Family and Child Health in the Spotlight

also in this issue:
Community Health Forums
Because We Care Budget Submission
Mental Health in the Workplace
PEOPLE POWER

PEOPLE ELECT POLITICIANS TO PROVIDE ESSENTIAL SERVICES FOR THE COMMUNITY. EVERY FOUR YEARS WE VOTE FOR OUR POLITICIANS - AND WE CAN VOTE THEM OUT!

Safe health and hospital care is an essential service. Every member of our community must ensure they are informed on the key issues and debate around health, education and justice. Nurses, midwives and care workers are best positioned to be involved in this debate due to their access to people and the community.

Recently, I met with both the Federal and State Ministers for Health to discuss nurses’ concerns regarding the harsh cuts to Tasmania’s public health system. ANF also contacted Federal representatives to engage and lobby for increased Federal budget funding for aged care. Although ANF represents over 90% of public sector nurses, the power of people is vital to influence the decision makers.

The Federal Minister for Health, Hon Tanya Plibersek MP is a strong advocate for nursing and keen to listen to nurses. It is clear from our meeting and on Hansard from Federal Parliamentary debate, that the Minister is very concerned with the dire position of Tasmanian public health. ANF will provide a monthly briefing to the Federal Minister to ensure the clinical voice is heard at the National level.

The State Minister for Health, Hon Michelle O’Byrne MP confirmed that the forward estimate of a further reduction of $127m for next financial year is still the Government’s position; now with the additional requirement to carry over $25m, which was not able to be saved this year. How could anyone realistically expect the DHHS to cut $100m from the health budget; closing over 100 acute beds, reducing over 120 nursing positions, while expecting to maintain safe patient care - or is it cynical to say Treasury demanded it!

Our public health system is interrelated with the private and aged care system. As the reliance on our reducing publically funded DHHS becomes strained, the need for a strong private and aged care system is even greater.

ANF has organised Community Forums (page 3) to enable the public to hear from a panel of health professionals and debate key issues. Politicians will be invited to attend and to listen to their communities. Our key message is to involve the community and mobilise the public into contacting their politicians prior to the State Budget in mid May.

NEROLI ELLIS
BRANCH SECRETARY
The Tasmanian nursing magazine for ANF Members

INFUSION APRIL 2012

FOCUS

ANF PROVIDES THE FOLLOWING UPDATE ON THE CAREER STRUCTURE IMPLEMENTATION PROGRESS.

Classifications

Grades 1 - 6: have been agreed on by ANF and the DHHS.

Grades 7a, 7b, 8 and 9: have been available for comment and consultation by nurses. The classifications are being finalised and will be ready for implementation.

Implementation

Grade 4: DHHS has been conducting education/information sessions statewide for senior nursing staff (on how to progress an application) and Grade 3 nurses interested in applying for progression to Grade 4.

Applications can be lodged on 2 April 2012.

AIN Trial

At the time of writing the AIN trial had commenced only at the Royal Hobart Hospital (Older Persons Unit and IB North). The trial is for 6 months, with reviews during the period. The weighting of each hour worked by an AIN will be counted as 0.25 per hours as direct hours in the NHPPD, i.e. 0.25 weighting is 2 hours direct/6 hours indirect across the clinical area.

Work Value Review

Grades 5, 6, 7, 8 and 9: it has been agreed by the ANF and DHHS that work value will be done following the finalisation of classification standards.

The ANF and DHHS will be reporting back to the Tasmanian Industrial Commission on 2 April 2012, on the progress of implementing outstanding matters of the Nurses and Midwives Heads of Agreement (HoA) 2010.

Tasmania’s health in crisis

ALL MEMBERS OF THE COMMUNITY ARE WELCOME TO JOIN A DISCUSSION ABOUT THE CURRENT CRISIS IN OUR HEALTH CARE SYSTEM.

Hear from a panel of Tasmanian health professionals including doctors and nurses.

HOBART
6:30 – 8:00pm Wednesday 18 April
Hobart Town Hall, 50 Macquarie St Hobart

LAUNCESTON
6:30 – 8:00pm Thursday 19 April
The Tramsheds, 4 Invermay Rd Inveresk

DEVONPORT
6:30 – 8:00pm Thursday 3 May
Devonport Entertainment and Convention Centre, 145-151 Rooke St Devonport

More information at www.anftas.org

Nurses are concerned about the proposed cuts to your health service and NEED YOUR HELP NOW.

If you are concerned about budget cuts to our health system we encourage you to ADD YOUR VOICE TO OURS.

Career Structure Implementation

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The Deputy Secretary for Children, Des Graham, has been leading the consultation with the nurses about changes to the way family and child health is managed in Tasmania.

ANF surveyed Family and Child Health nurses across Tasmania to gain their views about what they thought about the changes. Several significant concerns were raised. ANF has formally written to Des Graham outlining the concerns raised by members and at the time of writing ANF is awaiting a response.

Clinical governance at the executive table is now virtually non-existent within the service. There is no nurse who sits at the executive table leading the way for Family and Child Health nursing in Tasmania. The lack of nursing represented at the executive level means nursing input from clinicians is not given, and the professional role of the nurse is not valued or respected within the service.

One of the biggest changes in the new model of care is the removal of the universal service. At the moment, all new mothers and their babies are referred to the CHAPs service for all baby checks from 0-4 years. This will now be changing so that in order to be able to use the service you must be assessed to be a ‘vulnerable’ family. This term can be very broad but also very exclusive.

