The evolution of Enrolled Nurses

also in this issue:
Aged Care Can’t Wait
Nursing Registrations
Supporting our Future Nurses
We’re there for you!

**AS WE CONTINUE TO GROW OUR MEMBERSHIP, WE NEED TO REVIEW HOW TO IMPROVE OUR SERVICES TO MEMBERS.**

We are currently in the process of reviewing our information resources (telephone, emails, website) to ensure that we provide our members with a high quality service. We aim to provide not only accurate and up to date information but be responsive to all of our members who contact us. Therefore, we are looking at new benchmarks including a maximum response time within 24 hours of your first contact.

To ensure you receive a timely, accurate response to your questions, all calls statewide will now be firstly triaged by the ANF Info Line. This includes direct calls to Organisers, as it is important to ensure we track all calls on our database for legal recording, quality and consistent member advice.

We also plan to get regular feedback from members who use these services to ensure we are providing the quality service that we say we are and that you require. We would also like to better encapsulate your issues and concerns and use this information to improve nursing in Tasmania – collating useful data which we can then use with effect to campaign with and identify frequent Q and A for our website.

Internally, we are also looking at developing our training and support systems, staffing levels and quality monitoring systems.

The ANF Info Officers are the most appropriate people to answer your queries as they have all the resources at their fingertips. Please assist this new system by ensuring your calls are directed to the freecall number 1800 001 241 (for those members outside the Hobart area), or 6223 6777 within Hobart. If you ring an Organiser, you will be diverted to Info to ensure required database tracking.

ANF Info Officers are looking forward to the change and consider it will greatly enhance our service to members.

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Community Mental Health

Community Mental Health clinics in Devonport and Burnie are working with only 50% staffing capacity. Nursing positions are filled more adequately than allied health positions, which places case management nurses under an incredible workload. This in turn has a domino effect onto the CAT team. ANF members have lodged a grievance which ANF is addressing with Management. Waiting lists and cancellation of outreach clinics has already occurred, with further possible extensions of this.

Services are not able to be delivered as per the ‘Recovery Model’ of care under the Mental Health Services Strategic Plan. Members also requested the Focus of Care Scoring System (FoCSS) to continue to be utilised and accepted as a valid tool to monitor case load, until such time an alternate tool is provided by MHS Management. ANF has written to Management and awaits a response from MHS.

Strathdevon

A visit was made to Strathdevon to develop a Log of Claims for the upcoming Uniting Aged Care EA. Members and non members also received education about National Registration and the requirements for CPD. Positive feedback regarding the presentation and CPD Portfolio was received with many purchasing the Portfolio. Please contact ANF if you have not purchased one but are still interested.

Practice Nurses Campaign

THE ANF IS CAMPAIGNING TO IMPROVE THE WAGES AND WORKING CONDITIONS OF PRACTICE NURSES EMPLOYED IN MEDICAL CENTRES AND CLINICS.

This campaign is seeking to engage with employers in an effort to convince them to reach Enterprise Bargaining Agreements with their practice nurses that will:

- provide fair wages and reasonable conditions of employment
- introduce a new classification and career path that rewards increased responsibilities
- provide support for Practice Nurse education and professional development.

ANF would also like nurses working within the General Practice setting to participate in a survey associated with the campaign. The survey and updates can be found on the ANF Federal website, anf.org.au (under ANF Hot Topics).

If any Practice Nurses would like to participate as an advocate for the campaign, please contact the ANF Info Line.
Aged Care

Aminya Hostel (Scottsdale) JCC is meeting monthly to facilitate a smooth transition to change of business ownership to Presbyterian Homes. There has been strong involvement from member Linda Noonan who has disseminated information to other members at Aminya.

Due to the number of EAs currently being negotiated, membership meetings have been held at Tyler Village, UACVT, Presbyterian Care and SCCT sites. The membership meetings will continue until EAs are completed to allow for member feedback and input into the process.

Worksite visits to other sites are planned for the remainder of the year. Watch your notice board for worksite visit dates.

LGH DEM

Support and Hospital aide staff are now on-board due to AMU funding. A membership meeting was held in June to advise members of this, discuss ongoing issues and to encourage them to put in documentation in regards to shift reports, EIMs, and workload or staffing issues. Members report that skill mix can be a problem with sick leave impacting on workload. ANF has sent suggestions for improved outcomes to Management regarding education on the EIMs process and policy for after hours staff call in, to ensure staff on the floor are not taken away from core roles of patient care.

