal.

Kindest Regards

Outgoing Chair Sarah Tweedale

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Membership/Education Grant

The NZNO Nurse Managers' Section New Zealand membership now stands at 544. We would love to see this to keep increasing so we encourage you all to talk to your colleagues and explain the benefits of belonging to this dynamic and forward thinking section. We recognise that we are all working in challenging environments and within financially constrained Organisation's. This section acts as an advocate for all members, listening to concerns/national trends and looking at ways to improve leadership roles within New Zealand nursing. A new initiative the committee has finalised this year is The NZNO Nurse Managers Section New Zealand Education Grant. This exciting development will enable members of the section to apply for grants of up to \$500.00 each in order to undertake further education. Two grants will be made annually in May and November. Application forms are available on the website with full details of requirements.

Click [here](#) to go the NZNO Nurse Managers' Section website.



Applications are currently open for further Education Grants.



Nurse Managers New Zealand Conference
"Challenges Of Our Time"
Dates: Thursday 7 to Friday 8 November 2019
Time: 8:30am - 5:00pm both days
Venue: Ellerslie Event Centre, Remuera, Auckland
Keynote Speaker: Nigel Latta - Clinical Psychologist and Author

NZNO NURSE MANAGERS CONFERENCE 2019

"CHALLENGES OF OUR TIME"

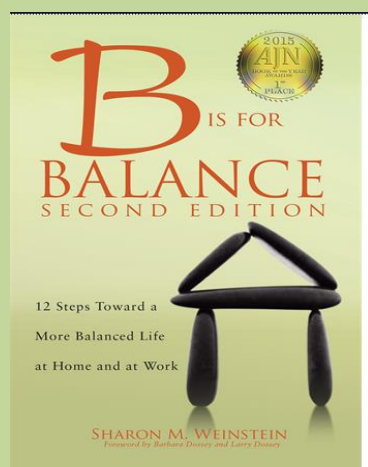
Featured Key Note Speaker:
NIGEL LATTA - clinical Psychologist and author.



ELLERSLIE EVENT CENTRE, AUCKLAND

Thursday 7th and Friday 8th
November

Books, TED talks and websites to read and explore



Book review: 'B is for Balance'

Weinstein manages to talk about abstract topics, such as balance and life purpose, without sounding like a fluffy self-help maverick. She blends philosophy, research and personal and professional expertise to give a somewhat intangible journey solid ground.

What is this thing called balance? You hear about it everywhere; you read about it; and you long for it. But what is it? What does it look like? ... to find that balance, you must first find your center of knowing. You must know who you really are and what you really like ... finding your purpose will give you the center necessary for achieving balance ... Erika Carlson (2013), a psychology scientist at Washington University in St. Louis, reports that the components of mindfulness, attention and nonjudgmental observation can overcome the major barriers to knowing ourselves.

The book dives right in, with a thought-provoking chapter that asks some hard-hitting questions about your true-life purpose: What is it that you really want out of life? What does happiness mean? How do you go about setting goals and prioritizing? What does simplifying your life really look like? If you follow the exercises outlined in the book and take some of these questions along with you as you go about your day, you're bound to find some degree of transformation.

Following the initial discovery chapters are practical and informational sections that cover everything from the concrete toll stress takes on our lives, to how to create a balanced work environment. Intermittently placed throughout, the reader will find "Balancing Act" and "Finding Balance" sections, filled with powerful anecdotes, tips, exercises and self-reflection questions to help you apply the philosophies to your unique life.

Reflections

- What were your daydreams as a child?
- What are three dreams that you have accomplished in your life? Write them down. What efforts contributed to the accomplishment of those dreams?
- What are you dreaming about doing right now that you aren't accomplishing?
- What are the barriers to achieving your current dream? Make a list and then develop a plan for working through each one.

You might feel that you already know what there is to know about certain topics, such as sleep, diet and exercise. But even these sections contain valuable gems, like the quality-of-sleep assessment test.