There are huge concerns associated with this proposal and the families that this will affect. For example, many families have changing circumstances – how will changes within these families from ‘not vulnerable’ to ‘vulnerable’ be detected? Families who will not be able to access the service will be expected to visit GP, a service that is already overburdened and not financially accessible to many. ANF believes that most families are potentially vulnerable and that the removal of a universal service reduces the support available to any mother and child that needs it. Visits by a Family and Child Health Nurse, who actually enters the home, allows for early detection of women who are suffering from postnatal depression: the nature of the illness being that the person may well not seek assistance.

Executive management has advised the ANF that it will be the nurse’s responsibility to determine who is a vulnerable family. But considering that the nurses, who are primary health care nurses and operate under the ethos that all women should be able to access a universal service must determine this is ironic. Unfortunately, in the current climate of budget cuts, concerns are evident at the reduction of the parenting groups. This service may not be removed theoretically, but will be reduced most likely due to the reduction in family and child health nurses and the inability for the service to roster casual nurses to fill leave. New Parenting groups are essential for new mothers to create networks and support from other mothers in their region. There are also economic benefits in that the nurse is able to see many mothers at the same time and provide them with holistic care.

In the long term, removal of this support is likely to result in ‘vulnerable families’ which might have been prevented if the service continued.
“We are concerned for the erosion of the universal service offered to Tasmanian families currently, and the expectation that we will be able to offer more intensive targeted services to vulnerable families but under very difficult budget constraints.”

“There is little acknowledgement of the importance of this service to ‘well resourced families’ who are just as vulnerable to postnatal depression, sleep deprivation, isolation, family violence and a myriad of other vulnerabilities which we see frequently and are able to offer support and referral.”

“We will have no school health checks for any of our children. Only children whose parents recognise a concern will seek help.”

“Reducing our new mothers’ groups or offloading them to another service is a huge concern. They are hugely successful because we run them and they provided a forum for us to create community networks and to give great health education and support to the group members which is then dispersed into the community.”

“Centres or centre sessions have frequently been closed due to no available staff cover over the past months adding to workload and stress for existing staff and lack of access for clients.”

“At present, some families have at least a two to three week wait to see a nurse as we do not have enough staff.”

“New parent groups are very important for new mothers. They are an important way of sharing information to a group of willing participants who form long friendships and support links.”

The current circumstances are terrible. There is horrid and inexcusable waiting times for young babies. This is very stressful for the mother, but also for the nurse who is unable to make an appointment in a timely way for a young baby you are concerned about.”

Breastfeeding issues are taking longer to attend to due to current staffing issues. The ongoing clinical problems associated with this are yet to be identified for these babies, but there is no doubt there will be some.”

“Eroding services that are currently provided to clients deemed not to be at risk and capable of accessing services else where is concerning. The potential to create more families who do become ‘at risk’ is high, particularly in Tasmania where we have scant resources to start with.”

“These changes are terrifying. Is it not better to remove the service all together and force people to find help elsewhere than to provide a second rate service that misses important problems and fails to provide adequate care?”

“I am concerned that the model of care changes are getting confused with the budget cuts. I think we are all very aware of the lack of money therefore we are settling for less and aiming lower. This is appalling – when the budget constraints lift we will be left with a model of care that is not inclusive of all.”

“Once the parenting groups are ceased there will be no means to provide education about development, solids, attachment and bonding. It is currently been seen as a middle class luxury which is not reaching lower socioeconomic groups. Every new parent is invited despite their economic status. The number of mothers from the lower socio economic group who attend is not as many as we would like, but is it fair to deprive all new mothers of these very successful groups?”

“It is sad to see a wonderful service that could be subtly changed to achieve the outcomes wished for, be re-adjusted by bureaucracy to suits its agenda.”

A snapshot of some of the results from the ANF member survey.

**Do you have any concerns with the proposed changes to the CHAPS Model of Care by Children and Youth Services?**

- **YES 94.1%**
- **NO 5.9%**

**Could there be improvements in the nursing reporting structure within CHAPS and Children and Youth Services?**

- **YES 86.7%**
- **NO 13.3%**

**Do you have any concerns in relation to the proposed introduction of Registered Nurses without a Family and Child Health qualification to undertake parts of the existing role of a Family and Child Health Nurse?**

- **YES 85.3%**
- **NO 14.7%**
"Send the Love ...
... to someone else on Valentine’s Day"

THE AUSTRALIAN NURSING FEDERATION AND THE AUSTRALIAN LAWYERS FOR HUMAN RIGHTS (ALHR) COMBINED FORCES ON VALENTINE’S DAY TO HOLD A FUNDRAISER FOR THE ASYLUM SEEKERS AT THE PONTVILLE DETENTION CENTRE.

ANF was extremely excited to be working with the ALHR and to be involved in supporting the wonderful group of individuals at the Phoenix Centre, an organisation within our community supporting a cause which is right on our doorstep. The Phoenix Centre is a branch of the Migrant Resource Centre that assists and counsels victims of torture and trauma. They provide an amazing service to the men at the Pontville Detention centre and it was beautiful that the money raised went to them.

The centre has invested the donation into developing digital resources for their clients. They will be producing CDs and downloadable MP3 files for relaxation, sleep, hygiene, pain relief and anxiety reduction.

The evening was held at the Colville Gallery in Salamanca and the event was a full house. The guest speaker for the evening was Robyn Banks, the Anti Discrimination Commissioner. Robyn spoke beautifully on ‘Who cares about Asylum Seekers’ – with one of her key messages being that ‘we all need to care’. It’s not up to just one person. Together as a community we can make a difference and respond to the incoming asylum seekers in this country and the constant political storm about the issue with much more compassion, humanity and respect. They are people too.