LGH Capital Works

Work on LGH redevelopment is steadily progressing with the opening of the new neonatal unit on 28 June. Stage Two of the car park has now commenced and is due for completion late 2012.

Mental Health

ANF has met with Mental Health Services North (MHSN) and the statewide EDON of Mental Health Services (MHS) to discuss how to accurately benchmark HDU nursing hours on Northside.

ANF and members believe that the nursing hours used must be a true reflection of the nursing hours actually provided to these patients and, if they are not, a loss of positions will occur through the benchmarking process. ANF and members are determined to ensure safe staffing levels are maintained and patient care is not compromised.

The HDU is a secure, and therefore isolated area of Northside. The nurse(s) allocated to the HDU are not permitted to leave the area unless relieved by another nurse. Sometimes only one patient may be present at a time in the HDU, however, that still requires one nurse at minimum to be present in HDU the whole time any patient is there. That nurse cannot take on a further patient load nor assist the remaining staff on the ward if required.

It has been agreed that six months’ worth of HDU data is required as is data around overtime, double shifts, sick leave, casual usage etc. ANF awaits all data to be presented so it can be examined and discussed with members. Another meeting will be held in August.

Are you on track for an ideal work/lifestyle balance?

Are you looking for nursing work on a casual basis, or looking for extra shifts and income? Or are you easing back from a full-time workload to a flexible lifestyle balance?

NurseLine is committed to finding you the perfect nursing balance.

Our caring approach and local knowledge will provide you with flexible nursing opportunities. By staying in touch, NurseLine can arrange shifts to fit in with your lifestyle and help you stay in your chosen profession.

Join the preferred supplier of nurses today and find out about great pay rates. For more information call Miren Echaburu on (03) 6224 6333 or Ruth Lawson on (03) 6331 0800 or call 1800 688 180 (24 hours/7 days a week).

www.nurseline.com.au

NURSELine

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Southern News

CHCT
As part of the NWCC, a commitment has been made to address workloads within the hospital. The NWCC developed a survey which was distributed to all members in July regarding the use of the Work Hours Tool. The information gained from that survey will be crucial in order to move forward with the Work Hours Tool and to determine the understanding and education level of all staff in regards to work hours. The results for the survey will be made available to staff once collated.

If there are any workload concerns which you feel need to be addressed, please contact your ANF Rep or the ANF Information Line.

Hobart Day Surgery
Negotiations continue for the EA.

Vaucluse Gardens
At the time of writing, the Vaucluse Gardens Nurses’ Enterprise Agreement negotiations have been finalised and it is hoped that the new Agreement will go to ballot.

Royal District Nursing Service (RDNS)
The proposed Agreement was rejected by members at ballot. Because of problems with mail reaching the mainland due to the ash cloud, RDNS Management has decided to re-ballot the Agreement as several votes were not received until after the close of voting. ANF wishes to encourage all members to participate in the ballot process so that their voice can be heard.

Corumbene
At the time of writing, ANF has requested a meeting with Corumbene Management to discuss the final wording of both proposed Agreements. ANF will update members as more information becomes available. It is hoped that final drafting will be completed soon, which will allow both agreements to go to ballot.

RHH

EMPLOYEE COST CONTROLS
The Acting CEO, Jane Holden tabled a paper titled Employee Cost Controls at a STAHS JUMIC meeting.

The purpose was to seek Union support for possible reduction in expenditure that does not impact on patient care. ANF advised that they could not support anything that would breach current terms and conditions included in industrial instruments. For example, the paper tabled included Higher Duties and More Responsible Duties as below;

For periods of leave less than two weeks staff should not be directed or required to undertake higher or more responsible duties. All such arrangements must be pre-approved prior to an individual being asked to work higher or additional duties.

Please check your Award entitlements or contact the ANF Information Officer if you have any concerns related to this allowance.
Once again we are at the crossroads of defining scope of practice. Who remembers trained auxiliary nurses? What was their scope of practice?

Over the years, it’s not only the nursing profession that has struggled with what is one’s scope of practice? We are taught to be professionals and lateral thinkers and yet we like to put parameters around ourselves.

There are many definitions of scope of practice and what ENs can and can’t do throughout the nation. I have worked with ENs that can suture, put in IVs and set up entire Theatres in the middle of nowhere. They have been trained sufficiently, but where is the consistency from a post graduate point of view? What do we offer our Nurses beyond their initial qualifications, and when we do offer courses how much of it is regional, hospital, community based?

