

College of Gerontology Nursing Member Newsletter, April 2025



We hope you will enjoy this new publication to keep you in the loop with the going on in the committee with work projects, education, and news from around the country—in little snippets for you to share with your teams. Share it, print it for your tea rooms, let us know if you have anything we can include it to share. *It's for everyone.*

From the Chairperson...

Haere Mai, Welcome to Our New Newsletter

Welcome to Autumn, the changing season and the increased likelihood of the usual viruses, cough, colds, covid etc.

Our last committee meeting in February was very busy with finalizing details of our conference, tidying up the draft new Knowledge and Skills framework for RN's working with older adults and linking with those who had expressed an interest in helping the committee with submissions, conference and other areas of development.

NZNO's Age safe campaign is slowly building up steam with surveys, interviews and capturing areas where staffing is unsafe for either residents or staff. We would encourage you to be part of this valuable piece of work that will inform strategy and NZNO policy going forward. (A QR code is attached within the newsletter for you to go directly to the information.)

Regan and I attended the College and Sections leaders workshops and heard all of the amazing work that is being done across the other Colleges. The one comment that resonated for me in feedback of our presentation was the sudden acknowledgement that nursing older adults doesn't just happen in aged care facilities. After all, 80% of the inpatients in Te Whatu Ora at any one time are over the age of 65 years, likewise for those nursing in the community/home care services etc.

We are looking forward to meeting you all at our Conference and BGM, happening 19th and 20th May at Waipuna conference centre, Auckland. The closing for early bird registration is coming up very soon. Don't miss out, its always a great opportunity to connect with others across the country working with older adults and learning more about what we could do differently. It is also an acknowledgement of the hard work that is happening and giving us all a moment or two to reflect on what we as individual nurses, students and caregivers achieve every day.

NEWSFLASH

NZNO leadership have been reviewing the constitution of our union organization. This is a very important document and a Special General Meeting was held earlier in April and resolution passed to go to all Members to vote on adopting or not. There will be some webinars being held in the next week or 2 – it is highly recommended that you join to hear the changes and why - so that you can be informed to vote. Just like a general election if you don't vote you can't complain about the outcome.

Bridget Richards, Chairperson

Your committee now consists of

Bridget Richards—Chair

Anna Carey—Treasurer

Gayleen Watkins—Secretary, Membership

Aloha Sison—Committee Member, Social Media

Christy Reedy—Committee Member

Sarah McIntosh—Committee Member

Regan Gilchrist, *Committee Member, Newsletter*

Marg Bigsby—Professional Nursing Advisor, NZNO

We last met in February in person and next will meet at our Conference and BGM—we hope to see you there!

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Jill Woodward—Master of Ceremonies

Jill is CEO of Elizabeth Knox Home & Hospital, Auckland New Zealand. For the past 28 years she has held a variety of management roles across the health environment including surgical services management and CEO Waipuna Hospice. Since 2008 has been CEO of Elizabeth Knox Home and Hospital where she has been responsible for the redevelopment of the site and for introducing the Eden Alternative. Jill is a Registered Nurse whose qualifications include a Master of Arts (Applied) in Nursing and Midwifery, Bachelor of Arts (Social Sciences) and in 2009 she completed Eden Alternative training in Australia and is an Eden Alternative Trainer and Board Member.

Jill is an energetic advocate for the Eden Alternative, culture change and superb and enabling care environments.



Professor Victoria Traynor

In 2024, Victoria commenced her role as Professor of Healthy Ageing at the University of the Sunshine Coast and Professor of Dementia at Warrigal. Victoria is the Founding Director of Aged and Dementia Health Education Research (ADHERe). ADHERe is a centre for interdisciplinary researchers which uses knowledge translation interventions to promote the health and well-being of older people.

Victoria is also the Co-Founding President of the Gerontological Alliance of Nurses Australia (GANA) and an Advisory Council member for the Aged Care Quality and Safety Commission.



Fiona Bentley

Fiona Bentley is a Registered Nurse and Clinical Solutions Specialist for Smith + Nephew.

Fiona, a Clinical Solution Specialist at Smith & Nephew, has spent seven years educating healthcare professionals on wound care management, following her experience in an ICU setting. Join her to learn how to enhance your team's ability to distinguish between incontinence-associated dermatitis (IAD) and pressure injuries, helping to better support your community.