ANF thanks all of the wonderful people who attended on the night. ANF hopes to hold more events in the near future and will keep you updated as these arise.

The ANF has a federal position statement on Refugees and Asylum seekers which outlines their position. This position includes:

1. That Australia has a moral and legal obligation to treat every human being compassionately and with respect, courtesy and consideration;
2. That their application is being processed, people seeking asylum in Australia should receive treatment which is consistent and human, regardless of how they entered Australia or country of origin;
3. Unauthorised arrivals seeking asylum may only be detained for a legally enforced limited time for the purposes of health, character and security checks, and following these preliminary assessments they should be fast tracked through the immigration process and appropriately housed in the Australian community while they await the outcome of their refugee application.


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A VALUED FEMALE EMPLOYEE IS SENT TO A CLINICAL PSYCHOLOGIST BY HER WORKPLACE, CITING SHE IS “NOT PERFORMING” WITH THE LEVEL OF PRODUCTIVITY THAT SHE WAS PREVIOUSLY AND “WE WANT HER BACK TO WHERE SHE WAS. PERHAPS THERE ARE FACTORS IN HER LIFE AFFECTING HER NEGATIVELY”. THE PSYCHOLOGIST FOUND THAT NOTHING HAD CHANGED IN THIS WOMAN’S LIFE EXCEPT HER WORKPLACE HAD BEEN RESTRUCTURED, WHICH MEANT SHE HAD TO BE MORE PRODUCTIVE WITH LESS RESOURCES. THIS WOMAN WAS CALLED “NON-PRODUCTIVE” WHEN IN FACT IT WOULD BE MORE ACCURATE TO CALL HER “VULNERABLE”. MANY COULD RELATE TO THIS PHENOMENON GETTING WORSE EVERY YEAR, OF BEING EXPECTED TO “DO MORE, WITH LESS”.

A Productivity Commission in 2010 found that work related stress and psychological hazards are NOT given the same attention as physical issues in the OHS context.

A measure of determining how safe a workplace is in relation to work related stress and psychological hazards is the Psychosocial Safety Climate (PSC) and looks at factors such as what policies, practices and procedures are in place.

The main factors for a good PSC are:

- Management Commitment to stress prevention
- Priority for stress prevention and mental health well being vs productivity
- Communication in the workplace
- Participation and Consultation processes.

Furthermore, a study of 31 European countries found a positive relationship between Union Representation and Psychological Health. Those companies that had a high engagement with unions had employees with better psychological health.

The economics for good support for Mental Health Injury (acquired in the workplace) and Mental Health Illness makes bean counters sit up and take notice. Research has shown that money spent on support, far pays off in decreased sick leave. Someone with mild depression takes double the amount of sick leave of someone with no depression, and those with severe depression, the number rises to five times as much.

Australia rates fifth in the world for the longest working hours and work life balance is often lost. The way forward is to make sure jobs are (REALLY) family friendly – not just a lip service. Research shows that this decreases rates of depression and has an impact on the wellbeing of children. Studies are starting to show parental workplace stress and/or mental illness increases the likelihood of a child experiencing a mental illness in the future.

Long hours can mean that we also neglect the healthy lifestyle that unions fought long and hard for. The eight hour day was won with a campaign of 8/8/8 – eight hours each for work, recreation and sleep. If we eat into the sleep or recreation time with work, health and well being suffers as there is less time for exercise and healthy food preparation.

In Tasmania, only 25% of employers provide any education regarding mental health issues and even then, it is usually reacting to a crisis (such as an employee suicide). Corporate responsibility needs to not only be to the community but also internally to the company employees. Employers not only have a responsibility to make sure the individual can do the job but that the job is DOABLE! Education and change in culture regarding mental health is the only way forward, so workers can put in a fair day’s work for a fair day’s pay!

Sue Robertson, ANF Organiser attended ‘Mental Health in the Workplace’, a Partnering Healthy at Work Seminar at Menzies Research Institute.

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The ANF Federal Office has provided a submission to the Federal Government regarding aged care funding in the 2012/13 Budget. Following is an outline of key points that ANF considers essential in addressing long-term reform in aged care.

We can close the wages gap now through a National Framework agreement between government, aged care providers and nursing staff.

- The National Framework agreement allows employers and employees to collectively bargain, with an agreement from the Federal Government to top up the wage differential in each state and territory.
- This complements the Productivity Commission’s proposed reforms, by providing a mechanism to deliver competitive wages and putting the aged care sector on firm foundations ahead of reform.
- A national framework agreement allows the ANF to continue to bargain with the aged care industry (currently we have agreements with over 80% of employers), and allow workplace flexibilities and productivity issues to be a central part of negotiations at the workplace, between management and employees.

- Nurses would no longer be financially disadvantaged by choosing a rewarding career in aged care nursing. Vulnerable older Australians will benefit from the increased number of qualified nurses who choose a career in aged care.

Closing the wages gap requires immediate action and the provision of additional tied funding; it also requires an efficient and effective mechanism to avoid repeating the mistakes of the past where additional funding was provided to the aged care industry to close the wages gap, but did not close the gap.

Clinical placements and graduate nurse programs

Fully funded graduate nurse programs in every area of the health sector. Every nurse that graduates should be afforded and guaranteed a full first year experience. This is a priority to ensure the next generation of nurses and midwives are retained in the sector and every nursing student receives a fully supported clinical experience.

