

Office of the Chief Nursing and Midwifery Officer



Year in review 2017-18



Transforming Queensland



Innovating nationally



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Clinical Excellence Division
Creating solutions for better healthcare



Queensland
Government

OCNMO Year in Review 2017–18

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For more information contact:

Office of the Chief Nursing and Midwifery Officer, Department of Health,
GPO Box 48, Brisbane QLD 4001, email ChiefNurse-Office@health.qld.gov.au,
phone 07 3328 9830.

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Introduction



Shelley Nowlan

Chief Nursing and
Midwifery Officer

Adjunct Professor – School
of Nursing, Midwifery and
Social Work, University of
Queensland
Adjunct Professor – School of
Medicine, Griffith University

The Office of the Chief Nursing and Midwifery Officer (OCNMO) continues to promote the professions of nursing and midwifery within Queensland, nationally and internationally. Throughout 2017 and 2018 our projects and initiatives remain true to this role. The profile of nursing and midwifery in Queensland continues to grow and develop within a dynamic environment. The OCNMO works in collaboration with the private and public sectors in Queensland, nationally and internationally to achieve its goals. It is through these partnerships that we have been successful in achieving and continuing our visions and mission for nursing and midwifery in Queensland.

Increasing the capability and capacity of nursing and midwifery workforces is incredibly important to the future of our health system. As the international Nursing Now campaign co-chair Lord Nigel Crisp mentioned in his

opening address at our Passionate about Practice Symposium, over the coming years nurses and midwives will be called up to take a leading role in healthcare locally, nationally and internationally. They will be called upon to fill emerging gaps in services, and to support the delivery of care through new models of care.

Nurses and midwives will be pivotal as we re-orientate our health system from the current acute tertiary hospital model of care, which was established to suit the health needs of a community a generation ago, to more community based primary health care. A community based primary health care model will better suit the management of chronic diseases which are burdening our community today, and for the foreseeable future. Nurses and midwives will also be pivotal in ensuring that the community receives compassionate and appropriate care. That we advocate for best practice models, such as continuity of care models in midwifery and primary health care.

This next period in the history of healthcare will bring many opportunities for nurses and midwives, but equally many challenges. Especially as much of this will occur during an unprecedented time of change, as 39 per cent of our current nursing and midwifery workforce have indicated that they may leave the nursing and midwifery profession over the next 10 years. While we wish them well, this will see newly qualified nurses and midwives being called upon to take on these roles. This will include them moving into specialty areas or taking on complex workloads significantly earlier in their careers. They will also be asked to take on roles and responsibilities that may be new to their professions, and undoubtedly, they will be involved in decision making like never before.

While these challenges are real, I am confident that we will be able to manage them. In addition to having enthusiastic students and new graduates, we have some of the most educated nurses and midwives in the world. The OCNMO is committed to strengthening the nursing and midwifery workforce with significant investment in graduate recruitment, nurse navigation, workload management and continuity of care.

The year in review provides a snapshot of the achievements the five program areas in OCNMO (Governance and Stewardship, Workforce Sustainability, Practice Innovation, Professional Capability and Midwifery) have achieved underpinning our team effort. Thank you to those who have worked in partnership with us, for your support and involvement. We look forward to continuing our partnership in the years to come continuing to strengthen the voice of the nursing and midwifery professions well into the future.

Office of the Chief Nursing and Midwifery Officer

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Vision

Nursing and midwifery will lead policy development, ensuring a person's health needs and choices are prioritised, to deliver healthier sustainable communities.

Mission

The OCNMO is leading Government policy for a healthy and sustainable future for Queenslanders. We are doing this through a strong team culture, which is committed to the role of nurses and midwives as leaders in translating innovation and evidence across different contexts of care.

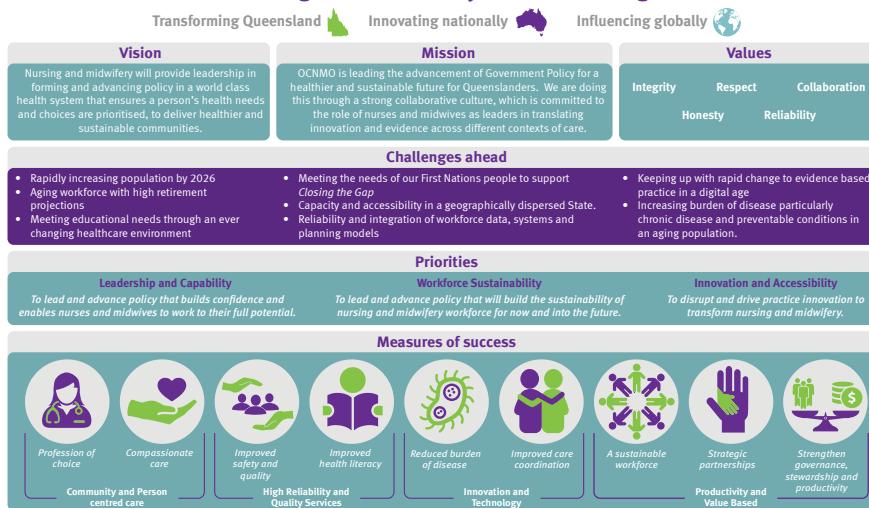
Strategic priorities to 2026

The OCNMO has undertaken significant consultation in developing our strategic priorities to 2026. Various consultation sessions identified the overarching desired future image of nursing and midwifery. This was described as:

- Ensuring nursing and midwifery have a voice at key decision making forums – leading professional and facilitating government initiatives, influencing partners and driving policy frameworks.
- Measuring the contribution of nursing and midwifery to healthcare service provision and outcomes, tell and sell our story and ensure the social impact is as valued as the economic short-term focus.
- Driving and supporting the development, implementation and sustainability of nurse/midwifery led models of care in the right setting and in partnership with consumers. Influence models of care and service design which value nurses and midwives.
- Facilitating access to appropriate resourcing and recruit to the Business Planning Framework.
- Working in partnership with key stakeholders in policy leadership decision-making and implementation of programs and evaluation. Sustainability will require stronger networks and partnerships with public, private and Non-Government Organisations (NGO).

- Focusing on Closing the Gap and consumers affected by social determinants of health.
- Keeping the technology and the system of care human (augmenting nursing and midwifery) by being at the table through advocacy in solution design, implementation and evaluation
- Investing in nursing and midwifery leadership at all levels and settings ensuring nurses and midwives are engaged and have the capability to influence future directions.

