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A HEALTHIER SECTOR
PROTECTING EMPLOYMENT AND PATIENT SAFETY

In this edition of InTouch Online it's important that we pay tribute to nurse, Gayle Woodford who was tragically taken from the remote area nursing community in terrible circumstances.

It has once again highlighted the need to protect nurses, midwives and personal care workers from violence, but particularly in rural and remote areas where often they may be working alone. We have campaigned on this issue heavily in the past and will step our efforts to do so in light of this tragedy.

This week has also been a big week in politics with State and Territory leaders striking a new agreement with the Commonwealth over health funding ahead of this year’s Federal Election.

They have accepted an additional $2.9 billion dollars for hospitals over the three years to 2020, following the Council of Australian Government’s meeting held in Canberra on Friday April 1 2016.

But the extra cash will do little to fill the gaping hole left in South Australia’s Health budget as a result of Federal funding cuts announced in 2014.

While any additional money is welcome, it equates to only $3.9 billion of the $16 billion required by 2024/25.

Health will remain a major issue for the up-coming Federal Election which may be held as early as July.

Locally, we are commencing negotiations on your behalf for the 2016 Nursing/Midwifery Public Sector Enterprise Agreement and I’d like to take this opportunity to ask that you view the Podcast I’ve recorded (below) which provides an update on this topic.

Click here to view the full Public Sector schedule of Enterprise Bargaining work site visits.

Adj Assoc Professor Elizabeth Dabars AM

A recent visit to Adelaide by the Assistant Minister for Health and Aged Care, Ken Wyatt AM, could not have come at a better time.

It provided an opportunity for ANMF (SA Branch) CEO/Secretary Adj Assoc Professor Elizabeth Dabars AM to highlight the key recommendations recently made to the Senate Inquiry – The Future of Australia’s Aged Care Sector Workforce.

Ms Dabars sat down with Ken Wyatt to explain the six recommendations in detail.

1. The Australian Government must fund and implement mandated minimum staffing levels and skill requirements for registered nurses, enrolled nurses and assistants in nursing/personal care workers in the aged care sector.

2. That the Australian Government close the wages gap between working in aged care and their public hospital for nurses and assistants in nursing/personal care workers.

3. That dedicated funding is made available by the Australian Government to close the wages gap, and that provision of the funding is conditional on the achievement and maintenance of wage parity.

4. All assistants in nursing/personal care workers (however titled) must be licensed and subject to regulation.

5. All assistants in nursing/personal care workers (however titled) must be required to meet a minimum standard of qualification.

6. That there is a mandated/legislated requirement for 24 hour registered nurse cover for all high care residents in aged care facilities, inclusive of those low care facilities with resident assessed with high care needs.

ANMF (SA Branch) members are concerned standards of care are not improving in line with higher resident charges.

There are fears surrounding a lack of minimum education standards for personal care workers, who do not have to maintain regular professional development or need to have professional indemnity insurance. At the same time, they’re being asked to take on more responsibility, including the administering of medications.

“Staff numbers and the mix of staff providing care needs to be addressed” says Ms Dabars. “A skills gap is looming because older nurses are about to retire and young nurses are still learning. What’s required is better mentoring opportunities and an exit strategy for senior staff.”

The wage gap between aged care and public hospital nursing continues to be a roadblock to change, as it makes it more difficult to attract staff to the sector.

Employers continue to argue the source of the problem were changes to federal funding in July 2015.

“Resident charges are rising and most providers are making a profit above CPI, thus claims of being unable to pay higher wages doesn’t seem to fit” says Ms Dabars.

The ANMF (SA Branch) will continue to address the emerging needs in Aged Care as more residents become increasingly frail in line with our aging population. Adjustments to the workforce will most likely be required to ensure residents with multiple health conditions are receiving the highest quality care.

It’s feared the ratio of care per resident will continue to decline if care providers aren’t forced to make changes.

But Assistant Minister for Health and Aged Care, Ken Wyatt, isn’t convinced that current government regulations for Aged Care providers don’t provide enough of a safety net for residents.