This book is a must-read for nurses. But the audience need not be limited to healthcare workers. The substance of "B is for Balance" can be applied to anyone looking for a more joyful, fulfilling life under the guidance of a gentle, but firm teacher.

I highly recommend that you read this book.

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NEW ZEALAND
NURSES
ORGANISATION

TŌPŪTANGA
TAPUHI
KAITIAKI Ō AOTEAROA



ELLERSLIE EVENT CENTRE, AUCKLAND

Thursday 7th and Friday 8th
November

**NZNO Nurse Managers
Conference 2019**

Conference
Dinner
**Celebration
Of Diversity**

7th Nov 2019, 6PM Onwards

Dance, DJ, Live Band, Multicultural Meetup

Dress Code : Ethnic Wear

Ellerslie Event Centre, Auckland

The poster features a group of diverse people smiling and posing for a photo at night. It includes the NZNO logo, a red cross symbol, and decorative elements like arrows and dots. The text is in white and pink on a dark purple background.

Spotlight Interrogation; let's get to know a little bit about each other.

This month Spotlight interrogation is dedicated to our NZNO Nurse Manager Committee member– **Batool Chagani**.
Thank you for all your time and effort, in organizing the NZNO Conference with your colleagues (CMHDHB Duty Managers).



- 1. What's your name, what do you do and where do you work?**
My name is Batool Chagani; I am Duty Nurse Manager in Middlemore Hospital
- 2. What would you be doing if you were not working at your current job?**
I would be a volunteer with Red Cross or may become politician
- 3. What's the most important lesson you've learned in the last year?**
"Hard work always pays off"
- 4. What characteristics do you most admire in others?**
Honesty and respect for others
- 5. What qualities in you would you hate to see emulated in your employee?**
Selfishness, I hate selfish people.
- 6. If you were to start a company from scratch, what values would you build it on?**
Equal opportunity for all
- 7. If you were to tell one person "thank you" for helping me become the person I am**

- today, who would it be and what did they do?**
- 8.**
Shamim Chagani, she helped me to become who I am today
- 9. When are you happiest?**
When I am gardening, I love to get my hands in dirt
- 10. What one memory do you most treasure?**
When I became mother, the day my son born
- 11. What would a "perfect day" look like for you?**
When I see people around me happy
- 12. How do you recharge?**
I pray
- 13. What superpower would you like to have?**
Want to be able to take any form of human suffering away.

NZNO NURSE MANAGERS CONFERENCE 2019

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ELLERSLIE EVENT CENTRE, AUCKLAND

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November

NZNO AGM and Conference 2019

17 - 18 September 2019



**Leaving No One
Behind -
Health For All**



Opening address

Jamie Boyd, PhD, Professor, University of Hawai'i –
Expanding Historical Nursing Roles To Include Holistic
Healing Practices In Response To The Health Needs Of
Communities

Holistic Nursing requires that nurses subjectively guide clients / community to integrate self-care practices, self-responsibility and spiritual balance -through reflection -as necessary to design a **Therapeutic Plan of Care** to achieve one's own perceived highest state of well-being, honours the body-mind-spirit wholeness of each person and is associated with Complementary and Alternative (CAM) modalities.

Guest speakers

- **Judge Andrew Becroft, Children's Commissioner** –
Being Child-Centered: Fad or Foundation?

New Zealand has 1,123,000 children- that's 23% of the population.

Love the quote: "When a flower doesn't bloom, you fix the environment in which it grows. Not the flower."