Office of the Chief Nursing and Midwifery Officer Strategic Priorities to 2026



Overview of programs

The OCNMO works within a program governance structure which enables the delivery of our vision and mission for the nursing and midwifery professions in Queensland. These are:

- **Governance and Stewardship**
 - Providing high level strategic, policy and operational leadership to the OCNMO, the Department of Health and Hospital and Health Services (HHSs). This is achieved by overseeing and leading effective program and project management; aligning and coordinating key strategic initiatives; and assisting the office to achieve key performance outcomes.
 - Leadership in the design, implementation and continuous improvement of the integrated planning, strategy and business management and strategic communications frameworks and systems.
- **Midwifery**
 - Leading and enabling midwives to provide a high standard of care across the woman's continuum, empowering professional capacity, enhancing midwifery workforce sustainability and enabling midwifery innovation by:
 - Enabling midwives to be autonomous primary maternity carers, by supporting and enabling them to work to their full scope of practice, thus attracting and sustaining a highly skilled midwifery workforce.
 - Ensuring that care is woman-centred, informed by evidence, provided with a known carer, is respectful of diversity whilst being developed and maintained through collaborative partnerships with consumers and maternity stakeholders.
 - Ensuring Queensland women and their babies receive the highest standard of safe, quality midwifery care that meets the expectations and needs of the woman, their families and the community across Queensland.
- **Practice Innovation**
 - Developing nursing and midwifery practice models incorporated within the domains of leadership, management, education, clinical

and research, in both a decision making and advisory capacity. The Program assists in developing and informing innovation through best practice models of care, role innovation, and nursing and midwifery-led and advanced practice models.

- Collaboration in the development, implementation, and evaluation of innovative nursing and midwifery practice and service delivery models, enabling the achievement of excellence in consumer and service outcomes with HSSs, Clinical Excellence Division (CED) partners, and all professions.
- Enabling the translation of innovative models of care into practice which are cost effective and improve health outcomes.
- **Professional Capability**
 - Providing strategic leadership to ensure the nursing and midwifery professions are enabled to work to their fullest potential, and maximum benefits are achieved for consumers and the community we serve. This Program is underpinned by the values and principles of the nursing and midwifery professions, and aims to create opportunities that support the enhancement of nurse and midwife leadership at all levels.
 - In partnership with regulators, educators and service providers the program supports the development of innovative and responsive educational programs and pathways that:
 - promote professional accountability;
 - prepare nurses and midwives for dynamic and varied clinical environments and practice settings; and
 - provide a solid foundation for specialisation and participation within the health system more broadly.
 - Providing expert advice on legislation, regulation and other professional governance structures, to enable nurses to engage their full scope of practice.
- **Workforce Sustainability**
 - Development of nursing and midwifery workforce planning, workforce attraction and development plans to enable the delivery of a sustainable nursing and midwifery workforce that meets the current and future health needs of Queenslanders.

- Facilitates the availability of appropriate nursing and midwifery resources across the state through supporting the application of the Business Planning Framework and minimum nurse-to-patient ratio legislation.
- Responsibility for influencing education and research aimed at achieving excellence in nursing and midwifery care delivery, and contributing to care that is aligned with nursing and midwifery priorities and strategic direction.

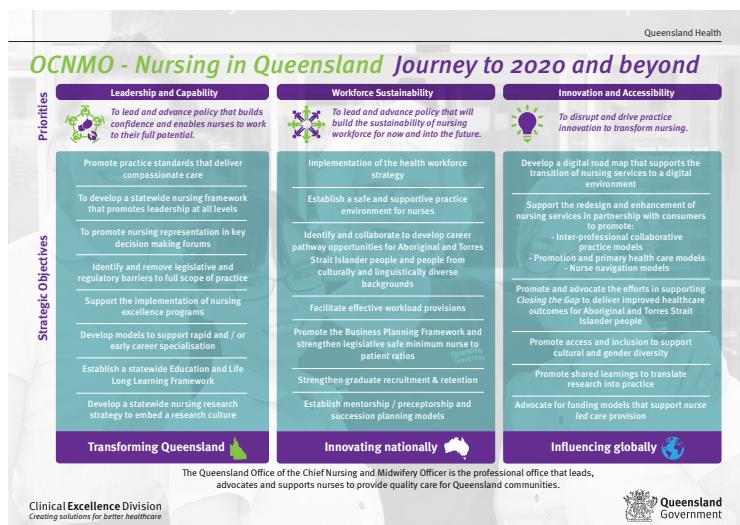
The nursing and midwifery landscape in 2017–18

- Queensland Health nurses and midwives comprise 14.6 per cent of the total Queensland Government workforce.
- Over 38 per cent of the total Queensland Health workforce are nurses and midwives.
- There are 483 nurses and midwives who identify as Aboriginal and/or Torres Strait Islander across the State.
- Approximately 1,272 nurses and midwives are employed in rural and remote Queensland.
- Queensland Health employs the largest number of Nurse Practitioners nationally, with approximately 220 currently employed across the state.
- Nursing and midwifery graduates comprise 5.7 per cent of the total nursing and midwifery workforce in Queensland Health.
- Queensland has 148 or (36 per cent) of the nation’s midwives who are endorsed to prescribe scheduled medicines.
- Queensland has 11 public hospitals with access agreements for private practicing midwives to admit women in their care, which is the highest number nationally.
- Within 27 maternity hospitals in the state, 16 per cent of Queensland midwives are employed within a midwifery continuity of carer model.
- Approximately 20 per cent of the National Enrolled Nurse workforce have Queensland as their principal place of practice.

Nursing tactical plan to 2020 and beyond

The OCNMO developed a five-year tactical plan for nursing with the goal of:

- Being at the table, setting the agendas, influencing partners, articulating our position and representing nursing confidently and broadly,
- Establishing measures to determine the value of care financially – articulating the non-tangible benefits of nursing and the financial impact,
- Being responsive to the emerging context, influencing the social agenda, nurses leading social whole-of-person perspective in social debates (culture, strategy and gender equality),
- Implementing sustainable practice in nursing and drive environmental healthcare practices,
- Enabling nurses' involvement in making laws and driving legal frameworks, understanding legal requirements and ethical decisions,
- Keeping the system of care human by being at the table through advocacy in solution design, implementation and evaluation, and
- Maximizing technology to drive and create innovative models of care through tapping into and harnessing the repository of knowledge, information and skills that is nursing.



Midwifery tactical plan to 2020 and beyond

The OCNMO developed a five year tactical plan for midwifery with a goal of:

- Enabling Queensland women and their babies receive the highest standard of safe, quality midwifery care that meets expectations and the needs of women, their families, and community.
- Midwives are enabled to work to their full scope of practice, thus attracting and sustaining a highly skilled midwifery workforce.
- Midwifery care is woman-centred, evidence informed, and is provided with a known carer. Care is respectful of diversity and developed and maintained through collaborative partnerships with consumers, health professionals, and maternity stakeholders.



Our key forums

Queensland Nursing and Midwifery Executive Council

The Queensland Nursing and Midwifery Executive Council (QNMExC) provides strategic advice and recommendations to the Chief Nursing and Midwifery Officer (CNMO) to inform nursing and midwifery strategy in Queensland. The QNMExC was established in February 2014.

The membership of the QNMExC includes representation from executive level nursing and midwifery positions from a broad range of clinical service providers, including Queensland HHSs, private and non-government sectors, and universities.