While not going as far as to commit to any real action, the Minister did say “Your points are valid and I would encourage you to keep doing what you’re doing. We need voices advocating for the health sector and workers.”

The National Aged Care and Skills Mix Research project is currently being undertaken by the ANMF in partnership with Flinders University and the University of South Australia. The project is due to be completed in June, with the results to form a basis for our final submission to the Senate Inquiry.
State and Territory leaders have struck a new agreement with the Commonwealth over health funding ahead of this year’s Federal Election. They have accepted an additional $2.9 billion dollars for hospitals over the three years to 2020, following the Council of Australian Government’s meeting held in Canberra on Friday April 1 2016.

But the extra cash will do little to fill the gaping hole left in South Australia’s Health budget as a result of Federal funding cuts announced in 2014. Over 650 million has been slashed from the state’s budget since then.

The ANMF (SA Branch) has been driving a campaign to help close the gap which we believe undermines the principles of fair and equitable access to health.

Health and education should be the first call on the nation’s finances, not the last call. Since the 2014-15 Abbott/Hockey Budget that’s what South Australia has been doing. We’ve been seeking to bring the Federal Government to an acceptance of the proposition that this is a shared responsibility in the national interest.

An acceptance of that shared responsibility has been a key positive out of the COAG agreement.

The other positive is that there has been a modest contribution to the health challenge in the short term with South Australia to receive about $200 million over three years (2017-18 to 2019-20).

This represents about 18 per cent of the cut that was put in by the Federal Government in the 2014-15 Abbott/Hockey Budget. It is obviously a welcome contribution but it doesn’t go anywhere near meeting the size of the cuts.

There is still an important discussion that needs to be had with the Federal Government about additional revenue to meet our health needs.

I have put on the table a proposal to expand the GST to cover financial services – that measure alone would raise about $4 billion per annum.

I have also proposed that National Partnerships for health and education (tied grants or specific-purpose payments that exist between the Federal Government and the states) should be converted into a proportion of income tax. That will give the states access to growing funding which will assist us in meeting the long-term growth in healthcare expenditure.

We’ve reached an in principle agreement to pursue that which is welcome and now the work will begin with the states’ treasurers.

Health and education should be the first call on the nation’s finances, not the last call.

Healthcare for All website here has been urging voters to push Federal MPs in their electorate to commit to reversing the cuts if re-elected.

While any additional money is welcome, it equates to only $3.9 billion of the $16 billion required by 2024/25.

Work is already underway on developing strategies to reduce unnecessary hospital admissions in order to address rising demands on the health system.

But there is more work to be done.

The COAG shakedown

As part of this Agreement, all jurisdictions agreed to take action to improve the quality of care in hospitals and reduce the number of avoidable admissions, by:

- reducing demand for hospital services through better coordinated care for people with complex and chronic disease – the current system does not always provide the care the chronically ill need – this means they are hospitalised more than is necessary;
- improving hospital pricing mechanisms to reflect the safety and quality of hospital services by reducing funding for unnecessary or unsafe care – reducing hospital-acquired complications will improve patient safety; and
- reducing the number of avoidable hospital readmissions – too many patients are readmitted to hospitals as a result of complications arising from the management of their original condition.
- The Commonwealth will continue its focus on reforms in primary care that are designed to improve patient outcomes and reduce avoidable hospital admissions.

More Hospital funding is only a part of the solution to the strain on the health sector.

35 per cent of Australians suffer from a highly preventable chronic condition.

ANMF (SA Branch) will maintain the pressure on our politicians to commit to reversing health funding cuts if they are successful at the up-coming Federal Election which may be held as early as July.

Help support the Healthcare for All campaign by signing the petition here.
Sarah believes everybody deserves respect, including the homeless. She fights for their rights to quality health care. She becomes a familiar face for those that need help.

Tickets now on sale

Join us to celebrate 10 years of excellence in nursing at the 2016 HESTA Australian Nursing Awards, Thursday 12 May

hestaawards.com.au

Nurses across the country have joined forces to push for better protection for those working in remote locations in the wake of the tragic death of Gayle Woodford.