Andrew outlined four challenges:

1. Understanding the impact of "child poverty" – measuring, adverse life outcomes, mortality related to poverty,
2. The pressing need to do better for some tamariki Māori and Pasifika children and young people – education, health and living standards.
3. Understanding the prevalence and effects of neurodevelopmental disabilities - high decile and low decile schools,
4. Being truly "child-centred". What does it mean? Is it fad or foundation? Equal future.

www.occ.org.nz

www.childpoverty.org.nz

- **Dr Sione Vaka, Senior Lecturer, AUT; Nurse Lead Pacific, Counties Manukau District Health Board** –
Pacific Mental Health

Dr Vaka covered his research Background, prevalence of mental illness, accessing mental health services, suicide attempts, self-harm, NZ born Pacific had significant higher prevalence of mental disorder than those born in the islands that migrated to NZ at the age of 18, diversity of Pacific population & focus on Tongan people.

- **Annalyn 'Ulangā, Mercy Hospice** – Hospice Nurses: Vital link in meeting cultural and palliative needs in terminally ill Tongan patients and their families

The challenges are:

1. Not all nurses in the IPU are trained to do genogram symbols and structures which is an important tool in determining family relations
2. There is no consistency of practice for joint consultation with Palliative specialists when they do consultations or family meetings
3. Stereotyping can also be a challenge in dealing with Pacific families especially for 2nd and 3rd generation migrants who are already assimilated into NZ culture.
4. Accommodating and managing large families in the IPU without compromising other cultures and at the same time, meeting safety regulations.
5. Paucity of research and resource information regarding palliative care needs of Pacific people.

As hospice nurses in IPU, have the unique and almost noble opportunity to assist Tongan patients and their families to have good experiences of palliative care and death. Understanding the culture and worldview of Pacific people is paramount in achieving quality care of the terminally ill.

- **Seletute Vave Patterson, Public Health Nurse, Auckland DHB** – Starship Community

Starship Community is a multidisciplinary team of professionals providing nursing, allied health, technical and cultural support to children, young people and their families living within the Auckland DHB area.

Starship Community comprises three localities (Owairaka/Rangitoto/Orakei, Whau and Maungarei) in which geographically grouped nursing hubs (geohubs) work within the local community to provide a whanau-centred range of services across the lifespan of infancy, childhood and youth.

Concurrent sessions

- **Garrick Martin, Auckland DHB** – Health Equity For Rough Sleepers

Street Count 2018 (Auckland)

- ~ 800 living without shelter
- ~ 2,900 people in temporary accommodation
- ~ 1000 in MSD Emergency Housing (> ½ were children)
- Homeless health issues includes: Diabetes, Chronic respiratory disease, Hepatitis, Cardiovascular disease, Arthritis and musculoskeletal problems, Seizure disorders, Skin conditions, Malnutrition & Poor dental care.

The forecast:

More street homelessness and encampment's; Increased challenges to continuity of care due to transience; Increased impact from mass incarceration prison; Increased impact from trauma, substance abuse; Increased need for

CEP approach & Increased need for triage, consult, and inter-agency partnerships, and nursing innovation.

“Have compassion for everyone you meet, even if they don't want it. What seems conceit, bad manners, or cynicism is always a sign of things no ears have heard, no eyes have seen. You do not know what wars are going on down there where the spirit meets the bone”. Miller Williams

- **Kate Calvert, Service Planning & Integration Manager, Strategy Planning & Outcomes Team, Hutt Valley DHB - Anyone For Tennis?**

170,000 people are forecast to have dementia by 2050.

The idea is to provide a forum for people living with dementia and co design the activities that connects social engagement, physical activity, spiritual wellbeing, mental wellbeing.

Hutt Valley's Socialisation Group

- Funding applications submitted for a volunteer buddy pilot, dementia friendly hutt valley, Ageing Well group
- Ageing well group pilot commenced
- Use of day care funding and carer support
- Action – use knowledge of community activities in HV to find three to be dementia friendly, provide a booklet of advice to support families to maintain social activities for PWD
- Cog' cafes with supporters at Mire 10
- Tennis Clubs and golf club awareness raising to support friends with living with dementia

- **Heather Symes, Registered Nurse Te Whare Rangihau, Forensic Community Team Hillmorton Hospital, Christchurch – Mental Health Screening Toolin Canterbury Prisons**

Mental health is a sickness just like diabetes, heart problems, eyes problems, we all need help.