Enrolled nurse education funding

In addition to the current Aged Care Education and Training Incentive Program which is specifically for Enrolled Nurses and AINs/ECAs working in aged care, the Federal Government fund training places, regardless of which area of health they work for:

- Enrolled nurses to transition from a Certificate IV to Diploma; and
- Assistants in Nursing, especially those currently undertaking further training from a Certificate III to Certificate IV or Diploma.

Falling Ratio of Nurses and Rising Ratio of Residents Classified High Care

Because we care

Quality care for older Australians

Personal contributions or salary sacrifice – which one is for you?

To find out more information or book a personal appointment, call the RBF Enquiry Line today on 1800 622 631.

The Retirement Benefits Fund Board (ABN 97 724 593 931) is the trustee of the Retirement Benefits Fund (ABN 51 737 334 954). Before deciding to acquire or to continue to hold an RBF product, please consider the 'Welcome to RBF' brochure at www.rbf.com.au
**A NEW NAME AND NEW TEAM**

**OUR SERVICE WHICH PROVIDES INFORMATION AND SUPPORT TO MEMBERS VIA TELEPHONE AND EMAIL HAS NOW BEEN RE- NAMED THE ‘INFORMATION CENTRE’. PREVIOUSLY REFERRED TO AS THE ‘INFORMATION LINE’, A REVIEW OF THE SERVICE HAS BEEN UNDERTAKEN AND IT WAS FOUND THAT A NEW NAME WAS NEEDED TO BETTER REFLECT THE SERVICE THAT WE OFFER. ALSO, TWO NEW STAFF MEMBERS HAVE BEEN RECRUITED INTO THE ROLE OF INFORMATION OFFICER (BRENDON BOWES AND DANIELLE WILLIAMS) IN RESPONSE TO THE INCREASED DEMAND WHICH HAS BEEN EXPERIENCED BY THE SERVICE.**

**INFORMATION SHEETS**

The Information Centre is pleased to announce that ANF Information Sheets are now available online. Some of our current publications include:

- A guide to preparing a statement
- Managing an internal grievance
- Managing your pay query
- Overtime entitlements
- Professional Indemnity Insurance for nurses
- Unfair dismissal under the *Fair Work Act*

**PROFESSIONAL INDEMNITY INSURANCE**

The Nursing and Midwifery Board of Australia has recently released two new documents in relation to professional indemnity insurance (PII) which includes a revised standard for nurses and midwives.

Although it is the nurses’ responsibility to ensure they have adequate cover in relation to their particular area of practice, nurses and midwives will have sufficient professional indemnity insurance cover with their ANF membership.

However, some nurses, including immunisation nurses and independent practitioners will need to contact the ANF to ensure their practice is covered.

**PUBLIC SECTOR IN CHARGE ALLOWANCES**

There has recently been some confusion regarding payment of in charge allowances, especially the entitlements of those working at Grade 4. The current entitlements are:

- Grade 3 in charge of shift – $16.35 per hour
- Grade 4 in charge of shift and is the only Grade 4 rostered – $16.35
- Grade 4 (old Level 2 translated over), in charge of shift and another Grade 4 – $10.90 (a grandfathered arrangement).

Undoubtedly, it is important to ensure you clearly mark on your timesheet whether you are in charge of the shift or in charge of another level 2.

*If you have any concerns then you should contact your pay office in the first instance.*

**UNFAIR DISMISSAL, under s385 Fair Work Act is:**

1. Where the employee is dismissed;
2. The dismissal was harsh, unjust or unreasonable;
3. Is not genuine redundancy;
4. If a small business, was not consistent with small business dismissal code

**DISMISSAL can mean:**

(a) Terminated on employers initiative; OR

(b) Employee forced to resign; that is, terminated on employers initiative or forced to resign (s386).

There are other criteria which must be met in order to be considered for a case of unfair dismissal, please contact the Information Centre if you have any concerns.

**MARCH CORRECTION**

In the March Infusion (back cover), there were some inaccuracies in relation to Professional Indemnity Insurance. The NMBA (not AHPRA) was responsible for releasing the revised registration standard which came into effect 10 January 2012. PII has been a requirement of registration since 1 July 2010.

**CONTACT US**

If you have any queries please do not hesitate to contact the ANF Information Centre on 6223 6777, 1800 001 241 (outside Hobart area) or email info@anftas.org.

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**Celebrating Long Term Membership**

**ANF BRANCH COUNCIL RECENTLY ACKNOWLEDGED LONG TERM MEMBER, KATHRYN FAMA WHO HAS RECENTLY RETIRED FROM NEARLY 40 YEARS NURSING.**

Kathryn joined ANF in 1973 and worked as a paediatric nurse throughout her career. She is planning to travel to Canada and the USA in her retirement.

We wish Kathryn all the best for the future.
UTAS Student Orientations

ANF JOINED STUDENTS AT THE FIRST YEAR STUDENT ORIENTATION WEEK AT UTAS, LAUNCESTON. THE UNIVERSITY PROVIDED LUNCH AND A NUMBER OF ORGANISATIONS INCLUDING ANF, PROVIDED INFORMATION TO STUDENTS. ALTHOUGH THERE WERE STUDENTS FROM ALL FACULTIES IT WAS A FANTASTIC OPPORTUNITY TO MEET A LOT OF FIRST YEAR NURSING STUDENTS.