The key objectives for the QNMExC are:

- Provide advice and consultancy to the CNMO.
- Lead on strategic matters to address innovation, patient safety and quality improvements in nursing and midwifery services across Queensland.
- Actively engage and participate in the coordination and implementation of agreed state and national initiatives that optimise nursing and midwifery services.
- Identify and scope opportunities to establish mutually beneficial partnerships and collaborations between and across health service sectors and stakeholders to support the delivery of health priorities.
- Be responsible for the dissemination and promotion of agreed key information and documents on strategic matters to all Queensland nurses and midwives across members' health services and organisations.
- Foster awareness and share information on developments, achievements, data, evidence and issues concerning the nursing and midwifery professions with a view to continual improvement in the provision of care to clients.

QNMExC thought leadership strategy forum

The OCNMO facilitated a Strategy Forum allowing the opportunity to contribute to the thought leadership required to forge ahead professionally in a rapidly changing healthcare environment.

Through a facilitated process of reflective practice, future casting, and appreciative enquiry, the day focused on possibility thinking in defining collective and collaborative strategies to proactively position nursing and midwifery to lead healthcare outcomes in Queensland, also nationally and internationally. The Forum allowed the time required to create the 'headspace' to come together and collectively discuss, explore and co-create strategic nursing and midwifery thought leadership, and to consider how we can best interact to realise our professions' potential as change agents of healthcare into the future.



International Collaborations

World Organisation of Family Doctors (WONCA) Rural Working Group

The CNMO was nominated as the first registered nurse to be involved with the Global WONCA Rural Working Group. To date contributions have included participation in the “Rural Global Café” discussion group and presenting on the Rural Generalist Pathways in Ireland with Associate Professor Bruce Chater, Chair of the Statewide Rural and Remote Clinical Network in 2017.

The WONCA is a not-for-profit organization which has member organizations in 18 countries. The mission of WONCA is to improve the quality of life of the peoples of the world through defining and promoting its values, including respect for universal human rights and including gender equity, and by fostering high standards of care in general practice/family medicine.

Global Association of Student and Novice Nurses (GASNN)

The CNMO over the last 12 months has developed a supportive relationship with the group president through mentoring and supportive discussions with the association. GASNN has a series focused on showcasing Student and Novice Nurses from around the Globe. Each month, GASNN will feature two student nurses, novice nurses, or nursing groups to provide a glimpse into current local and international global health initiatives and opportunities.

GASNN is proud to be the first international organisation governed by and representing student and novice nurses. The organisation promotes professionalism, provides a conduit to discuss key issues related to the profession, has a web page for key sharing of information and peer mentorship.

Global Nursing Policy Leadership 2017

Michelle Gunn, Director of Nursing, Professional Capability, OCNMO was selected as one of 25 nurses worldwide to attend the Global Nursing Policy Leadership Institute in 2017. This saw Michelle participate in a six month leadership program operated by the International Council of Nurses, which culminated with a weeklong residential in Geneva, Switzerland. While Michelle provided the majority of funding and undertook the program in her

own time, the OCNMO was able to provide a small contribution to support this opportunity. Participation in this program has enabled Michelle to participate in global policy networks and significantly contribute to the OCNMO influencing internationally. Michelle has also attended the past three World Health Assembly's as a delegate of the International Council of Nursing and represented over 18 million nurses worldwide. In 2018, she was asked to lead a team of delegates and addressed the World Health Assembly to pass interventions on key health policy issues, including the World Health Organisation Thirteenth General Programme of work 2019-2023.

National Collaborations

Collaborative forums

Australian and New Zealand Council of Chief Nursing and Midwifery Officers (ANZCCNMO):

- The CNMO from each state is the jurisdictional representative at the ANZCNMO Advisory Council. The Council meets quarterly to focus on national agendas and share information on nursing and midwifery from their state's perspectives of those things relevant to national and international agendas. The key priorities for the ANZCCNMO's has been National Nurse Prescribing, Advanced Practice, Professionalism and National Nursing Strategy. The Council links with the Nursing and Midwifery Board of Australia, national academic leaders, the Australian College of Nursing and the Australian College of Midwives, and is a conduit for discussions with a number of international partners such as the International Council of Nurses.

Australian Health Practitioner Regulation Agency (AHPRA) national board selections

The OCNMO was one of two Queensland Health representatives on the selection panel for the Australian Health Professional Regulation Agency National Board selections.

Rural and Isolated Practice Endorsed Registered Nurse

The OCNMO is currently working with key stakeholders in the development of a RIPEN Transition Plan.

Registered nurses with the appropriate qualification can apply to the Nursing and Midwifery Board of Australia (NMBA) for an endorsement as being qualified to obtain, supply and administer scheduled medicines for nursing practice in a rural and isolated practice area. The requirements for this endorsement are set out in the NMBA's Registration Standard for endorsement for scheduled medicines registered nurses (rural and isolated practice). RIPENs practice in accordance with the Queensland Drug Therapy Protocol – Rural and Isolated Practice Area Endorsed Nurse.

In 2013, the NMBA undertook a review of the registration standard to explore the notion of expanding the scope of the standard to include midwives as well as nurses working outside of rural and isolated practice. Feedback at that time suggested that the endorsement was no longer required, as the poisons legislation and associated policies in most jurisdictions facilitated the safe supply of medicines under protocol by registered nurses working in health services. Subsequently in 2015 the NMBA advised that it would be discontinuing the RIPEN endorsement standard.

Consultations – National Workforce Australian Health Ministers' Advisory Council and NMBA

The OCNMO supports the work of the Department of Health's (DOH) National Workforce Team in relation to the Australian Health Minister's Advisory Council (AHMAC), NMBA, National Nursing and Midwifery Education Advisory Network (NNMEAN) and the Australian Nursing and Midwifery Accreditation Council (ANMAC). Over the past year, this has involved provision and coordination of professional nursing and midwifery advice in relation to the following consultations and or agenda issues:

- Registration standard: Endorsement for scheduled medicines for registered nurses prescribing in partnership
- Australian Government response to the Senate Community Affairs References Committee inquiry into the Complaints mechanism administered under the Health Practitioner Regulation National Law
- Proposed discontinuation of the endorsement for scheduled medicines (rural and isolated practice) registration standard – NMBA
- Independent Review of Accreditation Systems within the National Registration and Accreditation Scheme for health professions 'Australia's Health Workforce: strengthening the education foundation'

- Public consultation on review of accreditation arrangements – assignment of accreditation functions – NMBA
- Public consultation on the draft guideline for informing a National Board about where you practise – NMBA
- Midwife standards of practice – NMBA
- Registered nurse standards for practice – NMBA

Full scope of practice: Registered Nurse / Registered Midwife prescribing

The OCNMO supports strategies and policies to ensure that nurses and midwives are enabled to work to their full scope of practice. This includes working in collaboration with professional colleagues and regulators to ensure that legislative and regulatory frameworks enable, rather than restrict, practice. Over the past year this has seen internal departmental work to increase awareness of existing prescriptive authorities, but also preparation for consultation on amendment to the Health Drugs and Poisons Regulations to give full effect to endorsements under section 94 and 95 of the National Law.