Carolyn Cooper

As Aged Care Commissioner for nearly 3 years, Carolyn provides strategic oversight of health and disability services for older people in all care settings. In addition to being a statutory decision maker on complaints about care provided to older people, she advocates for older people's rights to health quality and disability services to support them to age well. Carolyn's 40-year career spans public private sector governance, executive and clinical leaderships roles across New Zealand and Australia. She is passionate about ensuring older people have a great quality of care and quality of life.



Sasha Drennan

Sasha Drennan began her nursing journey at the end of the last century. She has had multiple roles from theatre to district nursing. Since moving to New Zealand she has worked in both the tertiary and primary health setting. Presently she is a Clinical nurse manager for a team of district nurses and the vice Chair of the New Zealand wound care society Sasha has recently completed a master's with a specialisation in digital health aiding in the development of her passion for education and equitable access.

Sasha has approximately 378 pairs of shoes and lives with her family and her dog Bailey.



Dr Makarena Dudley

Dr Makarena Dudley, (Te Rarawa, Ngāti Kahu), is a Clinical Neuropsychologist and Senior Lecturer in the School of Psychology and Deputy Director Māori for the Centre for Brain Research at the University of Auckland.

In 2025, Makarena was appointed a Member of the New Zealand Order of Merit for services to people with dementia, particularly Māori. She has developed a screening tool for detecting dementia mate wareware in Māori (MANA: Māori Assessment of Neuropsychological Abilities), developed a mate wareware website and app and has led the adaptation of the Cognitive Stimulation Training (CST) programme to be culturally appropriate for Māori. Makarena has developed a theory of dementia mate wareware from a Māori worldview.

Makarena is currently leading a nation-wide mate wareware prevalence study with Māori.



Debbie Handisides

Debbie is an Enrolled Nurse with a Level 5 Diploma and 20 years practice specialising in rehabilitation in the Burwood Spinal unit. With a passion for enhancing the quality of life for all patients from the age of 14 years to 90+ years.

Debbie has a deep commitment to improve healthcare, nursing the over 65 year old patients, she feels she has a deep understanding of the unique needs and challenges faced by our older patients.

Debbie is committed to advocating for best practices for our patients and ensure they receive dignity, respect, Comfort and individual care.



Simon Latimer

Simon is an OPCAT Principal Inspector at the Office of the Ombudsman, focussing on health and disability places of detention, including aged care facilities. He previously held roles as a Senior Advisor for Disability Rights under the UNCRPD, and as a Senior Investigator at the Health and Disability Commissioner's Office.



Patumahoe Leaf-Wright

Patumahoe Leaf-Wright is a decendant of Te Arawa, Ngāti Raukawa, Ngāti Kahungunu with English and Scottish ancestry.

Their substantive role is the Nurse Co-Ordinator for Cultural Support within the Professional Development Unit at Health New Zealand Te Whatu Ora Waikato.

They also teach at Te Huataki Waiora, University of Waikato in the nursing program.

Passionate about the cultural concepts of care, Patumahoe contributed to embedding mātauranga Māori into the reviewed Frailty Care Guides published by Te Tāhu Hauora Health Quality and Safety Commission.

Kerri Nuku

Kerri is a Registered Nurse and Midwife by background working across primary, community and hospital-based nursing, she is currently the Kaiwhakahaere at Tōpūtanga Tapuhi Kaitiaki o Aotearoa — New Zealand Nurses Organisation. Kerri is member of the International Council of Nurses, Audit and Risk Committee, Co-chair of the Iwi Maori Partnership Board for Te Aka Whai Ora. Honorary Member of Tōpūtanga Tapuhi Kaitiaki o Aotearoa, New Zealand Nurses Organisation.

Kerri is a well-respected international Indigenous nursing leader who has been representing Aotearoa on a global stage at a range of international for a for decades. She has strong indigenous networks and is a skilled strategist and thinker and strong advocate for human rights, Indigenous rights, women, and Workers' Rights.

Kerri has led numerous legal challenges specifically pay parity for the workforce, lead applicant for the Kaupapa Health Services enquiry, Mana Wahine claims and Oranga Tamariki – child uplift, a collaborator in the United Nations Universal Periodic Review, the Covenant on Economic, Social and Cultural Rights, shadow report and the Committee for the Elimination of Racial Discrimination.

An advocate and published researcher, her national and international accomplishments have seen her present interventions at the United Nations

Permanent Forum on Indigenous Issues at the United Nations in New York, protecting freedoms and right of Indigenous peoples.

Kerri is a recipient of the prestigious" International Human Rights and Nursing Award" from the University of Exter UK and recognised in 100 Maori Leaders.