Easter celebrations were rocked by revelations the 56-year-old’s body had been found in a shallow grave near Fregon in the APY lands of South Australia, after she’d responded to a late night call-out.

ANMF (SA Branch) CEO/Secretary, Elizabeth Dabars, sent a message of condolence to Gayle’s family and friends through the media.

“I was saddened to hear this tragic news during a holiday period when we should all be enjoying time with our families and would like to offer my deepest sympathy to Gayle’s family and friends. Gayle was a wife and mother, like all nurses she dedicated her life to helping others and her life should not have been taken in this way. This has further highlighted the need for improved security and protection of all nurses whether they work in rural or metro areas.”

Social Media soon became flooded with images of nurses wearing bandages on their upper arm in solidarity.

#GaylesLaw began trending on Twitter and Facebook as users responded to calls to sign a petition pressuring the Federal Health Minister, Sussan Ley, to abolish single nurse posts in Australia and make it mandatory for two responders to attend all after hours call outs in Government, Indigenous Health Corporations and Not For Profit health centres across Australia.

ANMF federal office has been seeking changes to staffing arrangements for Remote Area Nurses for several years.

A major project undertaken in conjunction with the Rural Doctors Association of Australia (RDAA) in 2013 culminated in the development of a website here which provides information on Worksafe practices.

ANMF (SA Branch) has written to Senator Nick Xenophon to take up his offer to propose a resolution in the Senate seeking action in this area.

Tributes continue to flow for Gayle, a mother-of-two, who’s been described as someone who loved nursing and genuinely caring for people in need.
It’s hard to believe the Easter break is behind us already. 2016 appears to be moving so fast. The holiday period highlighted the sacrifice made by nurses, midwives and personal care workers who are often working while their families are relaxing.

So we asked for your stories on the impact of shift work on your family life as part of our campaign defending penalty rates. We have been inundated with stories which highlight the importance of penalty rates in helping to compensate for the sacrifice made by our members.

One of the most heartbreaking responses was from Tracy:

Because of shift work I missed Easter and Mother’s Day with my kids last year. Turned out to be my last with our two year old daughter Emily as she passed away in September last year.

In 2015, I had to go back to work as our finances were being severely affected. I went back in February. This had a huge impact on the whole family who became used to having me home particularly on weekends, to give them the emotional support they all required due to Emily’s illness.

I have three other children. In the short time I was back I worked on very special occasions, with a very inflexible roster, and if I had stayed I would’ve had to work Christmas. Then of course there was the lack of sleep. Emily’s condition caused a lot of sleepless nights. Now why would I do that if I wasn’t compensated with penalty rates!??

This good Friday will be 6 months since Emily passed away. I have three other children. In the short time I was back I worked on very special occasions, with a very inflexible roster, and if I had stayed I would’ve had to work Christmas. Then of course there was the lack of sleep. Emily’s condition caused a lot of sleepless nights. Now why would I do that if I wasn’t compensated with penalty rates!??

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People who have never done shift work don’t understand how tough it is but also from my point of view how important they are to help you financially when you are having to deal with a very personal family issue, in this case my daughter Emily’s severe illness.

Emily sadly passed away on 25th September 2015 of a yet to be diagnosed extremely rare neurological disorder which caused her to be physically unable to make any voluntary movements.

There are numerous accounts of our members feeling they’re missing out on precious memories.

Alanna puts it like this:

I am super close with my family and ever since I was born.

Sunday dinners with my parents, brother, grandparents and uncle have been a ritual. Since starting shift work, I have missed lots of these dinners. I cherish my grandparents who are getting older every day, and wish I was able to spend more time with them.

Sunday shifts means extra money for me to pay the bills, so I can’t turn them back (as much as I would love too).

My dad and my partner also work long hours, so trying to spend time with them around morning, afternoon and night shifts has become really really hard.