The OCNMO have also been working in collaboration with the NMBA and ANZCCNMO to identify a framework for registered nurse and registered midwife prescribing. This work led to the NMBA releasing a public consultation document ‘Registered nurse and registered midwife prescribing – Discussion paper’ in October 2017, and more recently a revised consultation document that will inform a second public consultation later in 2018.

State Collaborations

Collaborative forums

The OCNMO participates a number of collaborative forums including but not limited to the following:

- Executive Directors of Nursing and Midwifery Services Forum
- Queensland Nursing and Midwifery Academic Leaders
- Nursing and Midwifery Implementation Group
- Clinical Senate and Networks

Government Election Commitments

2015

4,000 Graduates

In January 2018, the 2015 Government Election Commitment (GEC) '*Refresh Nursing! Support up to 4,000 new graduate places in our public hospitals and health services over the next four years*' was achieved.

Graduate nurses and midwives are being employed in HHSs through the annual Queensland Health graduate recruitment campaign. Graduates are encouraged to apply to priority areas, including mental health, midwifery, and rural and remote areas. Of the 3,324 graduate nurses and midwives who applied to the August 2017 campaign, 1995 graduates have commenced employment with HHSs as at June 2018.

Nurse-to-patient ratios

In 2015, the Government committed to introducing Nurse-to-Patient ratios in prescribed adult acute medical and surgical wards, and to undertake two mental health adult acute ward pilots. The success and compliance of this GEC has been monitored by the OCNMO. At present, HHSs across the state have 100 per cent compliance. Most occasions of non-compliance in relation to emergent circumstances for example workforce shortages.

2017

In 2017, the Government committed to a policy to support improved patient care and experience by entrenching the Nurse Navigators within the system and also continuing to fund another 100 midwives. The OCNMO has carriage of six GEC, these are:

- Fund our HHSs to recruit another 3,000 nurses.
- Fund our HHSs to recruit another 100 midwives.
- Expand the Nurse Navigator Program to 400, and entrench these positions as permanent, ongoing components of the Nurse Navigator Program.
- Expand safe minimum nurse-to-patient ratios in acute public mental health wards.

- Introduce safe minimum staff-to-patient ratios, including nurse-to-patient ratios, in public aged care facilities and introduce public reporting on safe staff-to-patient ratios in aged care facilities.
- Lobby the Federal Government to introduce safe staff-to-patient ratios, including nurse-to-patient ratios, in private care facilities.

Engagement with external and internal stakeholders has commenced and continues through the Nursing and Midwifery GEC Implementation Advisory Group. This group was established in late June 2017 and meets monthly, with secretariat support provided by the OCNMO.

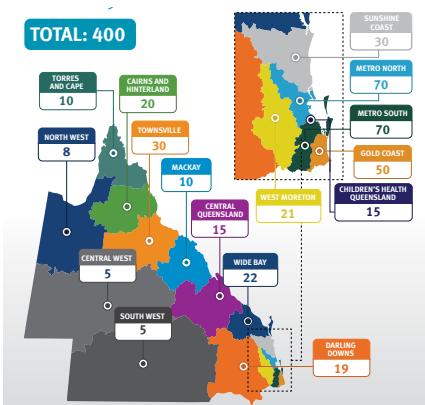
400 Nurse Navigators

In 2015, the Government committed \$101.6M to support the employment of 400 Nurse Navigators over four years. As at June 2018, 218 Nurse Navigators have been successfully recruited across Queensland HHSs. Since commencement of the program, there have been dramatic improvements to the overall healthcare experience of the target audience.

One consumer described their experience with the Nurse Navigator Program in Wide Bay HHS as:

"It is good having someone to help that isn't aligned to any specific field...they don't have a biased opinion. Every specialist thinks their field is the major problem, the main priority, when its [sic] actually all the same. Nothing is worse than anything else. The Nurse Navigator changed my relationship with doctors, there is now more communication."

Work continues regarding this program in collaboration with HHSs entrenching these positions into the system.



An example of the excellent outcomes is provided by Metro South HHS:

Although people with disabilities use health services more frequently than the general population, they have higher rates of premature death, untreated health issues and avoidable hospitalisations. As Queensland's first adult Disability Nurse Navigator (DNN), this position aims to reduce fragmentation, mitigate barriers, educate and empower patients and coordinate disability specific patient-centred care. What does this mean in practice? It means that I have the opportunity to provide individualised, holistic assessments and interventions that transcend the traditional medical or nursing models of care. I am a primary point of contact not just for the patient and their carers or families, but for their entire hospital and community based healthcare teams and services. By acting as a disability advocate and agent for change, this position challenges ingrained perceptions and influences health service providers to deliver collaborative care for patients who have been habitually considered slow stream and complex.

The DNN service has the capacity to attend to patients at the hospital bedside, in their own home or in collaboration with their specialist or GP appointments. This role has seen much success; working with hospital multi-disciplinary teams to avoid nursing home placements, securing single-bed hospital rooms (where possible) for patients with Autism, improving health literacy in patients with an intellectual impairment, and encouraging specialists to collaborate same-day appointments for those with a mobility impairment. Each and every referral requires a different approach, an individualised care plan and consideration of various hospital avoidance strategies... however there is nothing more rewarding than watching my patients establish independence and confidence in navigating their own health care journey.



Tanya Nuzum

Disability Nurse Navigator
Metro South Hospital and
Health Service

Enterprise Bargaining Agreement 9 (EB9)

As part of EB9 project commitments, the OCNMO has led and collaborated on several projects, these include:

- Rural and Remote project;
- Career and Classification, and Enrolled Nurse Advanced Skills working group;
- Retention Initiatives project;
- Nurse Unit Manager /Midwifery Unit Manager Working Group;
- The Best Practice Rostering Guideline Review, On-call and Recall Review;
- Midwifery-led models of care; and
- Business Planning Framework (BPF) – improvement, promotion and speciality addenda development.

Information regarding these projects can be found on the Human Resource Branch, Nurses and midwives EB9 implementation site.

Enterprise Bargaining Agreement 10 (EB10)

Representatives from the OCNMO, DOH and the QNMU reached an in-principle agreement, to replace the *Nurses and Midwives (Queensland Health and Department of Education and Training) Certified Agreement (EB9) 2016* (Nurses EB9), on 23 April 2018, after four months of negotiations.

Domains of Practice

The OCNMO year in review has been structured according to the Domains identified in the Strong Model of Advanced Practice to showcase the extensive nature of work undertaken and the contribution to advancing Nursing and Midwifery practice through policy leadership.

Domain 1 – Direct comprehensive and/or provision of direct care

Nurse practitioner primary health care chronic disease pilot

In 2017 – 18, the OCNMO allocated non-recurrent funding to South West HHS and West Moreton HHS to trial a Nurse Practitioner Primary Health Care Chronic Disease Pilot over two years. The Pilot has incorporated an evaluation component, with intent to contribute to the growing national and international body of evidence regarding the value, effectiveness, and scalability of nurse-led models of care. Year two of the pilot is underway in 2018 – 19, with the evaluation anticipated to be complete by 30 June 2019.