Professor Matthew Parsons

Matthew holds the position of clinical chair in gerontology, a joint appointment between Health New Zealand (Te Whatu Ora) and the University of Waikato. Matthew works across health and specialist services in the midlands as well as commissioning in the South Island. He also works with Spark Health, as the digital clinical lead, specialising in older people and community health. Matthew has spent the last three decades researching and implementing new health services to improve the lives of older people and people with disabilities.



Michelle Prattley

Chairperson, National Enrolled Nurse Section NZNO

Michelle originally from the UK, now lives in Christchurch. Married with two children and graduated from Ara Te Pukinga in 2015 with the Diploma in Enrolled Nursing. Michelle is the chairperson for both the National Enrolled Nurse Section and the Canterbury Enrolled Nurse Section, Michelle is also a workplace Delegate and a member of the NZNO Canterbury Regional Council. Michelle was also on the design team with NCNZ for the review of the Scope of Practice. Michelle works in the Spinal Unit at Burwood Hospital.

#THENURSEWENEED

PNA Piece: Meeting Professional Practice Obligations

All employees or a volunteers who provide age-related residential care for older people are required to meet minimum standards of care – for example Nga Paerewa Health and disability services standard NZS 8134:2021 as well as the Code of health and disability services consumer rights

Members working in regulated roles (for example EN, RN, NP) have specific obligations to provide care that meets the Standards of Competence for their scope of practice, as well as the Code of Conduct for Nurses (NCNZ 2012)

Members working in unregulated roles (health care assistants, care givers, Kaiawhina) usually have obligations outlined in their job description and their employer's Code of Conduct.

What this means is that everyone should make every effort to meet the health and wellbeing needs of the residents in their care. Where this does not happen, there are steps that can be taken to raise concerns to others in the team who share responsibility to help. There can be many causes for the health and wellbeing needs not being met: including unplanned sick leave leaving the staff roster short; resource scarcity; the health status of an older person quickly deteriorating so that they require more care; etc.

Your workplace should have a system for bringing the situation to the attention of your manager or senior colleague, and documenting it (often called making an incident report). This is so that you can receive the help that you need in the moment. And also so that the situation can be reviewed afterwards so that any causes can be identified and addressed, to make it less likely that the same situation occurs again. Managers or nurses in ARC may also make Section 31 reports

For ENs and RNs, the <u>Code of Conduct for Nurses</u> carries the additional obligation of escalating concerns. Standard 8.4 requires nurses to:

8.4 Document and report your concerns if you believe the practice environment is compromising the health and safety of health consumers (see Guidance: escalating concerns). (page 38)

And the **Guidance**: escalating concerns reminds nurses that:

You have an ethical obligation to raise concerns about issues, wrongdoing or risks you may have witnessed, observed or been made aware of within the practice setting that could endanger health consumers or others. Put the interests of health consumers first.

If you are unsure, seek advice from a senior colleague or professional organisation.

Raise your concerns with colleagues or other members of the team if they are contributing to your concerns.

Formally raise your concerns with your manager or a senior person within your employment situation. Escalate your concerns to a higher level within your employing organisation if the issue is not resolved.

If your efforts to resolve the situation within the workplace continue to be unsatisfactory, escalate your concerns to another body, e.g. Ministry of Health, Health and Disability Commissioner, Nursing Council or other health professional regulatory authority. (page 41)

As Nursing Council says, nurses have a professional obligation to escalate "concerns about issues, wrongdoing or risks... that could endanger health consumers or others", and to "formally raise your concerns with your manager or a senior person within your employment situation".

Marg Bigsby NZNO Professional Nursing Advisor margaret.bigsby@nzno.org.nz

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PNA Piece Continued: Indemnity Insurance

All NZNO membership categories except for those in the 'other' category (students who are not working in the health sector, and those retired from nursing but wishing to retain membership) include eligibility for NZNO's Professional Indemnity Insurance. NZNO has a fact sheet about this (see: https://www.nzno.org.nz/membership/indemnity insurance). One question often asked is:

My employer/training provider has indemnity insurance – how does that work for me?

"It is your responsibility to compare and review the indemnity insurance policy of your employer or training provider to indemnity insurance provided through NZNO.

However, we strongly recommend you have your own indemnity insurance through NZNO as there is the potential for conflict of interests for both parties should a claim arise and you are only covered by your employer's indemnity insurance."

Crucially, members need to be a NZNO member at the time of a workplace incident in order to be covered by NZNO's Professional Indemnity Insurance policy.

Members can call NZNO's toll free number 0800 28 38 48 during business hours or email nurses@nzno.org.nz anytime, to access advice about meeting professional obligations or eligibility for NZNO's professional indemnity insurance.