I have never cherished precious moments with my family more than I do now. I love being a nurse, but I also love my family to pieces and shift work definately makes it a lot harder to see them and spend quality time with them. For others it’s not so much about the fun they’re missing but the pressure of family responsibilities.

It’s wonderful that members have shared their real life stories about shift. Thank you all.

It has sparked debate on why we’re campaigning on this issue when the Federal Government says it’s not proposing change for our members following the recent Productivity Commission report which targets other sectors for immediate change.

The simple answer is that the attack on penalty rates for other workers in the retail and hospitality sectors continues unabated.

If the moves to cut penalty rates for work on Sundays for these workers are successful, no doubt it will be used by employers in other sectors to argue the case for change in those areas too.

After all, if the argument is that Sunday work or work on other days or times of the day is not as important as it once were for some workers, those same arguments can surely be used elsewhere.

With the ANZAC Day long weekend now firmly circled on the calendar, we continue to defend penalty rates on public holidays in our ongoing effort to get the best possible outcomes for our members.

We want to hear from more ANMF (SA Branch) members regarding the impact of shift work on your family life.

How to send your stories to us

Click here to email us and we will add your story as part of our campaign to protect penalty rates for not only health care workers but for all the hard working people in Australia who need penalty rates.

You can also post directly on our Facebook page here.
Our state’s hospital Emergency Departments aim to provide a safe haven for patients needing urgent care.

But that capacity can be compromised by intoxicated patients, with new research showing almost all nurses and doctors in Emergency Departments have experienced violence in the workplace.

Whilst medical and nursing staff may have a duty of care, they should expect to be able to carry out their work in a safe environment.

The ANMF (SA Branch) has stepped up a campaign to better protect the safety of its members.

ANMF (SA Branch) CEO/Secretary, Elizabeth Dabars, says “a zero tolerance approach will see aggressive patients turned away if hospital administrators don’t more to stop the violence.”

Click here for more from a recent interview between Elizabeth Dabars and Leon Byner on Saa

A 2014 State Government policy introduced laws that would jail people assaulting hospital medical staff for up to twenty five years.

SA Health has indicated it will support nurses where there is a prosecution, but it isn’t aware of any to date.

Our feedback suggests violent cases have not resulted in charges because nurses and doctors don’t feel supported by hospital administrators.

The ANMF (SA Branch) continues to lobby SA Health to provide separate areas for dealing with drunk or drug-affected people.

We are eagerly awaiting a new public awareness strategy similar to that of recent SA Ambulance campaign urging better treatment of ambulance officers, from the public, and will continue to work with SA Health to ensure the safety of medical staff.

Similar to the SA Ambulance campaign, a poster promotion on the London Underground in 2012 urged “Don’t take it out on our staff”:

Rolling out at above ground stations, buses, trams and newspapers across the UK, it encouraged would-be perpetrators to think twice about abusing staff.

The message is crystal clear. Crime on London’s transport system will not be tolerated.

Transport of London staff are encouraged to report instances of abuse, whether physical or non-physical. Funds have also been set-aside for workplace violence police officers, case investigators and to provide victims with support.

In the months following the campaign’s introduction, reported cases of abuse rose 17 per cent while transport crime slumped to an eight year low.
International Nurses Day is celebrated around the world every May 12, the anniversary of Florence Nightingale’s birth. This year’s international theme is ‘Nurses: A Force for Change: Improving Health Systems’ Resilience’.

International Midwives Day is celebrated each year on May 5. This year’s international theme is ‘Women and Newborns: The Heart of Midwifery’.

To celebrate International Nurses & Midwives Week, the ANMF (SA Branch) will be setting up a display at Tea Tree Plaza Shopping Centre on 12 May 2016 from 10am – 2pm.

We’ll have free coffee vouchers for members, blood pressure checks for the public and will be encouraging the public to participate in our celebrations by writing their own message to nurses, midwives and personal care assistants as to why they love them, using up to 8 words.

This will show our own members how the public values your work!