A colleague evaluated Enrolled Nurses Medication Endorsement in depth in 2006, when the Federal Government was pushing for ENs to go back to Hospital Training. There are a number of her findings outlined below that we should revisit and remind ourselves not to go full circle.

Over the last decade there has been, and is continuing to be, a considerable amount of work done to determine and define the roles and scopes of practice of the various levels of nurses in Australia (Australian Nursing and Midwifery Council, 2002; Australian Nursing and Midwifery Council, 2007). These reports and studies have identified a number of issues related to Enrolled Nurse practice in Australia including:

- The role diversity of Enrolled Nurses and the wide range of practice settings in which Enrolled Nurses work.
- The variations in scope of practice between Australian states and territories, metropolitan and regional areas, rural and remote settings and between employing agencies (Australian Nursing Federation, 2005; Gibson and Heartfield, 2005; Heartfield and Gibson, 2005; Milson-Hawke and Higgins, 2003).
- The variation in legislative and regulatory guidelines, organisational policies and educational preparation for Enrolled Nurses.
- Within the nursing profession there is increasing pressure from Enrolled Nurses to increase, expand or advance their scope of practice (Australian Nursing Federation, 2005; Gibson and Heartfield, 2003; Heath, 2002; Kimberley et al, 2004; Milson-Hawke and Higgins, 2003; Milson-Hawke and Higgins, 2004) as well as workplace pressures for Enrolled Nurses to expand their roles.
- Variable policies and guidelines, and differences in interpretation and application of policies and guidelines, create practice issues related to delegating nursing care and supervising delegated work that are a major factor in the disparity of Enrolled Nurse scope of practice in Australia (Gibson and Heartfield, 2003; Gibson and Heartfield, 2005; Heartfield and Gibson, 2005; Kimberley et al, 2004; Milson-Hawke and Higgins, 2003; Milson-Hawke and Higgins, 2004).

Enrolled Nurses are also reported at times to be placed in untenable situations where they are required to work outside their scope of practice to meet the immediate patient needs because there is no one else to do the work, to maintain a harmonious workplace or because they feel too uncomfortable or intimidated to decline the delegated work (Beryl McEwan 2006).

Where is Tasmania in the scheme of things?

At the time of writing, the DHHS is awaiting their Policy, which was endorsed by Nursing and Midwifery Executive in March 2011, and is now with the DHHS Policy Assessment Committee for endorsement and communication throughout the Department.

At the time of writing, it was expected that the Policy would be available for implementation in the near future.

And where is the Private Sector in all this? Well that’s a whole lot of research and another article.
Delivering More Holistic Care

MARY GREY IS AN ENROLLED NURSE AT SMITHTON HOSPITAL WHICH IS AN ACUTE DISTRICT HOSPITAL WITH AN EMERGENCY DEPARTMENT. PALLIATIVE PATIENTS ARE ALSO NURSED HERE AND THIS IS MARY’S AREA OF GREATEST EXPERTISE.

Mary completed her EN training in 1990 in NSW, followed by many years in large hospitals where she developed her interest and experience in palliative care. This experience, along with her caring nature and level of maturity, combine to ensure the care Mary delivers is compassionate and of a high standard.

Mary had enrolled to pursue registered nursing at Charles Sturt University but personal circumstances changed and she returned to Tasmania 8 years ago. Smithton Hospital is a different scene to the large facilities and systems that she had worked in and she enjoys the close sense of community. There are usually 1-2 Enrolled Nurses rostered with 1-4 Registered Nurses dependant on patient load, spread of shifts and skill mix.

When Mary returned she undertook Medication Management Endorsement. She sees this as pivotal to the role of the Enrolled Nurse, allowing them to deliver more holistic care. Mary would like to continue this trend of upgrading by undertaking an IV Management Endorsement. This will avoid the frustrations that Enrolled Nurses can face when not being able to deliver all the care to their patient who may have IV therapy or medications. She is thankful the team she works with is exceptional and Registered Nurses are readily available to assist with these roles.

A Day in the Life of an Enrolled Nurse - Donna Richardson

Donna Richardson
Care Coordinator, Glenara Lakes

AS WITH ALL AGED CARE STAFF, RESIDENTS HEALTH AND CONTENTMENT ARE OUR PRIORITY AND WE MUST NOT LOSE SIGHT OF THIS.

My role as Care Coordinator at Glenara Lakes is to implement, coordinate and submit our ACFI’s, identify when a resident’s care needs have changed, and to implement the paper work required to reassess the resident. This is a challenging role as ACFI is our main funding tool and we need to get it right to maximise our income.