ANF offered free student memberships to those who signed up on the day. The student membership provides students with access to journals, the member section of the ANF website, discounted professional development and clinical education and support from the nursing profession, as well as a number of other benefits. The vast majority of nursing students who attended the orientation signed up as members of ANF. They were all incredibly enthusiastic about embarking on nursing as a career, despite the current job insecurity and stress in nursing in general. The students asked a lot of questions about nursing and were surprised that the Organising Team at the ANF are all nurses.

Nursing as a career was discussed with students, and generally they wanted all the information they could about nursing. More so this year, students knew about ANF and what we advocate. They had heard about ANF through the media in the public sector Protect Frontline Health campaign and were keen to become members. As new student members, they were enthusiastic to read the Infusion magazine to keep up to date with Tasmanian nursing issues.

It was exciting to see so many Enrolled Nurses at UTAS who have made the huge commitment to study to become RNs. Several Care Workers in the Aged Care sector were also about to commence the Bachelor of Nursing course. It was refreshing to see so much excitement and enthusiasm about nursing.

South
Private Sector Enterprise Agreements

AS ANF ORGANISERS, WE ARE CHARGED WITH THE RESPONSIBILITY OF DISCUSSING AND DEVELOPING THE LOG OF CLAIMS FROM MEMBERS THAT WILL BE SUBMITTED TO AN EMPLOYER AS PART OF THE ENTERPRISE AGREEMENT (EA) NEGOTIATIONS.

It needs to be acknowledged that via the Enterprise Agreement process, the ANF has been successful in obtaining many entitlements that are either not found within the applicable award, for many this is the Nurses Award 2010, or are better than those entitlements found in the award.

It should also be considered that as from January 2010 we have seen the introduction of the Modern Awards. For Registered Nurses, Enrolled Nurses and Assistants in Nursing it is the Nurse Award 2010 and for our Care Worker members it is the Aged Care Award 2010.

The introduction of the Modern Awards has provided employers with the opportunity to seek a reduction in some of the entitlements which were higher in the previous Awards and were carried over into the Enterprise Agreements as a minimum. In effect the goal posts shifted considerably.

One such entitlement is Personal leave, what most people know as their sick leave and carers leave.

Prior to the Modern Award it became 10 days. The end result was that some employers were seeking a reduction to the entitlement within a new agreement to 10 days for a full time employee and pro-rata for part time employees.

It also needs to be considered that the following entitlements found under some agreements do not exist within the current Award, so employers may seek their removal from future Agreements:

- Post graduate allowance
- Professional Development Leave
- Paid Parental Leave, this should not be confused with the Federal Government’s Scheme

The only way to keep the entitlements that you’ve got is to ensure their maintenance under the EA process.
CONSULTATION

‘CONSULTATION’ IS AN ISSUE THAT IS AFFECTING MEMBERS ACROSS THE STATE AND HAS CERTAINLY BEEN CROPING UP IN THE NORTH WEST. CONSULTATION CAN BE DEFINED AS ‘SEEKING AND GIVING OF ADVICE, INFORMATION, AND/OR OPINION, USUALLY INVOLVING A CONSIDERATION’ (SOURCE: WWW.BUSINESSDICTIONARY.COM). THEREFORE, DURING A CONSULTATION PROCESS THE AFFECTED PERSON/S EXPECTS TO NOT ONLY BE TOLD HOW SOMETHING IS GOING TO BE BUT ALSO EXPECTS TO HAVE INPUT THAT WILL BE CONSIDERED WITH THE POTENTIAL OF INFLUENCING THE OUTCOME.

Unfortunately, we have seen too many examples where this has not been the case, but it has been Management informing members of what the outcome will be which has a very disempowering effect, resulting in low workplace morale. People need to feel heard and their view taken into account, in order to feel fulfilled in what they do.

The closure of Surgical West, staff cuts in Mental Health and changes to the model of care in CHAPS are only a few of the changes that members have had to endure with very little ‘consultation’. Unions have a differing view of ‘consultation’ and continually lobby management to alter this mind set but are so often ignored.

It was only 18 months ago that DHHS had a strong focus on ‘consumer-focused care’. The consumer was central to everything and featured in every document that came out. However, the word ‘consumer’ seems to have vanished from most documents that are distributed so the view is that there is little or no ‘consultation’ with the consumer.

The request from the members of ANF and the consumers to the Minister of Health is – let’s get ‘consultation’ really happening and stop the lip service. Let’s take it to the people and start some forums in the community!

TALKING WITH STUDENTS

ANF VISITED POLYTECHNIC SITES ON THE NORTH WEST COAST TO DISCUSS ISSUES THE CERTIFICATE III STUDENTS WILL FACE IN THE WORKPLACE ON GRADUATION.

It is vital that Certificate III Care Workers understand Insurance issues.

Any allegations of misconduct or mistakes under workload pressures that the nursing team face today are just as relevant to Care Workers as they are to an Enrolled Nurse or Registered Nurse.

Both groups of students from Devonport and Burnie Polytechnic asked many relevant questions and received a two month free student membership until completion of their course.

ANF looks forward to supporting them in their workplaces if they upgrade to full membership once they are qualified.

North West Education

FOLLOWING REQUESTS FROM A NUMBER OF MEMBERS, THERE HAS BEEN A CHANGE OF VENUE IN THE NW FOR ANF EDUCATION CENTRE CPD SESSIONS.

Ulverstone is more centralised for access by all members on the North West Coast. It is a short drive from Devonport and Burnie the two major centres, and a little closer for those making the trek from the West Coast and Smithton. Members who have already attended the Beachway Motel Function Centre have been pleased with the facility and refreshments. If you are in need of CPD hours, please see professional development on page 15 or visit the ANF website at www.anftas.org.