The presentation covered topic Prison populations in NZ and World Wide, Why do we do what we do, how do we do it, Where did the Mental Health Screening Tool come from?, What is it? Why do we have it? Can we do better for prison populations?

Kate covered the prison population in NZ and worldwide. In New Zealand, the age group is 30-39 falls the highest i.e. 30.3%, and 51% are Maori.

NZ has 10,000 prisoners at any one time and the population increase by 70%

NZNO NURSE MANAGERS CONFERENCE 2019



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ELLERSLIE EVENT CENTRE, AUCKLAND

**Thursday 7th and Friday 8th
November**



Change Fatigue: A Constant Leadership Challenge

Katherine Vestal RN, PhD, FAAN, FACHE
Nurse Leader, 2013-10-01, Volume 11, Issue 5, Pages 10-11,

It is common to hear about fatigue in clinicians. Alarm fatigue, compassion fatigue, and work hours fatigue are but a few of the types of fatigue often cited as creating safety risks on a daily basis. All of these added together can set the stage for the need to be vigilant about making changes that will increase safe care and practice. Thus, the potential for change fatigue is bound to be a factor as healthcare races forward into the future.

Every leader in healthcare feels the pressure to change a lot of things fast in order to improve results as quickly as possible. The multidirectional agendas of every department and profession create the possibility of collision points and opportunities for both risk and conflict.

Although there are many examples in every organization of successful change management, there are far more examples of changes that have generated mostly cynicism and frustration, leading to failure to implement and, ultimately, failure to improve results. Frustration and failures in turn tend to burn employees out, leading to a sense of fatigue that pervades the organization. Every meeting and every communication potentially identifies more actions that are needed, so staff avoid the meetings and often do not read the updates that are sent out. Leaders are stymied about how to engage the staff and find support for the changes that are needed. So why does the pressure for continuous change lead to a sense of change fatigue, and how can leaders deal with it?

There are many required changes in the clinical arena that are not optional. If the brand of gloves purchased is changed, it is generally done after careful study, but once the decision is made, it is then generally considered an edict for change of that product. If evidence arises that there are changes needed to reduce errors and risk, it is generally expected that staff will follow new protocols. If a process is improved through a quality or lean initiative, it is expected that implementation will follow. So much of the change proscribed in healthcare is designed for better clinical safety and becomes policy, which will necessitate changes in practice and no choice but to comply.

It is likely that this foundational change that protects safety will receive priority implementation support. However, in order to improve acceptance and meet emerging demands, most organizations are simultaneously initiating changes in the model of care and in professional practice, and reductions in the general cost structure of care delivery. Staff are called upon to constantly alter their work and behaviors, and take on what they consider to be "more work" within the same envelope of time and energy. It is hard for them to understand the priorities of the multiple change

agendas and to balance the expectations of all the providers who converge at the point of care. And by the way, all activities must also reflect what is required to meet patient and family expectations, and support team members at all points of care.

So what practical things can a leader do to ensure that changes move forward, but at the same time, balance the reality of the day-to-day life of a staff nurse?