Nursing and midwifery rural and remote recruitment campaign



In 2017 – 18, a dedicated marketing strategy was rolled out to attract nurses and midwives with over five years' experience from interstate, as well as the United Kingdom, Ireland, Canada, and New Zealand into Queensland Health, to work in rural and remote health services. Applications are being centrally coordinated using LiveHire recruitment software. Each HHS has access to review applications and undertake the recruitment, so far there have been 14

nurses and midwives recruited. Training was held in Brisbane at the LiveHire office on the 28 February 2018, and five HHSs were able to attend. Feedback was positive and recruiters from around the state are now using the system to recruit to local positions.

To support workforce development, the OCNMO has funded Mackay HHS to develop a state-wide Discussion Paper that explores the educational, clinical, industrial, and organisational issues related to nursing career pathways into community health, and as they relate to new graduate and early career nurses.

Journey to nursing excellence- Magnet® and Pathways to Excellence®

The OCNMO has provided two years funding (2017–18 and 2018–19) for North West HHS, Central West HHS and South West HHS for the development of rural and remote capacity and capability, so they can prepare and implement the Magnet® or Pathways Excellence® Programs. This funding has enabled the employment of a 1 FTE Nurse Grade 7 Nurse Manager - Magnet® or Pathways to Excellence® Program Coordinator. This role aims to support the organisation to meet the credentialing requirements of the American Nurses Credentialing Centre designation of Magnet® or Pathways to Excellence®.

Nursing and midwifery exchange program

The statewide Nursing and Midwifery Exchange Program (NMEP) is a joint initiative between the OCNMO and South West HHS, which provides opportunities for nurses and midwives to experience new practice environments within a supportive mentoring framework. The program aims to strengthen capacity of rural and remote services, and clinical specialties by increasing the skills and experiences of existing staff and attracting new nurses and midwives. This, in turn, increases the ability of services to support the transition of additional nursing and midwifery graduates, which is considered essential to sustaining workforces into the future. To date, the program has enabled 38 exchanges and generated over 260 expressions of interest. As the program enters the final year of funding, a thorough evaluation has commenced which will support sustainability planning and future policy directions.



Geoff Rixon

Registered Nurse

South West Hospital and Health Service

Domain 2 – Support of Systems

Business model canvas

The OCNMO and Queensland University of Technology are collaborating to review the applicability of the Business Model Canvas tool for documenting and articulating the economic value of nurse-led services.

The Business Model Canvas is a strategic management and lean start-up template for developing new, or documenting existing, business models. It is a visual chart with elements describing a firm's or product's value proposition, infrastructure, customers, and finances. It assists organisations in aligning their activities by illustrating potential trade-offs. This tool is being trialled to review applicability in the health setting. One of the key reasons for choosing to test this model is due to the value proposition component, and the focus on the customer (consumer) experience.

An initial trial has been completed with a Nurse Practitioner-Led Chronic Disease clinic at Logan Hospital, Metro South HHS. A second trial has been undertaken with North West HHS, focussing on nurse-led Primary Health Clinics.

Business Planning Framework midwifery audit

The BPF is a tool for nursing and midwifery workload management that provides nurses and midwives with a business planning process to determine appropriate staffing levels and skill mix to meet service requirements. It was identified in a Statewide Maternity Forum in November 2016, that midwifery staffing levels was impacting maternity service delivery. The former Minister for Health announced a review of Queensland public midwifery staffing numbers in January 2017.

An audit was undertaken between August and September 2017 in 15 HHSs with maternity services. Over 100 HHS staff informed the audit. Neonatal services were not included. PricewaterhouseCoopers (Australia), were appointed independent external auditors, and delivered a report to the Director General in October 2017.

Three themes were identified for improving use of the BPF to support midwifery staffing:

- standardisation of the BPF data sets informing methodology;
- BPF training programs be available to HHS staff involved in BPF (such as finance officers, nurses) to enable a standardised approach and processes to be clearly understood, supporting Statewide compliance with the BPF; and
- implementing targeted strategies to recruit and retain midwifery graduates.

The OCNMO implemented an action plan in response to the audit report and worked with HHSs to support their use of the BPF tool.

Business Planning Framework and addenda

The Queensland Health Business Planning Framework (BPF) tool is the basis for workload management, business planning practices, processes and tools in response to the changing health environment. Currently in its 5th edition, it was identified that further customisation of the BPF was required for settings such as:

- Rural;
- Remote;
- Maternity;
- Paediatrics and
- Emergency Department.

Addenda to the BPF have been written to contextualise the BPF 5th Edition into these specialised areas. This project involved a number of nurses and midwives who worked together to inform the documents, the Queensland Nurses and Midwives' Union (QNMU) who co-led the project and specialty leaders to provide expertise. These addenda are all available to download from the OCNMO intranet page.

Maternity services action group 3 – Decision Making Framework

A Statewide Maternity Services Forum was held on 15 November 2016, which focused on identifying actions which could be applied across the health system to improve the quality and outcomes for mothers and babies in public maternity services. The forum identified four key themes to be investigated to improve public maternity services including:

- collaborative leadership culture within services;
- improving the reliability of identification and management of risk in pregnancy;
- models of care and workforce; and
- understanding the needs and expectations of Aboriginal and Torres Strait Islander women.

The OCNMO was responsible for delivering outcomes from Maternity Services Action Group 3 - models of care and workforce (MSAG3).

PricewaterhouseCoopers (Australia) were engaged for six months to undertake this body of work and delivered a final report in May 2018. The key outcomes from MSAG3 were:

- identifying current maternity models of care across Queensland;
- ensuring best practice maternity models of care are aligned with and supported by the Clinical Services Capability Framework (CSCF) levels;
- identifying tools to assist HHSs in aligning the workforce with recommended maternity models of care; and
- identifying collaboration, communications and cultural components that support transition to and maintenance of continuity of carer models.

A key deliverable for MSAG3 was the development and implementation of a decision making framework. The decision-making framework (DMF) has been developed to assist HHSs to review, redesign or implement maternity continuity of carer models.

Eight HHS have participated in the development, testing and application of the DMF across rural, metropolitan and tertiary services with a number of services having commenced operational plans to redesign local maternity services. The DMF is to be presented at the Australian College of Midwives 2018 National Conference in Perth. Work has commenced to rollout the decision making framework in all Queensland public maternity service units.

Review, Redesign or Implement - A Decision Making Tool to Improve Provision of Continuity of Carer in Maternity Health Service Redesign

Reuter S¹ | Hamm S² | Garka F¹ | Chaitka Y¹ | Blakinson S² | Soczal J²
¹Office of the Chief Nursing and Midwifery Officer | Employment Relations, Human Resources Branch
 Royal Brisbane and Women's Hospital, Metro North Hospital and Health Services



Background

At a statewide forum in November 2016 it was identified that maternity services needed to improve the delivery of integrated care by strengthening Models of Care (MoC) and how they were delivered. The Maternity Services Group (MSAG) were tasked to address these key issues.