Continuous Improvement is another area we are all responsible for. Another aspect of my day is to collect relevant data. As part of a team we analyse these findings and I prepare this data for submission to be benchmarked against other relevant figures.

Family members will call into my office and wish to discuss their loved one’s care. It is important to give them time to express their thoughts, but as this can be spontaneous it can take unexpected time away from other things I had planned.

And not to forget that at any given time I may need to be called away to assist with direct care needs for various reasons, and of course there is always meetings and training sessions.

For the past 12 months I have been part of the Community of Practice in Dementia Project, which has entailed regular meetings, coordinating and implementing family and staff information sessions, conducting family surveys and family case conferences.

I continue to work as an EN on the floor some days a week and, despite the many challenges of Aged Care, I love this area of work and would encourage others to consider this as a career choice.
On the Heartbeat for August, what has changed the most since you’ve been an Enrolled Nurse?

Ros Snow - LGH Nursing Pool
The EN’s role has broadened in the opportunities available, especially in the aged care sector.

Donna Richardson - Glenara Lakes
There are great opportunities for ENs to go further in their career path and to be able to obtain further qualifications.

Denise Howard - RHH 2A
We now have more responsibility than ever before. We have all done the Certificate IV package but currently we are unable to use this qualification due to hospital policies. We have more respect from RNs and senior staff as they now know what our capabilities are. We go to them for advice if we have concerns and we initiate care.

Anne Sands - RHH 2DN
Technology is the biggest change I have seen since being an EN. Everything is different. Thermometers, manual pulse, manual BP machine - once documented with pen and paper and no computers. Also, ENs are now more respected. When I did my training we were only given menial tasks and were not respected at all.

Sharon Dixon and Rachael Graham-Jones - Umina Park
The biggest change is the expansion of scope of practice with the introduction of medication management. There is more diversity in the role and a requirement for more understanding and skills to contribute to achieving accreditation in the aged care setting.

Quality care MUST include skills mix

AS PART OF THE BECAUSE WE CARE CAMPAIGN, ANF HAS FILED A FINAL SUBMISSION WITH THE PRODUCTIVITY COMMISSION SPECIFICALLY RELATING TO MINIMUM STAFFING LEVELS AND SKILLS MIX THAT MUST BE PART OF THEIR RECOMMENDATIONS.

The ANF believes that all nurses are vital in aged care to ensure that residents receive nursing care whenever and wherever it is required. Nurses are central to quality care and the Productivity Commission must mandate an appropriate skills mix and minimum staffing level to ensure nurses can provide quality care.

The ANF has recommended to the Productivity Commission that quality of care must include:

A minimum requirement for facilities to employ Registered Nurses, Enrolled Nurses and extended care assistants at each and every facility across the country.

We have stressed to the Productivity Commission that all three types of nursing in aged care are vital to quality outcomes, and we believe that a guaranteed minimum of 4.5 hours of nursing care per resident per day MUST be implemented. The 4.5 hours per resident per day must be allocated equally across the Registered Nurse, Enrolled Nurse and extended care assistant workforce at each workplace.

For the Productivity Commission to ensure that the quality of care for residents is paramount in their review of nursing homes, their final report MUST make recommendations that require the development and introduction of minimum registered, enrolled and extended care assistant staffing standards in nursing homes around Australia.
Losing Good Carers

‘Nurses and carers become like family to us. It’s depressing when they leave, one after the other, because the wages are so low. Carers and nurses have heavy and responsible jobs and need to be paid accordingly. Otherwise the good staff just don’t stay.’

Aged Care Resident

7 reasons why Aged Care can’t wait

1. **There is a critical shortage of nurses in aged care.** The aged care sector needs more than 20,000 additional nurses right now.
2. **The Australian population is ageing.** The ageing of our population means that unless urgent action is taken the shortage will get worse, on top of the shortages we are already facing.
3. **Nurses in aged care are paid less than nurses in public hospitals.** This must be fixed if we want to recruit and retain enough nurses to provide adequate care in aged care now, and into the future.
4. **The wages gap continues to grow.** The wages gap between aged care nurses and nurses in public hospitals has doubled over the past decade, from $84 a week in 2002 to over $168 on average today.
5. **Quality care of residents must be at the centre of any reform.** Any review of aged care must include a significant funding injection to ensure that quality care is at the centre of aged care, and must allow providers to attract nurses to aged care by lifting the wages.
6. **There is no funding increase guaranteed in next year’s budget.** The 2012 Budget MUST be the Aged Care Budget. If the Federal Government waits any longer to fix aged care, the situation will become even worse and residents will suffer.
7. **Additional tied funding will be delivered through enterprise bargaining.** This would deliver wage increases directly to workers, and maintain workplace flexibility. It would ensure that good providers who bargain will be given additional funding by the Government to close the wages gap.