- First, acknowledge that although change is necessary and at times consuming, it can be hard on the staff who must adapt to the constantly changing expectations. Some will be more hardy to the pressure than others, but in the end, all staff must participate and support the progressive steps being made.
- Be sure as a leader that you have a very accurate picture, not only of the number of changes underway, but also of the magnitude of the changes. Develop your own project planning list or spreadsheet, and list every change activity underway that involves your employees. Be sure to consider the sources of the changes. For example, some of the changes will evolve from corporate activities, others from the organization's direct administration, and still others will be service or unit driven. This list with real time lines and expectations will tell an important story about either the potential for change fatigue or the reality that it has already set in. It is important to note that because clinical service lines often vary in their development or pressures, the imperatives for substantial change can be significantly different unit to unit. That is why some units may experience vastly more change fatigue than others. Can you stage the changes with some variability in timing that will regulate the pace of change for the group?
- The more junior the staff, the more vulnerable the staff are for change fatigue. For those who are still newer learners, such as new graduates or staff newly transferred to a unit, the pressure to perform at a basic level is compromised by the addition of each change agenda. This can be somewhat mitigated by targeting special efforts and support for the staff who appear most overwhelmed. Or in some cases, the units that may appear most overwhelmed may need specific supports.
- Constantly reconsider how to prevent communication overload. The general frustration in organizations regarding staff who do not read or attend to communications has led to a barrage of methods that deliver information. Is it possible to stratify communications into the most critical to read so that staff will at least look at those? Or is it further possible to determine how each staff member would like to receive information? For example, a nurse might easily tell you that they rarely look at e-mail, but always check text messages, so the odds of reaching that nurse are greatly enhanced if priority communications regarding changes could be sent by text.
- Consider the support needed by managers who, not only have to deliver the messages of the mandates for change, but also have to ensure that they are implemented. Because the number and complexity of the changes are so extensive, managers may need a larger pool of expert resources related, not only to change management and change fatigue, but also to the specific requirements of expected changes.

Every leader needs to know what framework he or she will use to manage change and use it consistently and wisely. Change fatigue is a result of the speed of events in healthcare organizations and that is unlikely to slow. In order to deliver tangible results, keep your eye out for indications that the staffs are reaching the limit and need additional support or interventions. Consolidate what you think you see and feel into real data related to the amount and timing of needed changes so that you as a leader can rationally make decisions that will ensure the success of the organization and, at the same time, protect the success of the individuals who deliver the results.



NURSE MANAGERS NEW ZEALAND CONFERENCE 2019
"CHALLENGES OF OUR TIME"
7 & 8 November 2019, Auckland
PROGRAMME (Subject to Change)

DAY 1

0800 - 0830	Registration Tea/Coffee
0830 - 0900	Powhiri (Kaumatua)
0900 – 0915	Welcome – Master of Ceremonies
0915 - 1015	Aroha Haggie <i>Leadership/Government/Funding Hospital Management</i>
1015 - 1030	Morning Tea
1030-1130	Caroline Westerlund (Mental Health) <i>AOK – Act of Kindness (Community)</i>
1130-1200	Nurse Managers NZ Section Annual General Meeting
1200 - 1230	Lunch
1230 - 1315	Jo Friend <i>Different shades of Caring</i>
1315 - 1400	Lucy Scott <i>Helping Emergency Department Nurse Manage and Minimise Burnout</i>
1400 - 1500	Jenny Pooley <i>Information Technology</i>

1500-1530	Afternoon Tea
1530-1600	Moefilifilia Aoelua (RN MH) <i>Pacific Youth follow up (after a suicide attempt presentation in ED)</i>
1600	Day 1 Close
1800	Dinner, Drinks and Entertainment "Celebration of Diversity"

DAY 2

0815 - 0830	Tea/Coffee
0830 - 0845	Master of Ceremonies
0845 - 0945	Dr Jenny Parr <i>Her Role, Nursing Workforce</i>
0945 - 1030	Dianne Barnhill <i>Education and Professional Development</i>
1030 - 1100	MORNING TEA
1100 - 1200	NIGEL LATTA <i>Challenges of our time – Am I ready for the Future?</i>
1200 - 1245	LUNCH
1245 – 1330	Monina Hernandez <i>IQN – International Qualified Nurses</i>
1330- 1430	Lyn Maher <i>Effectively Engaging Consumers and Staff to Understand Experience and Co-design Solution</i>
1430 - 1445	AFTERNOON TEA
1445-1515	Elizabeth Jeff <i>Legal challenges/Use of Social Media</i>
1515 - 1530	Thank You /Closing speech