Please note: some sessions are at the Ulverstone Civic Centre due the Beachway having prior bookings. You will be advised of venue with your booking.

North West

The Tasmanian nursing magazine for ANF Members

INFUSION

APRIL 2012

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The closure of Surgical West, staff cuts in Mental Health and changes to the model of care in CHAPS are only a few of the changes that members have had to endure with very little ‘consultation’. Unions have a differing view of ‘consultation’ and continually lobby management to alter this mind set but are so often ignored.

It was only 18 months ago that DHHS had a strong focus on ‘consumer-focused care’. The consumer was central to everything and featured in every document that came out. However, the word ‘consumer’ seems to have vanished from most documents that are distributed so the view is that there is little or no ‘consultation’ with the consumer.

The request from the members of ANF and the consumers to the Minister of Health is – let’s get ‘consultation’ really happening and stop the lip service. Let’s take it to the people and start some forums in the community!

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TALKING WITH STUDENTS

ANF VISITED POLYTECHNIC SITES ON THE NORTH WEST COAST TO DISCUSS ISSUES THE CERTIFICATE III STUDENTS WILL FACE IN THE WORKPLACE ON GRADUATION.

It is vital that Certificate III Care Workers understand Insurance issues.

Any allegations of misconduct or mistakes under workload pressures that the nursing team face today are just as relevant to Care Workers as they are to an Enrolled Nurse or Registered Nurse.

Both groups of students from Devonport and Burnie Polytechnic asked many relevant questions and received a two month free student membership until completion of their course.

ANF looks forward to supporting them in their workplaces if they upgrade to full membership once they are qualified.

North West Education

FOLLOWING REQUESTS FROM A NUMBER OF MEMBERS, THERE HAS BEEN A CHANGE OF VENUE IN THE NW FOR ANF EDUCATION CENTRE CPD SESSIONS.

Ulverstone is more centralised for access by all members on the North West Coast. It is a short drive from Devonport and Burnie the two major centres, and a little closer for those making the trek from the West Coast and Smithton. Members who have already attended the Beachway Motel Function Centre have been pleased with the facility and refreshments. If you are in need of CPD hours, please see professional development on page 15 or visit the ANF website at www.anftas.org.

Please note: some sessions are at the Ulverstone Civic Centre due the Beachway having prior bookings. You will be advised of venue with your booking.

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THE EMMERTON PARK INCORPORATED
GENERAL STAFF AGREEMENT 2011

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GENERAL STAFF AGREEMENT 2011 HAS BEEN APPROVED BY FWA AND CAME INTO EFFECT ON 15 FEBRUARY 2012.

- **Wage increases:** 3% – 1/7/12, 3% – 1/7/13
- **Allowances:**
  - Allowances to increase on 1 July each year in line with wage % increases
  - Mentor Shift Allowance of 60c per hour per shift
- **Casual Loadings:** Transitioning;
  - 21% – 1/7/10, 22% – 1/7/11, 23% – 1/7/12, 24% – 1/7/13, 24% – 1/7/14
- **Leave Entitlements:**
  - 5 days paid Community Service Leave for staff who are volunteers for SES, Tas Fire Service and Tas Ambulance Service
- **Additional Entitlements:** No minimum payment period for compulsory training
- **Redundancy:** As per NES but uncapped for continuous years of service

THE HUON ELDERCARE INC, THE AUSTRALIAN NURSING FEDERATION AND HEALTH SERVICES UNION OF AUSTRALIAN NURSING STAFF COLLECTIVE AGREEMENT 2008


- **Wage increases:** $18/wk or the minimum wage increase awarded by the FWA Minimum Wage Panel per annum, whichever is greater, for the life of the Agreement as follows:
  - FFPP on or after 1/7/12
  - FFPP on or after 1/7/13
- **Allowances:** All allowances to be increased on 1 July each year with the amount of the increase to be the annual percentage increase in the Consumer Price Index for Hobart (All Groups) for the 12 months ending in the March quarter of the same year
- **Casual Loading:** 22% for the life of the Agreement
- **Leave Entitlements:** 5 days paid Compassionate/Bereavement Leave
- **Redundancy Entitlements:** as per NES but uncapped for continuous years of service

Calvary EA

THE CALVARY LOG OF CLAIMS HAS BEEN DEVELOPED AND HAS BEEN SENT TO SENIOR MANAGEMENT AT CHC – STATEWIDE. AT THE TIME OF WRITING, ANF IS EXPECTING EA NEGOTIATION MEETINGS TO OCCUR IN MARCH 2012.

The Log of claims was developed following a survey of members, membership meetings across the State and feedback from Workplace Representatives.

Key claims in the log are:

- 15% wage increase over 3 years
- Increase in afternoon and night shift penalties
- Change the criteria for the Post Grad allowance to ensure that Enrolled nurses who undertake extra study will be renumerated
- 10 minute tea breaks to be formalised in the EBA for all individuals who work over three hours
- CNMs and Level 4 positions to have wage parity with other private sector hospital
- Clear overtime policy

If you would like any further information on the Log of Claims and its content, please contact the ANF Information Centre on 6223 6777 or info@anftas.org.

“Workloads are the most important aspect of this EA. The workload management tool and meetings need to be retained. Calvary is getting so busy, due to the public sector budget cuts; therefore we need safe and practical workloads.”

Mark Hardy – Calvary St Luke’s Campus

“All of the EAs Log of Claims is important. We need to aim for the best for our nurses. We also have to ensure that we make working at Calvary safe for everyone.”