Help make the 2012 budget the Aged Care Budget

Call on Prime Minister Julia Gillard and Treasurer Wayne Swan to ensure there is an injection of funding to fix the nursing shortage, close the wages gap, and put the care back into aged care.

**Email:**
Go to www.becausewecare.org.au and email Canberra instantly.

**Postcard:**
Ask your union delegate or organiser for the campaign postcard to send to Canberra.
Zero Tolerance to Abuse in ANF

Angela Wyatt
Industrial Officer

VIOLENCE CAN BE DEFINED AS ANY INCIDENT IN WHICH AN INDIVIDUAL IS ABUSED, THREATENED OR ASSAULTED AND INCLUDES VERBAL, PHYSICAL OR PSYCHOLOGICAL ABUSE, THREATS OR OTHER INTIMIDATING BEHAVIOURS, INTENTIONAL PHYSICAL ATTACKS, AGGRAVATED ASSAULT, THREATS WITH AN OFFENSIVE WEAPON, SEXUAL HARASSMENT AND SEXUAL ASSAULT. BULLYING IS A FORM OF VIOLENCE.

ANF staff have the right to work in a violence free workplace. Unfortunately our Reception and Info Line staff have increasingly been subjected to verbal abuse by members. ANF takes a zero tolerance response to any form of abuse towards our staff.

We are here to provide support and guidance to you, our members, and we all work to the utmost of our abilities to provide timely, accurate and thorough advice.

ANF appreciates that workplace problems cause high levels of stress but please don’t take it out on our staff. We would appreciate it if you would consider that our staff are doing their best for you and deserve to be treated with respect.

Our zero tolerance to abuse response means that any form of abuse towards our staff may result in ANF assistance being immediately withdrawn. If the abuse is considered sufficiently serious, it will be referred to Branch Council to determine an appropriate outcome.

ANF EDUCATION GRANTS

Interested in education relevant to your nursing practice?

Apply for an ANF grant of up to $200.

Eligibility:
• Have two years of financial membership with the ANF
• Have not received an ANF grant in the previous three years
• Use the grant for seminars relevant to your nursing practice, patient care or ANF organisationally (excludes formal academic studies)
• Demonstrate that all other relevant avenues for funding have been considered
• Complete an ANF proforma application.

Successful applicants must submit a written report to the ANF which may be printed in Infusion.

If you have any further enquiries or would like an application form, please contact the ANF office or visit the website.

Q & A

I WORK IN THE PRIVATE SECTOR AND AM A MEMBER OF ANF, BUT MY MANAGER HAS TOLD ME I CAN’T GO TO THE UNION TO DISCUSS ISSUES I AM HAVING AT WORK. WHAT ARE MY RIGHTS AS A MEMBER OF ANF?

A

The Fair Work Act includes important provisions that protect workers’ rights, including the right to join and participate in a union. It is unlawful for an employer to take action against an employee because they have or choose to exercise a workplace right. The following workplace rights are legally established:
• The right to engage in lawful industrial activity (including joining, participating in and being represented by a union)
• The right to make a complaint or enquiry about your treatment at work
• The right to receive your entitlements under a Collective Agreement or Award
• The right to perform a role or responsibility under industrial law. An example of this is an Occupational Health and Safety Workplace Representative.

Importantly, an employer cannot dismiss an employee because they are a union member or involved in union activities.

Though similar, different provisions apply in the Public Sector. Please contact the ANF Info Line for specific advice about your situation.
Most Tassie nurses and midwives to renew registration by 31 August 2011

THE NURSING AND MIDWIFERY BOARD OF AUSTRALIA (NMBA) URGES NURSES AND MIDWIVES ACROSS TASMANIA TO CHECK WHEN THEIR REGISTRATION IS DUE, PARTICULARLY THOSE WHO HAVE YET TO RENEW IN 2011.

Around 7,000 nurses and midwives in Tasmania are due to renew registration by 31 August 2011 – for many their first time under the National Registration and Accreditation Scheme.

Under the National Law, nurses and midwives who do not renew registration within one month of their registration expiry date must be removed from the National Registers of Nurses and Midwives. Their registration will lapse and they will not be able to practise their professions in Australia until a new application for registration is approved.

