

## COASTN, NZNO Chairpersons Report AGM – Hamilton November 2<sup>nd</sup>, 2018.

Once again it has been a steady year for the COASTN national committee following last year's AGM held at Christchurch's successful symposium. The committee welcomed both Amanda Thompson (Hawkes Bay) & Di Fuller (Starship PICU) onto the committee & look forward to working with them. The committee was grateful to Anju Sethi for volunteering the Waikato Flight team to host this year's symposium in the lovely city of Hamilton – we appreciate organising such an undertaking involves a lot of hard work & are grateful to those members who have given their time to make this event happen. Thanks also to management of Waikato ICU in supporting this endeavour.

Flight teams and service providers around the country have been anxiously awaiting the outcome of the MOH Air Ambulance review – and at the time of writing there were still some contracts outstanding. Stage I of this process was primarily concerned with the initial or primary response towards emergencies/medical services, with stage II planned to focus on the Interhospital transfer (IHT) aspect of aeromedical services. Several COASTN members have been involved in this process either representing their individual services, COASTN or both. As with any major change there has been a considerable amount of contention over many aspects of the NZ aeromedical industry – it has certainly highlighted the differences in service provision across the country & may explain why trying to get national standards for flight nurses is such as challenge! For me the bureaucracy surrounding Governmental process (especially when it involves financial procurement matters) has been a real eye-opener – the pages of disclosure required for scrutiny prior to your involvement plus the rules around keeping discussions in confidence (i.e. not being able to discuss matters with those outside the working groups) has proved frustrating at times – members may well have been disappointed & felt uninformed by those of us involved, & for this I apologise, but it was & is unavoidable. Please be assured that the COASTN nursing voice has been heard & appreciated during these discussions.

At the same time MBIE have undertaken a rewrite of NZ Standard 8156. This is the national ambulance standard, which pertains to nurses as there are sections around patient transfer services (both air & road). Ambulance patient care pathways, introduced by ambulance services but driven by MOH, have also been increasingly introduced over the past 2-3 years. These have the ability to significantly impact the workload of some aeromedical teams — particularly in instances such as the STEMI, major trauma & spinal cord injury pathways. These have been instituted without any discussion with the services potentially affected — where a pre-hospital paramedic team may transport a patient that previously would have been retrieved by a flight

team. I would appreciate members checking statistics for their services to see if there is any significant impact or change in workloads.

The industrial issues encountered by nursing across New Zealand this year have proved a challenge to the profession as a whole, and have utilised a huge amount of NZNO resource. The decision to strike taken by NZNO membership provided plenty of discussion within our local service around the definition of "Life preserving" services & how that actually applied to flight services & the rules around rostered staff accessing workplaces. I am aware that some services were busy providing support in transferring patients to alternative treatment facilities prior to industrial action & returning them to DHB-based care facilities post action — most patients approached this people-moving endeavour with a degree of adventure & understanding while supporting nurses in their pay negotiations, & transfer services rose to the challenge of an increased workload over a very concentrated period of time. Well done to those members involved in planning & resourcing services during this period.

There remains much work to be done in the endeavour to attain national standards for flight & transport nurses that will fit all services. The working group has spent a significant amount of time assessing what currently exists within services across New Zealand, as well as across Australasia. Led by Di Fuller this working group arose following a remit put to last year's COASTN AGM detailing the need to strengthen a professional basis for the specialty of flight/transport nursing. Further details around this will be provided in Di's report.

We welcome Tamsin Irvine-Fynn as the new co-ordinator of the annual COASTN flight nurses course. With Di Fuller retiring from the course co-ordinator position (having been the founding co-ordinator) selecting a replacement was not undertaken lightly. The candidates who applied were of a very high calibre & it was pleasing to see the enthusiasm amongst membership for ensuring this course continued to be provided. Interviews for the position were undertaken by the Chair, Vice Chair & PNA. Tamsin has been working with Di to learn what is involved in providing this course, including external relationships such as the MOU that exists with AUT.

Finally I wish to thank all of you for the work you do across New Zealand – flight & transport nursing is a unique specialty that provides us as nurses a huge variety of practice experiences & challenges. While it is most definitely not as glamourous as some outsiders may think (the gale force winds I flew in last week with the vomiting patient & other motion-sick crew members springs to mind...) I am still pleasantly surprised by the opportunities for ingenuity, innovation & independent practice our specialty involves.

Toni Johnston
COASTN committee chair.