Helen Turner – Calvary St Vincent’s Campus
Your CPD

CHANGES TO NURSING EDUCATION AND QUALIFICATIONS SEEM TO BE FLAVOUR OF THE MONTH LATELY. IT WILL NOW BE A NATIONAL REQUIREMENT THAT ALL PEOPLE TEACHING IN VET SECTOR COURSES INVOLVING NURSING CARE WILL NEED TO BE AN EN OR RN AND WILL NEED THEIR CERTIFICATE IV TRAINING AND ASSESSMENT (TAE) TO SATISFY THE AQTF STANDARDS.

Also the Australian Nursing Midwifery Accreditation Council (ANMAC) has indicated that to teach nursing courses you will need a Bachelor of Nursing. This may well rule out a lot of Hospital Trained Nurses who currently teach in these areas. ANF is following this up with ANMAC.

Health Workforce Australia has developed the Nursing and Midwifery Graduate Jobs Information Portal that aims to support new nursing and midwifery graduates who have not secured a position through usual state or territory graduate recruitment processes, by providing them with a simple ‘one stop shop’ which lists information about all vacancies suitable for graduates across the public and private sectors.

Visit the Nursing and Midwifery Graduate Jobs website at http://nmgj.org.au for more information.

ANF’s current Certificate III students in HACC are just about to complete their course and we hope to secure funding to run another course mid year. Please keep a watch out for our CPD sessions, as we are increasing these over the year and adding extra ones to the North West due to an increase in demand.

WORK ON THE ANF EDUCATION CENTRE IS UNDERWAY WITH DEMOLITION AT THE REAR OF THE PROPERTY.

The main building of 182 Macquarie Street is listed on the Tasmanian Heritage Register, and is recognised as being of historic cultural heritage significance. This former house and professional offices was designed by Alan Cameron Walker and constructed in 1911 in the Federation Arts and Crafts style. The residential section was on the eastern side and the professional offices on the western side.

This heritage building is being fully protected and preserved as part of the building project and ANF has spent a lot of time working with our architect and the Tasmanian Heritage Council to ensure that the presence of the new development will have minimal impact on the historical building.

The extension on the rear of the building which is being demolished was constructed somewhere around the 1920’s. This extension was used to provide accommodation for nurses from remote areas who were studying in the city. ANF has recently used these areas for offices and archive storage.

Newly Elected Reps

Alice Barber – 3A, RHH

ANF is now on Facebook!

Head to our page and like us to keep up to date with the latest information from ANF.
APRIL

NURSING HOURS PER PATIENT DAY (NHPPD)
The NHpPD model is a systematic nursing workload monitoring and measuring system. The aim of this session is to engage nurses in the process and articulate the guiding principles.
2 CPD hours
Hobart Monday 2 April, 5:30pm – 7:30pm
Venue ANF Office, 182 Macquarie Street, Hobart
Presenter ANF Education Team

KNOWING YOUR CPD REQUIREMENTS
Attendees receive a free ANF CPD Portfolio.
Discuss the progress of nursing and midwifery and impact of this on practitioners. Explore the NMBA endorsed benchmarks for practice, the role of reflective practice in continuing competence, and define the term Professional Portfolio and the relationship to practice.
2 CPD hours
Hobart Wednesday 4 April, 9:00am – 11:00am
Venue ANF Office, 182 Macquarie Street, Hobart
Presenter ANF Education Team

DEMENTIA
Referrals relating to depression/dementia/delirium.
2 CPD hours
Hobart Monday 23 April, 6:00pm – 8:00pm
Venue CCAMLR, 181 Macquarie Street, Hobart
Launceston Tuesday 17 April, 6:00pm – 8:00pm
Venue The Tramsheuds, 4 Invermay Rd, Inveresk
Ulverstone Thursday 12 April, 6:00pm – 8:00pm
Venue Civic Centre, 19 King Edward Street, Ulverstone
Presenter Michelle Kemp, Clinical Educator, Dementia Behaviour Management Advisory Service

RBF - FINANCIAL LITERACY - VALUE OF ADVICE
What is financial advice and when should you seek advice, Benefits of seeking advice (incl case studies).
FREE – ANF Members only
Hobart Thursday 19 April, 6:00pm – 7:30pm
Venue RBF Office, 39 Sandy Bay Rd, Hobart

Launceston Wednesday 18 April, 6:00pm – 7:30pm
Venue RBF Office, Level 1, 87 George Street, Launceston

Ulverstone Tuesday 17 April, 6:00pm – 7:30pm
Venue Beachway Motel, 1 Heathcote Street, Ulverstone
Presenter Louise Pybus, RBF Business Relationship Officer

UNDERSTANDING HUNTINGTON’S DISEASE
Living with Huntington’s Disease – Support and management of symptoms.
2 CPD hours
Hobart Tuesday 17 April, 6:00pm – 8:00pm
Venue CCAMLR, 181 Macquarie Street, Hobart
Launceston Tuesday 24 April, 6:00pm – 8:00pm
Venue The Tramsheuds, 4 Invermay Rd, Inveresk
Ulverstone Thursday 26 April, 6:00pm – 8:00pm
Venue Civic Centre, 19 King Edward Street, Ulverstone
Presenter Huntington’s Tasmania

MAY

OBSTETRIC EMERGENCIES
An overview of postpartum haemorrhage (PHH) – shoulder dystocia, cord prolapse and neonatal resuscitation
3 CPD hours
Launceston Tuesday 1 May, 6:00pm – 9:00pm
Venue The Tramsheuds, 4 Invermay Rd, Inveresk
Presenter Judy Parish, Clinical Midwifery Educator LGH and Deb Clay, Post Graduate Clinical Development/Maternity Course Facilitator LGH