In the National Scheme, individual practitioners are responsible for renewing their registration on time. Nurses and midwives due to renew are sent a renewal reminder and unique contact number (user ID) to access the Australian Health Practitioner Regulation Agency’s (AHPRA) online renewal service.

Nurses and midwives due to renew on 31 August 2011 will renew for 9 months and their registration will be valid until 31 May 2012. From 2012, the renewal date for almost all nurses and midwives in Australia, will be aligned and registration renewal will be due by 31 May each year.

There are some simple steps nurses and midwives can follow for straightforward renewal of registration:

1. Check your contact details – make sure your contact details supplied to AHPRA, including email and mobile telephone, are correct and current. This will allow AHPRA to send you renewal reminders and to contact you easily.
2. Check your registration expiry date – practitioners can view their expiry date on the National Registers of Nurses and Midwives, accessible at www.nursingmidwiferyboard.gov.au and enter their last name and profession to search.
3. Watch for the reminder to renew registration – a reminder to renew registration, including the unique contact number (user ID) supporting online renewal, will be sent to each practitioner up to eight weeks before registration expires.
4. Use online services for quick and easy renewal of registration – most practitioners can renew registration online using the unique contact number (user ID) provided on the registration renewal notice sent by AHPRA.

Nurses and midwives who do not have their unique contact number can get it by submitting an online enquiry form – selecting ‘User ID’ as the category of enquiry or by calling 1300 419 495. Nurses and midwives can also mail their renewal application to AHPRA, GPO Box 9958, in their capital city.

Nurses and midwives who forget to renew their registration by 31 August 2011, or within the following one month late period, can apply to AHPRA for a fast-track application for registration. They are not able to practise in the profession until their registration application has been granted.

Renew online - Register on time

For more information
- Visit www.ahpra.gov.au under Contact us to lodge an online enquiry form.
- For registration enquiries: 1300 419 495 (within Australia) +61 3 8708 9001 (overseas)
Joann Crawford - Most Outstanding Graduand

What prompted you to study nursing?
When I was younger I always wanted to be a nurse but chose a different career instead. I ultimately want to become a midwife and two great birth experiences prompted me to study nursing and follow my dream.

What did you enjoy the most during your studies?
I enjoyed embracing everything nursing and learning all about the human body. I also enjoyed making new life long friends who were studying nursing as well.

Where to from here?
I have just finished a rotation on the surgical ward at the Mersey, which I have loved. I am very excited about starting the 2nd year Advancing Practice programme in the Emergency Department at Mersey Community Hospital so that I can gain experience in emergency nursing. I hope to continue with my midwifery studies once I have finished my year in DEM.

What does this award mean to you?
This award means recognition for all the hard work over the past three years. It means saying thanks to my wonderful husband, Shaun, who supported me throughout the degree.

Why is being an ANF member important to you?
I think being an ANF member gives me peace of mind knowing that I am supported while at work and being represented by nurses to better the nursing profession.

Shani Vansant - Most Outstanding 2nd Year Student

What are you enjoying the most in your studies?
I'm currently completing my year as a Graduate Nurse on the Neurosurgical Unit at the RHH, which I'm thoroughly enjoying! I love being able to put into practice all the theory I have learned. It's nice to be able to get out there and do the job we've been studying to do.

What are your career aspirations?
At the moment, I love Neurosurgical nursing and there is plenty for me to learn. Further down the track, I would like to study more and look at critical care nursing.

What does this award mean to you?
I feel extremely grateful to receive this award. It's great that we feel recognised for the hard work and time put into our studies. I feel fortunate that I have really enjoyed studying nursing, I think without having that passion for nursing it would have been harder.

Why is being an ANF member important to you?
It means I have a sense of community with other nurses around Australia and an awareness of how the profession is evolving and the effects of that. It's a great feeling to have the support that the ANF provides!

Leah Vincent - Most Outstanding 1st Year Student

What are you enjoying the most in your studies?
I am enjoying meeting new friends and colleagues; experiences gained on professional placements; learning about the miraculous body; and putting all the accumulating pieces together to expand my understanding and experience of what it is to be a nurse.

What are your career aspirations?
My long term goals are to eventually work as a community nurse in preventative/educational primary health care. I am especially interested in rural/remote opportunities and hope to one day be involved in closing the gap and decreasing the disparity of Aboriginal and Torres Strait Islander health to non-indigenous Australians. I am also drawn to palliative care; however hope to gain a strong nursing foundation by working within the structure and support of the hospital system.