What you can do to participate

We’re also encouraging nurses, midwives and personal care workers to fill out your own versions of these cards to tell us why you love your job and we want to share these stories on our website and social media pages to highlight the great job you do every day.

You can download the ‘why I love my job’ card relevant for your role [here](#).

Ask a workmate to take a photo of either the completed card or you holding the card and send it to us [here](#).

We will then add them to our photo gallery on the website and also Facebook and Twitter with the hashtag #INNMWD2016

Keep an eye out in your mailboxes for our new ‘In Practice’ magazine which includes more background on our celebrations for International Nurses & Midwives week (coming soon in your mailbox).

New Royal Adelaide Hospital Delay

Delays to construction of the new Royal Adelaide Hospital (RAH) have prompted the State Government to issue a default notice against the construction consortium, SA Health Partnerships (SAHP). Withholding one million dollars per day in service payments is the highest sanction it can impose, short of ripping up the contract.

A revised expected completion date of May 25 2016 already appears to have blown out to August 2016, with fears it could move into the new year.

It is hoped the most recent action will start a legal process to force the builders to commit to a completion date.

ANMF (SA Branch) CEO/Secretary Elizabeth Dabars says it’s “extremely difficult to plan for the transfer to the new Royal Adelaide Hospital. That’s why we are pleased to see some level of action being taken in order to try and produce some certainty in the matter.”

The State Government is also searching for a location to store more than half a million paper medical records because of delays to the introduction of an electronic record storage system (EPAS) at the RAH.

Historic patient records appear set to be stored off-site because the building’s design failed to provide capacity for storing paper records in bulk.

ANMF (SA Branch) is seeking assurances about the State Government’s storage plans ahead of the expected introduction of EPAS mid-next year.

Ms Dabars says “it’s not good enough to say that there should be delays associated with obtaining those records and that’s why we’re seeking information about how they’re going to provide access and how they’re going to ensure confidentiality of those records as well.”

View the news report video here

Take advantage of our FREE FIRST APPOINTMENT offer and DISCOUNTED RATES for ANMF (SA Branch) Members.

Rebecca Lewis, Senior Associate at DBH Family Lawyers was a Registered Nurse for over 20 years and has been practicing family law for more than 10 years. This experience in nursing and law puts Rebecca in a unique position to understand the specific issues affecting ANMF (SA Branch) members.

Call Rebecca Lewis to arrange your free first appointment at our office at 66 Wright St, Adelaide.

DBH FAMILY LAWYERS

FREE CALL 1800 324 324

Win one of 10 double movie passes!

The ANMF (SA Branch) has 10 double passes to give away to the new movie ‘The Angry Birds’.

In the 3D animated comedy, The Angry Birds Movie, we’ll finally find out why the birds are so angry. The movie takes us to an island populated entirely by happy, flightless birds – or almost entirely. In this paradise, Red (voiced by Jason Sudeikis), a bird with a temper problem, speedy Chuck (voiced by Josh Gad), and the volatile Bomb (voiced by Danny McBride) have always been outsiders.

But when the island is visited by mysterious green piggies, it’s up to these unlikely outcasts to figure out what the pigs are up to. Only in Cinemas. May 12.

www.theangrybirdsmovie.com.au

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For your chance to win, simply email enquiry@anmfsa.org.au with the subject:

‘The Angry Birds Movie Competition’

by Friday 22 April. Don’t forget to include your name and membership number with your entry!
RESEARCHING SUPERVISORY BEHAVIOURS IN THE WORKPLACE

“We would like to identify the specific workplace behaviours of supervisors that have either a positive or negative impact.”

Supervisors play an influential role in how employees experience their workplace and can have a major impact on their health and well-being - just ask any group of nurses or midwives.

There’s a growing body of research evidence about how managers contribute to stress and negative outcomes, but it’s balanced by the evidence that demonstrates the positive influence managers can have.

The ANMF (SA Branch) is working with the Asia Pacific Centre for Work Health and Safety at UniSA to conduct research into supervisory behaviours in the workplace that can be applied to nursing and midwifery.