NURSING HOURS PER PATIENT DAY (NHPPD)
2 CPD hours
Launceston Thursday 3 May, 5:30pm – 7:30pm
Venue The Tramsheuds, 4 Invermay Rd, Inveresk
Presenter ANF Organiser

LEARNING AND TEACHING IN CLINICAL SETTINGS
A programme to support preceptors and supervisors of learners in the clinical setting
2 CPD hours
Hobart Monday 7 May, 6:00pm – 8:00pm
Venue Salamanca Inn, 10 Gladstone Street, Hobart
Launceston Tuesday 22 May, 6:00pm – 8:00pm
Venue The Tramsheuds, 4 Invermay Rd, Inveresk
Ulverstone Wednesday 23 May, 6:00pm – 8:00pm
Venue Beachway Motel, 1 Heathcote Street, Ulverstone
Presenter all sessions Annette Marlow, Deputy Head of School and Director of Professional Experience SoNM UTAS and Juliet Sondermeyer, Senior Lecturer – Associate Head, Hobart Campus SoNM UTAS

PRECEPTORSHIP COURSE
A generic program to prepare enthusiastic staff for the preceptor role. This role assists new employees and students to acquire the necessary socialisation, knowledge and skills to function in the new work area. The relationship is generally short term, with a defined timeline. The program consists of a pre workbook and a one day workshop.
7 CPD hours
Hobart Tuesday 8 May, 8:30pm – 4:15pm
Venue Salamanca Inn, 10 Gladstone Street, Hobart
Presenter ANF Education Team

TREATMENT AND SUPPORT FOR MS
An overview of client services, treatment and support
2 CPD hours
Launceston Wednesday 9 May, 6:00pm – 8:00pm
Venue The Tramsheuds, 4 Invermay Rd, Inveresk
Ulverstone Monday 14 May, 6:00pm – 8:00pm
Venue Beachway Motel, 1 Heathcote Street Ulverstone
Presenter all sessions Kim McCarthy and Kirsty Schnierer, Nurse/Case Manager, MS Tasmania
Know Your CPD Requirements

Attend the ANF CPD session Know Your CPD Requirements, and receive a FREE ANF CPD Portfolio.

The ANF CPD Portfolio is your companion guide in meeting your legal professional development hours. The Portfolio contains Professional Practice Guidelines from the ANMC and AHPRA, along with Professional Portfolio Templates and a section for you to build your own Professional Portfolio.

Available to members for $20 ($40 for non members) Please note a $10 postagage fee per folder applies to posted items

Portfolios can be purchased from the ANF Office or www.anftas.org

COST

ANF now offers courses over a range of CPD hours. Cost varies depending on the length of the course and CPD hours accrued. Please refer to the CPD hours for each course to the pricing below.

<table>
<thead>
<tr>
<th>Course Duration (CPD hours)</th>
<th>ANF Members</th>
<th>ANF Student Members</th>
<th>Non Members*</th>
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<tr>
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<tr>
<td>6 CPD hours</td>
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* If positions available

REGISTRATION

Register and pay online for ANF education sessions in 4 easy steps. You can register and pay for multiple sessions online and get a copy of your receipt and confirmation straight away via email from PayPal. www.anftas.org

Payment online is via PayPal®. Safer, simpler, smarter.

For enquiries please contact the ANF office on 6223 6777, 1800 001 241 (outside Hobart area) or educationassist@anftas.org.

CONTINUING PROFESSIONAL EDUCATION ONLINE

www.anftas.org

Just one click and you’re on your way.

$7.70 per topic for ANF Members | $30.00 per topic for Non Members

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

John and Aisha are proud Tasmanians who enjoy supporting local nurses achieve their financial goals.

“I know that nurses are an essential part of our community — both my wife and daughter are nurses!”
John Walker, Business Development Manager

A Launceston resident, John’s been with MyState for 24 years and says he’s never been happier. He believes MyState’s focus on local people and local decisions offers a real point of difference for ANF Members. His focus has always been people-oriented, and he particularly enjoys setting Tasmanians on the right financial path.

“I love helping nurses of all ages and stages in their career, and thinking outside the financial box.”
Aisha Williams, Lending and Insurance Specialist

Based in the South of the State, Aisha has been with MyState for 15 years. She’s very active in ANF events, as they are an excellent way to be part of the community and build strong relationships with customers. Her focus is on providing ANF members with financial options and helping them to uncover opportunities that they may not have known existed.

Member benefits
ANF members receive exclusive financial benefits with MyState.

So, contact John and Aisha to discuss:
- No establishment fees on any personal loan or home loan.
- The lowest available MyState interest rate offered for home loans of $150,000 or more.
- A discounted loyalty interest rate on any secured personal loan.
- An additional 0.25% p.a. interest on Term Deposits.

Loan applications are subject to MyState’s normal credit approval criteria. Terms and conditions, fees and charges apply. This advertising provides general information current as at the time of printing. The products, fees and services stated are correct at the time of printing, and are subject to change. MyState recommends that you read MyState’s Disclosure Documentation which is available by calling 138 001, at www.mystate.com.au or visiting a MyState Branch before deciding to acquire the product. MyState Financial Limited (MyState) ABN 89 067 729 195 AFSL 240896 Australian Credit Licence Number 240896. A wholly owned subsidiary of MyState Limited ABN 26 133 623 962.