What does this award mean to you?
This award is a symbol of personal achievement and a reminder that success follows continuous application and hard work but requires less effort when one is passionate about what one is doing.

Why is being an ANF member important to you?
Being a member supports the organisation that supports its members. Representation, advice, education/training opportunities, and professional indemnity insurance provided by ANF will be the most important components of membership to me once I am a registered nurse.
The government supports the aged care sector through the funding of training, workforce development and specialist workforce activities.

As part of this commitment 395 undergraduate scholarships, 310 postgraduate scholarships (including continuing professional development) and 10 nurse practitioner scholarships are being offered to develop career pathways for workers in aged care.

These scholarships are available to Australian citizens or permanent residents who are currently working in the aged care sector, or in the case of undergraduate or re-entry studies, applicants who demonstrate a commitment to aged care.

Scholarships are available to applicants to undertake a course at an Australian tertiary institute or to broaden their skills by undertaking a short course, conference or workshop.

For further information please contact the Royal College of Nursing Australia on 1800 116 696, download information packs at www.rcna.gov.au or email scholarships@rcna.org.au.

Applications close 1 September 2011.

Newly Elected Reps
Judith Dawkins – Mersey
Community Hospital, DPU
Heather Robinson – Mount Esk

ENROLLED NURSE Advanced Diploma

Are you an enrolled nurse with a diploma qualification, interested in advancing your education and employment opportunities with an advanced diploma for enrolled nurses (HLT61107)?

Gain specialty qualifications
Study while you work
You may be eligible for the post-graduate/qualification allowance for enrolled nurses (2-4%).

ANF is the sole training provider of the Advanced Diploma for Enrolled Nurses in Tasmania
ANF will be commencing our first Advanced Diploma Enrolled Nurses course later this year. Delivery of the course throughout Tasmania will depend on sufficient numbers of applications.
Delivery of the course throughout Tasmania will depend on sufficient numbers of enrolments.
Complete the full qualification or stand alone units, subject to minimum numbers of enrolments.

More information at www.anftas.org
For enquiries or to register for an information session, please contact 6223 6777, 1800 001 241 (outside Hobart area) or rtoassist@anftas.org.

NAME IT & WIN

Name the ANF Education Centre, due to open next year.
Send your entry to anf@anftas.org or phone 6223 6777 by 31 August 2011.
The winning entry will receive a voucher for ANF 2 hour education sessions to the value of $90.

Real Nurses . Real Choice

Over the politics? Or just need a change? NOW is the time to try a nursing agency.

But not just any agency. At Nursecare Personnel, we don’t make wild promises and we don’t play politics. We do, however, offer you shifts of your choice, at excellent rates, with professional support by nurses who know the business.

So who are you going to call for excellent service, flexibility and work choices?
Someone who cares.

NurseCARE Personnel.
The Tasmanian nursing agency that CARES about YOU.

Nursecare Personnel is Tasmania’s own nursing agency, owned and managed by Tasmanian nurses.

We offer offer RNs, ENs (M.E., I.V.).
- All shifts, statewide
- Above award (casual) rates and bonuses
- CPD opportunities
- Respect & appreciation - Lots of it!

Call us today...
1800 240 988
to explore the possibilities.
W: www.nursecaretas.com.au
Easing into retirement with a Transition to Retirement income stream

A word from RBF

Transition to Retirement offers flexibility and choice to help Tasmanian Accumulation Scheme members best use superannuation savings to achieve lifestyle goals as they approach retirement.

What is a Transition to Retirement income stream?
If you are between 55 and 65 years of age, a Transition to Retirement income stream can help you move into your retirement at your own pace, and potentially without reducing your income. You also can make the most of the tax advantages it offers to boost your superannuation in the lead up to your retirement. Once you have reached your preservation age*, you can use some or all of your superannuation to purchase a Transition to Retirement income stream which can be used to support your savings and retirement plans, no matter whether you’re working full-time or part-time.

Your options
You can use a Transition to Retirement income stream to:
- reduce your working hours while maintaining your current level of income;
- continue working the same hours and take advantage of the tax benefits superannuation offers to boost your superannuation savings; or
- work the same hours and have access to extra income.

Keep in mind that you will still receive Superannuation Guarantee (SG) contributions from your employer while you continue to work, even if you are receiving a Transition to Retirement income stream. However, if your salary changes, your SG contributions may also be affected.

Advice from an expert
When considering a Transition to Retirement income stream, make sure you have balanced all of the factors and have taken the current rules into account. More importantly, you need to consider how it will meet your personal circumstances as you move towards retirement.