“We would like to identify the specific workplace behaviours of supervisors that have either a positive or negative impact,” says Associate Professor Michelle Tuckey.

Prior work by the team at UniSA has identified there are some key areas where the behaviour of a supervisor can actually make workers feel mistreated, when the manager acts in one of three ways:

1. Administrate and coordinate the work such as ensuring fair rosters and approving access to leave
2. Manage work performance including tackling under-performance, allocating tasks and roles
3. Create a safe and respectful working environment (acting honestly and fairly and safeguarding well-being).

When supervisors perform well in these three areas, workers are likely to feel valued in their workplace and experience greater mental health and well-being.

The researchers are interviewing nurses and midwives to identify the specific behaviours that are related to good and poor performance, and this will help develop into a risk auditing tool.

“We aim to develop a tool that can be used within hospitals to predict potential threats to mental health and well-being, like workplace bullying. Using the tool to understand and optimise positive supervisor behaviour in hospitals should ultimately improve the working lives of nurses and midwives and promote greater job satisfaction and well-being” said Assoc Prof Tuckey.

By participating in the research, nurses and midwives can contribute vital information towards this practical tool. In recognition of each research participant’s time, a $30 gift voucher will be provided by the Asia Pacific Centre for Work Health and Safety at UniSA.

If you would like more information about this research, or would like to participate, please contact:

- Annabelle Neall (Research Assistant) on 08 8302 1740 during business hours, or via email annabelle.neall@mymail.unisa.edu.au; or
- Michelle Tuckey (Project Leader) via email michelle.tuckey@unisa.edu.au.

UPDATING CLINICAL SKILLS

The prospect of returning to the ward after a period of time out of clinical practice can be a bit daunting. There may be new legislation to consider or new regulations regarding the way medications are administered. The Australian Nursing and Midwifery Education Centre (ANMEC) can ease the pain with a Clinical Skills Update Session.

ANMEC Nursing and Midwifery Education Centre Lead Jo Wagner says “we cover a lot in six hours, including simulated training to understand managing a deteriorating patient”.

It has proven worthwhile for Kerry Rochow who attended the most recent session on 23 March 2016.

Kerry is a registered nurse who’s been out of clinical practice for four years.

“I would recommend it. It was a good refresher and the presenters had relevant information. They were really knowledgeable and the environment was non-threatening” she said.

Another Clinical Skills Update Session is planned for July.

It’s suitable for Registered Nurses, Midwives, Enrolled Nurses and Personal Care Assistants.

Date/time: Friday 29 July 0900-1600
Cost: Members $120 Non-members $150

For more information, or to Enrol, please click here.

Graduate Diploma of Strategic Leadership BSB80215

Develop contemporary and strategic healthcare leadership skills by studying with the Australian Nursing and Midwifery Education Centre.

Topics covered include:
- Contemporary leadership practices
- Responding to and leading change
- Strategic planning
- Human resource management
- Ethical leadership
- Financial leadership

This nationally recognised course is 12 months full time (blended learning) utilising the latest in evidence based practice. Progress your nursing career today!

For more information, visit www.anmec.edu.au or call 08 8334 1900

The Australian Nursing and Midwifery Education Centre is a service of the Australian Nursing and Midwifery Federation (SA Branch) (RTO code 40064).

Authorised by Adj Assoc Professor Elizabeth Ollens AM, CEO/Secretary, ANMF (SA Branch) ABN 95 969 485 175, 191 Torrens Road, Ridleyton, SA 5008

30 April 2016 cut off date for research participants
**PALLIATIVE NURSING CARE – CONTEMPORARY NURSING PRACTICE (CPD 3 HOURS)**

This session will discuss the definition of palliative care and explore contemporary nursing care in this setting, including improving symptom assessment skills and symptom management. It will also include strategies for dealing with bereavement and psycho-social issues common to this area of nursing.