Thank you for the vitally important work that you do in caring for older people/kaumatua.

Marg Bigsby NZNO Professional Nursing Advisor.

Committee Member Introduction



Christy Reedy

Christy works as an Enrolled Nurse in Christchurch, caring for older people with long term needs. Christy is passionate about delivering care to this population.

College Submission: COVID Inquiry

Recently the COGN participated in the recent COVID enquiry to share some of our experiences related to the Covid-19 pandemic. The following points were raised on behalf of our membership:

- The lack of vaccines
- The use of masks and full PPE had a devastating impact on those with cognitive, hearing
 and visual impairments. Suggestion that there should be some consideration on how to
 maintain staff safety yet allow those with sensory and cognitive impairments not be so
 isolated.
- Antiviral medications did help however the question was raised by the College why they
 were not funded for those with other viral illnesses and expressed we struggle to understand the stance of some ARC providers where there can be residents with coughs, colds,
 flu all congregated together however the minute of a positive RAT test there would be a
 lockdown situation and N95 masks implementation. The College have recommended a
 standing group that includes ARC providers, IPC specialists and College of Gerontology
 Nursing input to provide pragmatic guidance.
- Once vaccines become available, many providers lost staff due to vaccinator programmes by Health NZ.
- Standing down of staff had a huge impact on skill mix, well trained staff and delivery of high quality care.
- Mask mandates abused, such as in Primary Care—little evidence needed for exemptions.
- Staffing resource during the lockdowns was very difficult to a variety of reasons.
- Secondment of Health NZ staff presented challenges, with staff either not wanting to be there or reports of being highly critical to staff on the floor, although some reports of those who found a new respect for aged care.
- End of life care was traumatic, and proved difficult with visitation rules, and caused ongoing trauma for some families.
- Technological advances which were helpful,. Such as E-scripts for GPs and NPs, including
 controlled drugs have made this easier in primary care. Other helpful advances include
 changes to cremation regulations would not have occurred without the reduction in available staff; staff within aged care connecting with families via Zoom; and telehealth ward
 rounds so GPs and NPs could see residents without visiting, however did highlight issues
 with clinical assessment.
- Impact of staff reductions have become the 'new normal' and several providers running very low staffing numbers which are not suitable to provide care. The current mandates are not fit for purpose with the increased acuity and dependency of residents within aged care. We have seen these changes in interRAI data.

College Submission: Putting Patients First

Recently the College has also contributed to the Ministry of Health consultation on the following document: Putting Patients First: Modernizing health workforce regulation.

This document can be found here: Putting Patients First: Modernising health workforce regulation | Ministry of Health NZ

Putting Patients First: Modernising health workforce regulation

The following feedback was provided on behalf of the College:

- The College had felt that ambulance officers and paramedics should be subject to regulation, and we discussed the dynamic we can sometimes see with ambulance staff and registered nurses in aged residential care with transfer of residents
- There should be methods of consultation with professionals in the relevant area when regulators are focusing on patient needs
- We felt that regulators need the skills to listen to all sides when making decisions, and learning from harm and adverse events when ensuring patients voices are heard.
- We felt that regulators should focus solely on ensuring the most qualified person is caring for the patient, rather than focusing on factors beyond clinical safety.
- We felt that Government should not be able to challenge a Regulator's decision as they
 are the specialist voice of that profession, therefore independence is essential.
- he College felt it was important that health professionals are regulated by separate regulators, rather than a combined model due to the fact that the Regulator understands the profession and expectations of contemporary practice.
- we did not feel there needed to be additional regulatory options in addition to the current registration system
- The College did not support a single tribunal for registration from overseas clinicians. We
 felt that a single system would slow this down, and there are already measures in place
 (such as the OCSE system for nursing). A single tribunal could not do this for all professions due to excess cost and resourcing.
- The College ad felt the process for competency assessments did not need to be streamlined further due to the considerable changes Nursing Council has made to the process, and the use of OCSEs mean they are streamlined. It was felt individuals who aredoing this are completing the minimum requirements for clinical safety and quality of care.
- The College opposed any additional pathways for people to work in New Zealand, as we
 felt they need the minimum clearance from the regulator in interests of clinical safety.
- The College felt that regulators do not need to consider how their decisions impact availability of services and the wider healthcare system, due to the fact they do not decide this.
 Instead they ensure people have the qualifications and expertise to provide safe care, and have no role in deciding access or availability.

