Radiology Nursing: Aoteoroa New Zealand Experience

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Introduction

- Origins of the New Zealand health system and nursing practice
- Contemporary inequalities in access to health services / medical imaging
- Nursing infrastructure
- Cultural Safety & Te Whare Tapa Wha
New Zealand History

- 1250-1300AD Polynesian Maori
- Sighted: Abel Tasman 1642; Landed: Captain James Cook 1769
- 1840 Treaty of Waitangi signed, between British Crown & Various Maori Chiefs
- 1907 NZ becomes a dominion (self governing under Britian)
- 1975 Treaty of Waitangi & Tiriti o Waitangi legally binding
NZ Leading the World

Women the Vote
Kate Shepherd

Register Nurses
Ellen Dougherty
Geographically
Public Health

- Ministry of Health funds 20 District Health Boards
- Everybody has access to free outpatient/inpatient hospital services
- Subsidized GP/primary care visits (under 13 free) ↑ $$ for some
- Community services card / high user cards
- $5 NZ per prescription (Pharmacy schedule)
- Hospitals are free: busy ED. (6 hour target)
- Specialist only referrals for CT, MRI, NM
- Accident Compensation Corporation
- Medical insurance nicety, not a necessity
Public Health Workers

- Each profession has a national MECA
- Each profession has grades, steps, levels
- Pitfalls: not adjusted for cost of living
- Radiology pitfalls: managing individual performances
- No financial incentives (no medicare)
Nursing Legislative Framework

- Nurses Registration Act, 1901
- Evolving Changes to the Nurses Act
- Health Practitioners Competence Assurance Act, 2003
- Competency based annual practising certificates
- Health & Disability Commissioner Act (Code of Rights).
Scopes of Practice

Nurse Practitioner 0.02% (n=136)

Registered Nurse 94% (n=45,000)

Enrolled Nurse 6% (n=3,000)

Nursing Council NZ, 2014
Nursing Leadership

- Appointed by the Minister of Health as part of the executive leadership team
- Provides expert advice on nursing to Government
- Provides professional leadership to the nursing profession in New Zealand
- Ensures an effective New Zealand contribution to nursing and health policy in international fora

Dr Jane O’Malley
Chief Nurse
Medical Titles

- Specialist/Consultant (Attending)
- Registrar (Fellow)
- House Surgeon
- Intern (last year medical student)
- 2\textsuperscript{nd} year, 3\textsuperscript{rd} year etc medical student

(NZ: Two schools of medicine)
Nursing Conditions

US $ 1 = NZ $1.28

- New graduate (hospital) $47,538 NZ
- 5 year RN (hospital) $64,163 NZ
- Senior nurses MECA (Grades & Steps)
  Grade 1, level 1 $68,528 NZ
  Grade 8, level 4 $110,503 NZ

Penals: T1.25 Nights       T1.5 Weekends       T2.0 Public hols
On-call: $4.04 per hour; $6.06 public holidays
APC: paid by employer      PD 32 hours +1 day; +2 days
4 weeks annual leave + 1 week (> 5 yrs) + 1 week (shift)
Nursing Career Advancement

- New Grad Programme
- Prof Development Recognition Programme ($2,500 proficient; $4,000 expert)
- District Health Board: Fully funded post graduate studies (Ministry of Health)
- Post graduate qualification to career progression mismatch

Benner (1984)
Nursing in NZ 2º Separation

- Networking
- Consultation
- Collaboration
- Fellowship
- Sharing of food
Industrial & Professional Partnership

- New Zealand Nurses Organisation (ICN affiliated)
- Industrial (regions) and Professional (colleges & sections)
- President & Kaiwhakahaere (Upholding TOW)

Marion Guy & Kerri Nuku
NZNO

- 46,000 members
- $500 NZ p.a
- Union/professional representation
- Policy analysts, submission support
- Webpage support
- Membership database
- Business management/auditors
- Professional nursing advisor
Evolution of NZ Radiology Nursing