**NZNO NURSE MANAGERS
CONFERENCE 2019**



**TŌPŪTANGA
TAPUHI**
KAITIAKI Ō AOTEAROA

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**NZNO Nurse Managers
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**Conference
Dinner
Celebration
Of Diversity**

7th Nov 2019, 6PM Onwards

Dance, DJ, Live Band, Multicultural Meetup

Dress Code : Ethnic Wear

Ellerslie Event Centre, Auckland

Up and Coming events

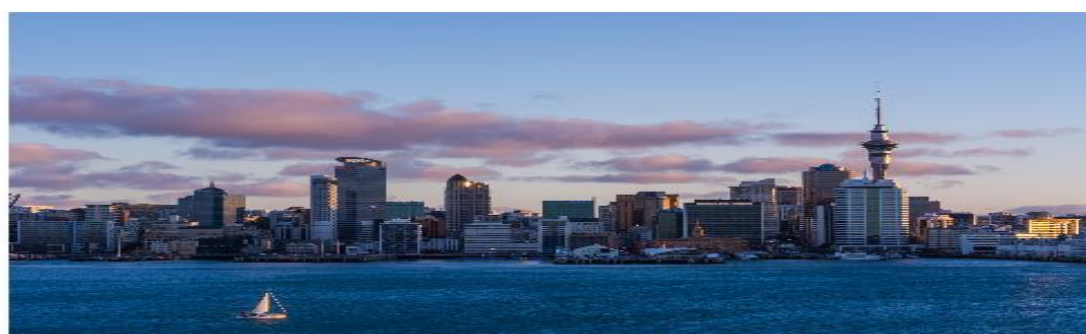
NZNO Meeting, Workshops, Conferences & Symposium

Perinatal Anxiety & Depression Seminar - Whanganui	16/10/2019 8:30 a.m	Central Region
Level 3 Delegate Education - Christchurch - All Sectors	16/10/2019 10:00 a.m	Canterbury Region
46th Annual Conference of the Perioperative Nurses College of NZNO	17/10/2019 8:00 a.m.	Midlands Region
Neonatal Nurses College of Aotearoa Forum	17/10/2019 8:30 a.m.	Wellington Region
New Zealand Lung Cancer Conference 2019	17/10/2019 9:00 a.m.	Canterbury Region
Top of the South Regional Council Planning Meeting	17/10/2019 6:00 p.m.	Top of the South
College of Child and Youth Nurses Symposium	18/10/2019 8:00 a.m.	Hawkes Bay/Te Matau a Maui Region
College of Critical Care Nurses Committee Meeting	18/10/2019 8:00 a.m.	Wellington Region
Level 2 Delegate Education - Hamilton	18/10/2019 9:00 a.m	Midlands Region
34th International Conference on Dental and Oral Health	21/10/2019 9:00 a.m	Overseas
Te Matau a Maui Hawke's Bay Regional Council Meeting	21/10/2019 5:00 p.m.	Hawkes Bay/Te Matau a Maui Region
Level 3 Delegate Education - Auckland - All Sectors	22/10/2019 8:30 a.m.	Auckland Region
Level 4 Delegate Education - Christchurch - All sectors	23/10/2019 10:00 a.m.	Canterbury Region
BOP/Tairāwhiti Regional Council Meetings	23/10/2019 5:30 p.m.	Bay of Plenty/Tairāwhiti Region
Greater Auckland Te Rūnanga Hui	23/10/2019 6:00 p.m	Auckland Region
31st International Conference on Psychiatry and Mental Health	24/10/2019 8:00 a.m.	Overseas
Perinatal Anxiety & Depression Seminar - Taupo	24/10/2019 8:30 a.m.	Bay of Plenty/Tairāwhiti Region
32nd Materials Science and Engineering Conference: Advancement & Innovations	24/10/2019 9:00 a.m.	Overseas

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