Membership

The College currently has 577 member across Aotearoa.

Remind your colleagues that as an NZNO Member they can join up to three Sections, and we would love for more membership in our College!



Social Media

The College now has an active presence on social media which includes Facebook and LinkedIn. the activity of the College.

Facebook:

https://www.facebook.com/profile.php? id=100063928788474&mibextid=ZbWKwL





Click the below link to Join:





Full COGN Committee

From L-R: Bridget Richards (Chair), Anna Carey, Regan Gilchrist, Gayleen Watkins, Sarah McIntosh, Aloha Sison, Christy Reedy, Marg Bigsby (PNA)

From May, Regan will take over the Secretary role, and Aloha will take over the Treasurer role. We thank both Anna and Gayleen for their service to the College.

Committee Farewell: Gayleen Watkins, Secretary



Our 2025 Conference will signal the end of my involvement on the Gerontology Committee, and it is time to reflect on how the years have treated me

4 words provide the bookends to my 8 years on the Committee (yes it should have been only 6 but various circumstances conspired to see me putting in the extra 2 years) – those words are "Knowledge and Skills Framework". On my first meeting in 2017 we began the overhaul of that document and now, in 2025, we are presenting the new version.

I came onto the Committee when a call was put out for South Island nominees – I had been active on the Otago committee for a few years by then and the Chairperson, the late Janice Bridgman, signed a nomination form and handed it to me. After less than 2 years I assumed the

role of Secretary when the then Secretary, Bridget Richards, stepped up to the Chairperson role – I have remained there ever since.

The last 8 years have not been without challenges – eg: try taking accurate minutes when facing 7 other faces on a computer screen as the meeting was held via Zoom, Conferences were postponed twice because of Covid – but there have been many proud moments as well (eg: the Committee's voice on a number of health submissions, being actively heard with many of the health issues facing the Gerontology sector in NZ, being involved with a number of Conferences which have "dared to talk about many topics which were often not mentioned" and achieving College status)

Committee Farewell: Anna Carey, Treasurer

As I prepare to step down from my position as a committee member the College of Gerontology this May, I find myself reflecting on the incredible journey since I joined in November 2018. Serving as the treasurer since 2021, my term has now come to an end, and it is with a mix of gratitude and nostalgia that I bid farewell.

My tenure with the College has been rewarding. I have had the privilege of engaging with numerous leaders in the field of gerontology, whose passion and dedication have been truly inspiring. Among the highlights of my tenure were the two conferences we organized, which provided invaluable opportunities for learning and networking. Additionally, the development and updating of the knowledge and skills framework stands out as a significant achievement that I am proud to have contributed to.



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Serving on the committee has been an invaluable experience. It has enriched my understanding and skills, which have been beneficial in my various roles throughout my time here. It has also been a pleasure to share my knowledge and skills while on the committee, and I am grateful for the opportunity to positively contribute to the work of the College.

I will miss being part of this dedicated team and the collaborative spirit that drives the Colleges mission forward.

To my fellow committee members, both past and present, thank you for your support and camaraderie over the years. I look forward to seeing the continued growth and success of the College.

2025 Conference





3RD BIENNIAL CONFERENCE 2025

THE SILVER TSUNAMI: SURFING THE WAVES OF AGEING

WWW.GERONTOLOGYNURSING.ORG.NZ

19-20 MAY 2025 WAIPUNA HOTEL AUCKLAND



The Committee has been busy preparing and organising all things Conference. The theme for this conference, is "The Silver Tsunami: Surfing the Waves of Ageing".

This reflects the challenges and opportunities of an aging population and workforce in the health and social sector.

The conference aims to showcase the latest research, best practice and innovations in gerontology nursing across all settings and disciplines.

We are pleased to be able to confirm date and venue for this conference, as well as confirmation of our keynote speaker, Victoria Traynor (pictured)

We are still promoting registrations for conference and would welcome anyone further to join us in Tamaki
Makaurau!

We have confirmed the Waipuna Hotel in Auckland, across two busy days of 19th and 20th May, 2025.

We are still finalising the run of speakers, so if you have any suggestions, please contact us!

Updates on the conference will be posted across social media, as well on our website:

http://www.gerontologynursing.org.nz/





We hope you have enjoyed reading this edition of our Newsletter. We look forward to connecting with you all, and hearing from you throughout the year. Till next time, take care and thank you all for the hard mahi you all to do to support our older people.

Bridget on behalf the COGN Committee

Send feedback, ideas for stories etc to:
Regan Gilchrist, Committee Member at nznogerontology@gmail.com