- Cardiology & Radiology Interventional & Special Procedures (CRISP) Nurses, 1985
- Working party formed: Join either MINA (Australia) or New Zealand Nurses Organisation as a special interest group, 2007
- Renamed to Medical Imaging Nurses New Zealand, voted to join the Perioperative Nurses College of NZNO, 2009
Joining Perioperative Nurses College

- Guiding principles (TOW)
- Perioperative Continuum focus
- Fully integrated members
- Medical imaging free papers, awards, concurrent session, weblink
- Annual conference, rotates regionally
- Long standing trade support
- The Dissector Journal
- Make submissions
- Trans-Tasman relationship, IFPN
Radiology in NZ

- Diverse patient group and acuity
- RIS PACS (Carestream)
- Electronic referral; faxed, delivered then scanned in
- Discuss face to face and phoning
- Interventional work vetted by radiologist
- To progress request, referring team talks to the nurse
NZ Radiology Nurses

- Nursing care across modalities
- Diagnostic & Interventional procedures
- Patient education & nursing assessment
- Check bloods, pre-procedure instructions
- ACLS certified, Health & Safety, Infection Control
- IV cannulate / PICC inserters
- Guideline development; pt resources
- Nursing reporting to nursing
NZ IR Nurses

- Guidance to referring team/nursing team
- IR: first assist/scrubbing (nursing space)
- IR: circulating/sedation (nursing space)
- IR: patient worklist (↑ nursing space)
- IR: nurses know the IR room
- Equipment /inventory (nursing)
- Nursing leader sources ‘new product’
New Zealand nursing scope of practice

- Scope (NP, RN, EN)
- Domains
- Competencies
- Indicators
Cultural Safety

- Nursing concept from New Zealand
- Extends beyond cultural awareness & cultural sensitivity
- Process of self reflection on your own cultural identity
- Recognises the impact that personal culture has on professional practice

Ramsden (1992)
Cultural Safety Definition

The effective nursing practice of a person or family/whanau from another culture, and is determined by that person or family. Culture includes, but is not restricted to, age or generation; gender; sexual orientation; occupation and socio-economic status; ethnic origin or migrant experience; religious or spiritual beliefs; and disability.

The nurse/midwife delivering the nursing/midwifery service will have undertaken a process of reflection on his/her cultural identity and will recognize the impact that his/her personal culture has on his/her professional practice. Unsafe cultural practice comprises any action which diminishes, demeans or disempowers the cultural identity and wellbeing of an individual.
RN Competency 1.5

Practises nursing in a manner that the health consumer determines as being culturally safe.

- **Indicator:** Applies principles of cultural safety in own practice.
- **Indicator:** Recognises the impact of the culture of nursing on health consumers care and protects the health consumers’s wellbeing within this culture.
- **Indicator:** Practises in a way that respects each health consumers’s right to personal beliefs, values and goals.
- **Indicator:** Assists the health consumer to gain support from those who understand the health consumer’s culture, needs and preferences.
- **Indicator:** Consults with members of cultural and other groups as requested by the health consumers.
- **Indicator:** Reflects on own practice and values in relation to the health consumers’s age, ethnicity, culture, beliefs, gender, sexual orientation and/or disability.
- **Indicator:** Avoids imposing prejudice on others and provides advocacy when prejudice is apparent.
RN Competency 1.3

Demonstrates the ability to apply the principles of the Treaty of Waitangi Te Tiriti o Waitangi to nursing practice.

- **Indicator:** Understands the Treaty of Waitangi/Te Tiriti o Waitangi and its relevance to the health of Maori in Aotearoa/New Zealand.
- **Indicator:** Demonstrates knowledge of differing health and socio-economic status of Maori and non-Maori.
- **Indicator:** Applies the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice.
Te Whare Tapa Wha
In summary

- Treaty of Waitangi underpins NZ society
- Influences NZ nursing culture
- NZ radiology nurses have professional representation within the Perioperative Nurses College NZNO
- Partnership & networking is critical
References