Presented by Janine Randell, Palliative Care Nurse/Psychotherapist

Skill level: Introductory

Suitable for: Registered Nurses, Registered Midwives, Enrolled Nurses and Personal Care Assistants

Date/time: Monday 9 May 1300-1600

Cost: Members $110 Non-members $140

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**ANXIETY AND DEPRESSION – CONTEMPORARY NURSING PRACTICE (CPD 3 HOURS)**

The session will enable participants to understand contemporary practice related to the management of anxiety and depression. Review differing types of anxiety and depression and explore counselling methods and self-help tips. It will also review specific tests and assessment skills.

Presented by Janine Randell, Palliative Care Nurse/Psychotherapist

Skill level: Introductory

Suitable for: Registered Nurses, Registered Midwives, Enrolled Nurses

Date/time: Monday 9 May 0900-1200

Cost: Members $110 Non-members $140

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**INFECTION CONTROL (CPD 2 HOURS)**

This 2 hour session will enable participants to maintain their annual competency in this area. The session includes an overview of infection control including basic principles of infection prevention, what's new in infection control and elements of an infection control program.

Presented by ANMEC Education Team

Skill level: Introductory

Suitable for: Registered Nurses, Registered Midwives, Enrolled Nurses and Personal Care Assistants

Date/time: Tuesday 26 May 1300-1500

Cost: Members $50 Non members $70

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**THE PORTRAIT, THE MIRROR, THE LANDSCAPE: WORKING WITH RESPONSIVE BEHAVIOURS (CPD 6 HOURS)**

In this session delivered by the Dementia Training Centre, participants will have the opportunity to understand models of behaviour and be able to use concept mapping, clarify and investigate factors which contribute to behaviour such as pain, medication, delirium and the psychosocial environment and increase capacity to evaluate care practices and apply psychosocial strategies.

Presented by Holly Markwell, Dementia Educator, Dementia Training Centre

Skill level: Advanced

Suitable for: Registered Nurses and Enrolled Nurses – Senior Clinician

Date/time: Tuesday 31 May 0930-1630

Cost: Members $70 Non-members $100

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**PROFESSIONAL PRACTICE**

**DEVELOPING A PROFESSIONAL PORTFOLIO (CPD 2 HOURS)**

This information session enables participants to explore the AHPRA endorsed registration standards and code of practice, including the ‘Continuing Professional Development Standard’. It will discuss the role of a Professional Portfolio and its relationship to practice and explore the role of reflective practice in continuing competence.

Presented by ANMEC Education Team

Skill level: Introductory

Suitable for: Registered Nurses, Registered Midwives and Enrolled Nurses

Date/time: Thursday 28 April 0900-1100

Cost: Members $70 Non members $100

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**GENERAL**

**HAZARDOUS MANUAL TASKS (FORMERLY KNOWN AS MANUAL HANDLING) (CPD 3 HOURS)**

This 3 hour update enables participants to maintain their annual competency in this area. The session includes an overview of the ‘No Lift, No Injury’ policy and will allow participants the opportunity to review and practice the principles of manual handling.

Presented by ANMEC Education team

Skill level: Introductory

Suitable for: Registered Nurses, Registered Midwives, Enrolled Nurses and Personal Care Assistants

Date/time: Monday 6 June, 1300-1600

Cost: Members $90 Non-members $120

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**NO LIFT, NO INJURY INSTRUCTOR UPDATE (CPD 4 HOURS)**

This interactive 4 hour session enables participants who have previously completed the 3 day ‘No Lift, No Injury’ Instructor Course to maintain annual competency in this area.

Presented by ANMEC Education Team

Skill level: Advanced

Suitable for: Registered Nurses, Registered Midwives, Enrolled Nurses and Personal Care Assistants

Date/time: Friday 20 May, 0900-1300

Cost: Members $100 Non-members $140

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All CPD topics are taught by qualified practitioners and educators.

To register click here
The ANMF (SA Branch) has **four holiday homes available** for members to rent at a heavily discounted rate:

- Hazel Street, Goolwa Beach
- Gordon Street, Goolwa Beach
- Furner Crescent (house), Port Hughes
- Furner Crescent (unit), Port Hughes