This is when advice from a retirement expert is important. You can call the RBF Enquiry Line on 1800 622 631 to make an appointment with an RBF Superannuation Consultant or RBF Financial Planner.

Alternatively, Louise Pybus, your RBF Business Relationship Officer, can present seminars or hold Question and Answer sessions in your workplace. You can call her on the number below.

There’s also more information available on our website www.rbf.com.au

* A table showing your preservation age, as well as an explanation about what your preservation age means, can also be found on our website.

Contacting RBF
For general enquiries or to arrange an appointment call 1800 622 631. To speak to Louise about arranging a work place visit call her on 6336 4416 or louise.pybus@rbf.com.au

Retirement Benefit Fund Board (ABN 97 724 593 931) is the trustee for the Retirement Benefits Fund (ABN 51 737 334 954). Any advice contained in this article is general advice only and does not take into account your objectives, financial situation or needs. You should consider the ‘Welcome to RBF’ brochure available at www.rbf.com.au before making a decision to acquire or continue to hold an RBF account. RBF Financial Planning Pty Ltd (ABN 17 094 816 412, AFS Licence No. 239171) is a wholly owned subsidiary of the RBF Board and operates as a separate legal entity.
# Professional Development

**EARN CONTINUING PROFESSIONAL DEVELOPMENT (CPD) HOURS FROM ANF TRAINING RELEVANT TO YOUR PRACTICE.**

**YOU CAN NOW REGISTER AND PAY FOR EDUCATION SESSIONS ONLINE AT** [WWW.ANFTAS.ORG](http://WWW.ANFTAS.ORG)

PayPal™

PAYMENTS ARE THROUGH PAYPAL. SAFER. SIMPLER. SMARTER.

## August

<table>
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<tr>
<th>Sessions</th>
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<tbody>
<tr>
<td><strong>Health Care Associated Infections</strong></td>
<td>Are they really preventable? 2 CPD hours</td>
<td>Hobart</td>
<td>Brett Mitchell, TIPCU, ADON Infection Control RHH, DHHS</td>
<td>Thursday 4 August, 6:00pm - 8:00pm</td>
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<tr>
<td><strong>Common Cardiac ED Presentations</strong></td>
<td>Common cardiac ED presentations and their management 2 CPD hours</td>
<td>Devonport</td>
<td>Michael Browne, CNE North West Area Health Service ED MCH</td>
<td>Wednesday 10 August, 6:00pm - 8:00pm</td>
<td>Centenary Court, DECC, 145 – 151 Roke St, Devonport</td>
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<tr>
<td><strong>Minor and Major Burns</strong></td>
<td>Management and referral of clients 2 CPD hours</td>
<td>Hobart</td>
<td>Lisa Warner, Public Guardian</td>
<td>Tuesday 27 September, 6:00 – 8:00pm</td>
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Due to unforeseen circumstances, this session has been rescheduled. Please check the ANF website for updated information.

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<td>An overview 2 CPD hours</td>
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<td><strong>Guardianship and Enduring Guardianship</strong></td>
<td>What you need to know 2 CPD hours</td>
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<td>Lisa Warner, Public Guardian</td>
<td>Tuesday 4 October, 6:00pm - 8:00pm</td>
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<td><strong>Management of Renal Disease</strong></td>
<td>Detection and prevention of chronic renal disease 2 CPD hours</td>
<td>Hobart</td>
<td>Kirsten Black, CNE, DHHS</td>
<td>Tuesday 18 October, 6:00pm - 8:00pm</td>
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<td>Jennene Arnel, Regional Advisor Motor Neurone Disease</td>
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Register and pay online for ANF education sessions in 4 easy steps:
1. Log in to the member area of the ANF website
2. Select the education session you would like to attend
3. Click on the register button and submit your details
4. Proceed through to PayPal and pay online

Your payment confirms your place.

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<td><strong>5 Common Cancers in Tasmania</strong></td>
<td>Prostate, breast, bowel, skin and lung – a look at early detection, treatment and support 2 CPD hours</td>
<td>Burnie</td>
<td>Di Mason, Senior Officer, Education and Information, Cancer Council Tasmania</td>
<td>Tuesday 11 October, 6:00pm - 8:00pm</td>
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## Continuation of Professional Education Online

**www.anftas.org**

Just one click and you’re on your way.

$7.70 per topic - ANF Members

$30.00 per topic - Non Members

ANF Members can record continuing professional education portfolio online, which can be printed for your records.

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