Aim

Develop an interactive decision making framework (DMF) tool to increase maternity continuity of care models.

Innovation Description

An external provider to Queensland Health was procured to build the interactive decision making framework. The services move to contemporary evidenced based models, and the tool was designed to contextualise delivery of continuity of care to local context, including patient demand, service demand, geographical circumstances, required resources, and optimal maternity outcomes. The process of tool development included a literature review, maternities and midwives survey, and the collective view of service leaders, clinicians and consumers. The main components for the interactive tool were refined through its stakeholders. A library of complementary resources were also integrated to the DMF.

Evaluation

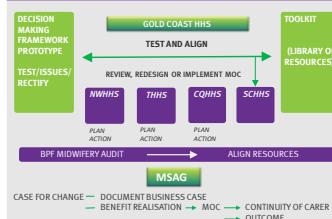
Gold Coast Hospital and Health Service (HHS) were chosen to pilot the tool due to the efficacy of the tool. Modifications of the tool were made before testing with a rural, regional and metropolitan HHS. The tool was reviewed by HHS who had not been involved in the tool development. The acceptability and acceptability of the tool is reported in the following comments.

Comments

"Great to have resources all in one place"
"Great, really great, easy to navigate"
"Really impressed for all levels of staff!"
"Loved it!"

Figure 1

Decision Making Framework



Generalisability

More than half of Queensland Hospital and Health Services have tested the tool providing confidence for use in Queensland. The tool has applicability to other similar jurisdictions looking to expand continuity of care models.

Clinical Excellence Division

Creating solutions for better healthcare



Queensland
Government

Midwifery practice project

The Midwifery Practice project resulted as part of EB9 project work aimed at identifying and describing midwifery practice as it develops from the foundational level towards expert, and was based upon the International Confederation of Midwives (ICM) essential competencies for basic midwifery practice. It is a joint project between Queensland Health and the QNMU, with governance provided by the Nurses and Midwifery Implementation Group (NaMIG). An online survey was disseminated Statewide and focus groups were conducted. Eligibility included midwives from Grades 5 to 8 across any of the 15 HHSs with maternity services.

The preliminary results were presented at the Passionate about Practice Symposium in May 2018. The final results from this project will be used to inform future research in the form of a Delphi study, so a contemporary and validated career pathway for midwives may be created.

Domain 3 – Education

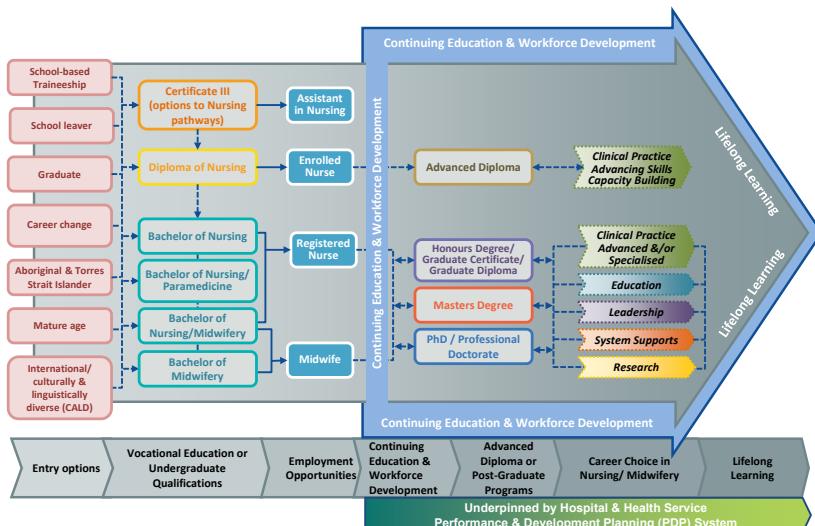
Statewide nursing and midwifery education and lifelong learning

The OCNMO, in partnership with Metro North HHS has supported the development a statewide nursing and midwifery Education and Lifelong Learning Framework (Framework). The Framework provides a scaffold for all teaching and learning considerations that ‘value add’ to achieving a sustainable, professional, capable, person-focused, nursing and midwifery workforce that is respected for competence and quality. The Framework has been developed to be applicable to all nursing/midwifery contexts as an enabler to improve nursing/midwifery staff education and training experiences by informing strategies, policy, practices and behaviours. The Framework comprises:

- a structured approach to clinical, organisational and professional development opportunities for all nursing and midwifery classifications.
- an explanation of learning and development opportunities along a continuum of lifelong learning.
- specific principles, standards and exemplars to guide health services in:
 - the promotion, implementation, and evaluation strategies for workplace learning.
 - applying pathways for career development and continuum of learning.
 - foundational requirements for key programs of learning for all classifications of nurses and midwives, particularly new graduate (novice) nurses.
- a guide to attainment of relevant post-graduate awards.
- interpretations applicable to individuals, groups, teams of nurses/ midwives and others that support processes and guide a more collective overarching professional approach to building capacity and capability of the nursing and midwifery workforce, thereby reducing variances in access, opportunity, expectations and standards.

The Framework was presented at the 2018 Passionate about Practice Symposium.

Queensland Health (QH) Nursing & Midwifery Education



Caveat:

- Continuum of Lifelong Learning progression is not necessarily linear.
- Some ENs may progress to a EN Advanced Skills (ENAS) dependent on demonstration of skills & knowledge; opportunities; & position availability.
- RNs/Midwives may choose to progress their career path from Grade 5 to a higher role classification as per the Award (2015) dependent on demonstration of skills & knowledge; opportunities; & position availability.
- ENs, RNs & Midwives are able to advance their scope of practice based on training & successful assessment.

Nursing re-entry

The requirement for nurses and midwives to maintain recency of practice requirements sees many lose their registration when they take breaks to care for family members. To enable them to re-enter the profession and meet clinical supervision requirements, select services are working towards effective systems to navigate their specific employment and educational needs. The OCNMO has provided Children's Health Queensland, Darling Downs HHS, Central Queensland HHS and Sunshine Coast HHS with funding for the establishment of Nurse Re-entry Hubs, and to develop a model for nurses who are seeking clinical supervision to enable their re-entry into the profession. These models address support and mentorship, and enable clinical practicum for the re-entry nurse on their pathway to registration. The Central Queensland HHS and Children's Health Queensland Re-entry Hubs are operational with 11 nurses enrolled.

National health professional immunisation education framework implementation

Under the *Health (Drugs and Poisons) Regulation 1996* there is a requirement that registered nurses need to obtain an approved qualification in immunisation, to be authorised to supply and administer restricted drugs unless an immunisation program nurse was authorised prior to July 2010. To date, there are no recognised course providers nationally, and nurses who move between jurisdictions are often required to undertake re-training to ensure they comply with the relevant jurisdictional requirements. Furthermore, there are significant variations in course content and requirements between jurisdictions.

In 2000, the *National Guidelines for Immunisation Education for Registered Nurses and Midwives* were developed for course assessors, educators and training organisations to promote consistency across states and territories among staff involved in the implementation and application of immunisation procedures. While these guidelines were developed for nurses and midwives, they were readily adopted by other health professionals, and as such in 2018 the National Immunisation Education Framework for Health Professionals was established.

In February 2018, the OCNMO represented Queensland Health at the inaugural National Health Professional Immunisation Education Framework Implementation Working Group, and has been working address policy issues resulting the variations between the jurisdictions.

Nurse endoscopy

In March 2018, a joint collaboration between the Healthcare Improvement Unit, the OCNMO, and the DOH Service Agreement Management Unit saw the execution of a new contract with Queensland University of Technology to continue to deliver the Master of Nurse Practitioner – Endoscopy course. This course was developed in collaboration with the OCNMO in May 2014, in response to the need to increase access to endoscopy services across Queensland. As detailed in the *Endoscopy Action Plan – Advancing Health: Improving the patient journey*, nurse endoscopists are an essential element of an expended clinical workforce required to meet patient needs within Queensland.

Midwifery education package

A short-term project within the OCNMO was launched in April 2018, to scope and develop a package of tools to support evidenced-based practice for midwives using the LEADS (Leads self, Engages others, Achieves outcomes, Drives innovation and Shapes systems) Framework from Health Workforce Australia. The midwifery education package is an online repository of tools and links, specifically for the target audience of midwives in Queensland. The iLearn Learning Management System (LMS) is the ‘host’ of this online repository of resources. The midwifery education package is due to go-live in October 2018.

Nursing clinical supervision

The OCNMO have provided four rural and remote HSSs funding for the enhancement of nurse capacity to undertake professional clinical supervision. While HSSs have implemented different programs depending on their unique circumstances, essential elements are that they:

- demonstrate an understanding of the process of clinical supervision;
- describe the benefits of a clinical supervision process for Advanced Practice Nurses;
- describe specific skills of clinical supervision;
- demonstrate an understanding of skills that support group supervision; and
- ensure continual development of the preceptor role.

To date, 62 nurses have undertaken clinical supervision training.

An example of the excellent outcomes is provided by Torres and Cape HHS:

Registered nurse, Hannah Welleman has returned to the Torres to help develop her skills as a future Remote Area Nurse. Hannah's training is part of a new program developed by the TCHHS Nursing and Midwifery Education team and funded by the Office of the Chief Nursing and Midwifery Office.

“I have been working at St Paul’s Clinic on Moa Island for the past four months, with Christine Perrett (CNC), Tomi and Vicki Newie (Indigenous Health Workers) and Maretha Johnson (administration),” said Hannah.

Hannah was a Graduate Nurse with the TCHHS in 2016, working on Thursday Island Hospital and CWC and in Cooktown.

“I went back to Melbourne to work in ICU and now have returned to the TCHHS,” said Hannah.

“I have worked in a preceptorship position with Christine who has been so welcoming to instil so much of her knowledge and wisdom, not only in nursing, but in midwifery, community outreach, and as a RAN,” said Hannah.

“Together with Tomi and Vicki, who have been integral to my holistic experience within the clinic, I have thoroughly benefited from all health professionals’ expertise.”

“I have loved working at St Paul’s as I love working in Primary Health Care and have always seen myself becoming a RAN. This program has helped to cement that career goal with support and firsthand experience of day to day life on the Outer Islands.”

As part of her work, Hannah had the Primary Health School Promotion role to present to the St Paul’s Tagai School Campus, our ‘Healthy Habits’ health campaign.

Along with the TSIRC Environmental Health Officer for St Paul’s, Rowena Johnson, Hannah taught the students about healthy eating, hand hygiene, Stop Sores, ear hygiene through the Exercise, Cough, Breathe, Blow, Wash program and teeth brushing.

“I have enjoyed my experience as an Early Career RAN and definitely believe RAN also stands for Really Awesome Nursing,” said Hannah.



Above back row from left: Rowena Johnson (TSIRC), Hannah Welleman (RN), Christine Perrett (CNC St Pauls), Sam Mulholland (Relief CNC Near Western Cluster) and Mrs Abigail Lui (Teacher Aide) with the St Pauls students in Miss Jaime's Class.

Strength with immersion models

Nurses and midwives interested in gaining clinical experience in speciality areas now have the opportunity to complete short rotations or exchanges into perioperative, paediatric and neonatal nursing and midwifery Centres of Excellence. The OCNMO is partnering with a number of HHSs to implement Strength with Immersion Models (SwIM), aimed at supporting rapid transition to nursing speciality areas. Evaluation of this model is planned in late 2018.

SwIM perioperative nursing

Metro North HHS is leading the perioperative SwIM project. The Perioperative Introductory Program (PIP) is a week-long program that addresses foundational skills and knowledge required by novice and/or returning to practice nurses and midwives.

SwIM paediatric nursing

Expressions of interest are currently being invited from nurses wishing to undertake a short rotation or exchange at the Lady Cilento Children's Hospital. The SwIM Paediatric Nursing Project will also offer a number of clinical workshops during 2018.

SwIM midwifery and neonatal nursing

The Sunshine Coast HHS is leading the SwIM Midwifery and Neonatal Nursing Project. This project will facilitate midwifery graduates to complete their transition to practice in a continuity of care service model. The project will also offer short rotations and/or exchanges for nurses and midwives who wish to rapidly increase their knowledge and skills in neonatal nursing. This project is in its planning phase. Further information will be available soon.

SwIM critical care nursing

The Townsville HHS is leading the SwIM Critical Care Nursing Project. This project will investigate graduate nurse experiences within Critical Care Units, and gather information about educational programs available to nurses who are transitioning to critical care areas. Information will be sought from nurses who have previously undertaken a short clinical placement (an “immersion”) in Townsville HHS Critical Care Units.

Domain 4 – Research

Nursing and midwifery research fellowships

The OCNMO continues to work in partnership with the NMBA and the Health Innovation, Investment and Research Office (HIIRO) in the DOH, in the administration of the Nursing and Midwifery Research Fellowships. This year, the Memorandum of Understanding Terms of Reference has been reviewed to ensure that allocations reflect contemporary thinking and are consistent with principles of good governance. It is anticipated that round five will commence over the coming months.

Statewide nursing and midwifery project evaluation framework

Funding has been provided to select HSSs to establish, implement and evaluate projects to provide early career specialisation.

While there is a general consensus that these programs, will involve an educational opportunity, combined with an immersion experience within a specialty context, it is unclear exactly what these involve, or whether career specialisation would be enhanced by other components.

As such, over the life course of these programs there are significant questions that need to be answered to ensure that quality models are developed, and funding is optimised.

It is proposed that a project evaluation framework be developed and implemented to support the development of these projects.

Early and rapid career specialisation

The OCNMO has funded Central Queensland University (CQU) to undertake research into early and rapid career specialisation to inform policy directions. This includes a:

- a systematic review of the literature around early and rapid nurse career specialisation and identifying any studies that have explored the characteristics favourable to specialisation;
- interviews with nurses who have undergone early career or rapid specialisation;

- undertake Delphi study style workshop with nurse leaders, as selected by the OCNMO, to finalise recommendations; and
- in conjunction with the OCNMO, CQU will prepare a number of papers for publication in a peer review journal.

Successful abstracts and presentations

The OCNMO was successful with the following abstracts and presentations in 2017/18:

- Association of Queensland Nurse Leaders Annual Conference – Who regulates whom – Practice in Scope.
- DDHHS Nursing Education Forum – Nursing and Midwifery regulation and scope of practice.
- DDHHS Nursing Leadership Forum – Nursing and Midwifery regulation and scope of practice.
- SWHHS Nursing Leadership Forum – Nursing and Midwifery Regulation.
- Clinical Excellence Commission - Queensland Maternity Reforms.
- Passionate About Practice Symposium – Identifying and describing midwives' practice and career development from the foundational level towards performing midwifery in an expert way.
- Australian College of Midwives State Breakfast for International Day of the Midwife - 'Midwives leading the way with quality care'.
- International Day of the Midwife - 'Midwives leading the way with quality care'.
- Clinical Excellence Showcase - Review, Redesign or Implement – A Decision Making Tool to Improve Provision of Continuity of Carer in Maternity Health Service Redesign.
- Australian College of Midwives State Conference – Birth trauma and fear in midwives implications for professional practice and woman centred care.
- Australian College of Midwives State Conference- Midwifery Leaders Presentation, My Life as a midwife.
- Passionate About Practice Symposium – Review, Redesign or Implement – A Decision Making Tool to Improve Provision of Continuity of Carer in Maternity Health Service Redesign.

- Australian College of Midwives National Conference – Moving beyond the RCT to the real world of practice: Implementing BELIEF, a midwifery led counselling framework to reduce childbirth fear, into practice.
- Passionate about Practice Symposium – Law and regulation: The importance of scope of practice in a changing healthcare environment.
- Passionate about Practice Symposium – Global Nursing Policy Leadership Institute 17 – 300 words project.

Publications

Members of the OCNMO contributed to the following publications in 2017/18:

- Toohill J, Fenwick J, Sidebotham M , Gamble J, Creedy DK. 2018. Trauma and fear in Australian midwives. WOMBI <https://doi.org/10.1016/j.wombi.2018.04.003>.
- Toohill J, Sidebotham S, Gamble J, Fenwick J, Creedy DK. 2017. Factors influencing midwives' use of an evidenced based Normal Birth Guideline. Women and Birth. 30, pp 415-423. <http://doi.org/10.1016/j.wombi.2017.03.008>
- Statewide Maternity and Neonatal Clinical Guidelines. 2017. Normal Birth Guideline. Queensland Health. (Toohill J- Midwifery Lead)
- Conway, A., O'Donnell, C., Yates, P. (2017). The effectiveness of nurse care coordinator role on patient-reported and health service outcomes: A systematic review. Evaluation & the Health Professions. DOI: [10.1177/0163278717734610](https://doi.org/10.1177/0163278717734610)
- Chan, R.J., Marx, W., Bradford, N., Gordon, L., Bonner, A., Douglas, C., Schmalkuche, D., Yates, P. (2018). Clinical and economic outcomes of nurse-led services in the ambulatory care setting: a systematic review. International Journal of Nursing Studies. Volume 81, pg 61-80.
- Douglas, C., Schmalkuche, D., Nizette, D., Yates, P., Bonner, A. (2017). Nurse-led services in Queensland: A scoping study. Collegian. <https://doi.org/10.1016/j.colegn.2017.10.011>.

Domain 5 – Professional Leadership

Passionate about practice symposium

In May 2018, the OCNMO held the annual Passional About Practice Symposium (PAP Symposium). The PAP Symposium is part of the OCNMO strategic direction for the provision of high standards of contemporary nursing and midwifery care. The Symposium provides a forum where frontline nurses and midwives can present and share experiences regarding nursing and midwifery-led improvements in clinical practice, and subsequent improvements in patient outcomes. This year, the OCNMO had the honour of the international Nursing Now campaign co-chair Lord Nigel Crisp address the attendees, paying tribute to nurses and midwives, citing their holistic approach to health and connections with the communities they serve.

Clinical nursing and midwifery leadership is central to effective health care delivery across all settings, the Symposium in Brisbane aimed to elevate the interaction between nurses and midwives across the State.



Top 50 leadership program

Modern nursing and midwifery leaders are pivotal to the delivery of high quality and cost-effective health care. They are professionally responsible for the largest healthcare workforce, as well as extensive programs of work and financial budgets. The OCNMO introduced the Top 50 Program as an

investment in nursing and midwifery leadership for now and into the future. This program is targeted at the most senior nurses and midwives across the state, and provides a range of opportunities for them to further develop their leadership skills and abilities. While this is a dynamic program, it is adjusting to the needs of executive nurses and midwives. Over the past year, the program has been attended by 90 nurses and midwives.

Furthermore, it was identified that newly employed Executive Directors of Nursing and Midwifery (EDNM) did not have an established formal mechanism in place to meet face-to-face with key DOH officers during their onboarding period. The OCNMO has prepared an orientation package that provides the EDNM with an overview of the Department of Health and the OCNMO. While information is provided about the DOHs structure and key functions, a planned schedule of meetings with key DOH officers may assist newly employed EDNM to better understand how the DOH supports the HHS in the delivery of health care.

OCNMO and Queensland nursing and midwifery academic leaders symposium

The OCNMO and the Queensland Nursing and Midwifery Academic Leaders (QNMAL) hosted a Symposium at the Queensland University of Technology on 30 November 2017. The day was attended by over eighty influential nursing and midwifery academic and industry experts, students, and new graduates from across the state.

The day was focused on overcoming barriers and maximising opportunities to enhance educational experiences, and ensuring undergraduate nursing and midwifery students and new graduates have a safe and successful transition into the clinical environment.

Statewide medical credentialing

The OCNMO provides senior nursing representation on the Departmental Medical Credentialing Committee, which has the responsibility for assessing applications statewide each year.

Nursing and midwifery leadership projects – Manage4Improvement

The OCNMO have supported the development of rural and remote nursing and midwifery leadership capability and capacity by enabling additional opportunities for participation in the Clinical Excellence Development Manage4Improvement Program. This is a six-month leadership development program consisting of three residential workshops, and participants undertaking a quality improvement project. This year, over 233 nurses and midwives have participated in the program.

A final word

In conclusion 2017/18 has been a particularly productive year with a number of projects delivering significant benefits to the nursing and midwifery professions, but most importantly supporting the consumers. The OCNMO looks forward to continuing to work in partnership with our key stakeholders to continue to deliver improved outcomes for Queensland communities.

OCNMO Year in Review 2017–18

For more information contact:

Office of the Chief Nursing and Midwifery Officer, Department of Health
GPO Box 48, Brisbane QLD 4001

Email ChiefNurse-Office@health.qld.gov.au

Phone 07 3328 9830