CONNECTING with RURAL GENERALIST NURSES: Developing a consultative state-based eLearning program that reflects the RIGHT CARE in the RIGHT PLACE at the RIGHT TIME

Maureen Winn, Senior Program Officer Nursing and Midwifery Portfolio
Works under the direction of Ministry of Health and HETI
Partners with the Pillars
Works with NaMO
Liaises with HETI portfolios
Collaborates and consults with District HETI and the LHDs
HETI and NaMO partnership

Achievements

• Take the Lead 2
  • Nursing, Midwifery and the Law
  • Facilitating Effective Performance (NMC)
  • Art of Staffing (HealthShare/NaMO)
  • Lean Thinking (ACI)
  • Whole of Hospital: Smooth Patient Flow (generic)
  • Clinical Coding (generic)

• Scholarships
Clinical Supervision Continuum for Nurses and Midwives; a hard copy and USB publication

Point of Care Supervision:
Clinical teaching; clinical facilitation; preceptorship, buddyng

Facilitated Professional Development:
Peer review; coaching; mentoring

Clinical Supervision (Reflective):
Clinical supervision
How to meet the learning needs of rural generalist nurses?
What should be in the RGN program?

- Murrumbidgee LHD raised the area of need with N&M Portfolio HETI
- 8 Rural LHDs asked their nurses
- Identified key areas of need
  - Mental Health
  - Paediatrics, Aged Care and Palliative Care
  - Comprehensive Assessment
HETI program  right place, right time right care

- State Plan
- State Rural Plan
- Palliative Care Plan
- Aged Care Plan
Establishing the parameters

- Recognised multiple existing resources
- Must use current credible resources
- Create links to valuable content available
- Build new content as outlined from rural needs analysis
- Engage Subject Matter Experts (SMEs)
- Engage instructional designers (District HETI)
- N&M Portfolio to manage the program
Where are we now?

Mental Health NSWPODS – implementation guide

Paediatrics – learning pathway with self assessment and case scenarios

Aged Care – a learning module

Palliative Care – a learning module, with work from CSU

Comprehensive Assessment game format
Mental Health PODs

- National MH learning resources – NSW IoP, now at HETI
- IT experts moving modules across platforms
- ‘Self serve kiosk’: knowledge – gap survey
- Learning pathway to guide you through the options
- 17 learning resources
Palliative Care module

- Based upon work commissioned through CSU
- SME group organised
- Review of material
- Recognised need for further input
- Development of a module
- Focus on phases of illness
- Review of
  - therapeutic communication
  - quality of life
What is palliative care?

Palliative care is an holistic approach to the care of people with a life-limiting illness, where the focus is on quality of life rather than curative treatment.

The World Health Organization (WHO) has the most well-known definition. It describes palliative care as 

“...an approach that improves quality of life of patients and their families facing problems associated with life-threatening illness, through the prevention of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychological and spiritual ...”

Palliative care phases

Phases focus on a patient's needs, goals and priorities rather than the disease. Keep this in mind as you consider the care and support each person and their family need.

Click each case below, in any order you like, to learn about each patient before identifying their phase.

Living with Alzheimer's disease
Living with Breast Cancer
Living with Bowel Cancer

Select your choice by clicking the radio buttons below. If you like, click each icon to remind yourself of important criteria for each phase.

That is correct.
Harold is experiencing a gradual decline in his condition and gradual worsening of expected symptoms.
Click icon to view nurse’s progress notes.

Howard

What happened next?
Guess who?

Therapeutic communication

Let's take a look at an example of how palliative care was provided for Jack and his family.

Jack is visiting the local hospital about pain in his left hip. When he arrives he is asked whether he identifies as Aboriginal.

Rhonda, a nurse at the hospital asks Jack which family members he would like to have involved in his care. Jack has requested his partner Sarah and Uncle Sam (family spokesperson and Elder of the local community) to be involved in his treatment and care.

With Jack's permission, Rhonda invites his family to the hospital to explain what will happen from here.
Arthur’s story

In this next section, we will explore palliative care as an holistic approach as we follow Arthur’s story.

Arthur is 60 years old and has advanced motor neurone disease.

Louis, Arthur’s only remaining family member, has recently moved back to the small rural town to live with his father as his main carer.

Arthur receives community nursing services once a week and GP visits as required. These Primary care providers liaise with the specialist palliative care service, three hours away.
Paediatric learning pathway

- Acknowledge the extensive work of Office of Kids + Families
- Many resources available
- Development of ‘self-check’ of knowledge
Self-assessment

- Walking a tightrope between facilitating reflection and awareness of knowledge and gaps
- SME developed scenarios
- Posed questions
- Provides possible approaches
- Ends with management and care
ABOUT THIS MODULE

This module helps you to maximise the health of the older person by using a person-centred, holistic approach to comprehensive assessment.

The module is designed for rural generalist nurses working in rural and remote areas.

- Contains audio and closed captions.
- Takes approximately 30 minutes to complete.
WHAT YOU’LL LEARN

This module will provide useful strategies to help you recognise, assess and manage the risks and care needs of older people.

*Click each part of the diagram to review what you'll learn.*
COGNITIVE IMPAIRMENT

Let's now look at ways to help you recognise cognitive impairment, and identify a patient's individual care needs.

*Click each item to learn more. When you have finished, click the Forward arrow to continue.*
BIO-PSYCHO-SOCIAL FACTORS TO CONSIDER

When caring for an older person, consider the bio-psycho-social factors that help you achieve optimal person-centred quality of life.

Click Bio, Psycho and Social in the diagram to learn more.
PAUL, THE NURSE

Paul has been a registered nurse for over 20 years. He is an ex-army medic and a current army reservist. He has extensive experience in acute care, but is new to aged care.

Paul is the nurse on duty when an ambulance arrives with a patient, Shirley Fletcher, an 82-year-old woman.

Your goal
Help Paul to provide the best care for Shirley.

Paul is getting ready to meet the ambulance.
Click the Forward arrow to see what happens.
PAUL MEETS THE AMBULANCE

Paul greets Shirley on arrival.

*Click the Play button to listen.*
And the most fun
and most difficult
component.....
Comprehensive Assessment

Modes –
- E-learning
- face-to-face
- blended
- simulation
- master classes

Gaming?
A **first** for variations in learning methodology:

- Comprehensive Assessment is taught in UG programs
- Application usually theoretical
- Few disease-based nursing updates
- The game
  - Real-life scenarios
  - Small MPS, no medical officer
  - Use of A-G and secondary survey
  - Systems-based and holistic assessment

**A new process for instructional design, SMEs and program officers**
• Completing A-G assessments of new and deteriorating patients

Assess A B C D E F G, not A C D).

When stable, move to next area

• Complete secondary survey

Move through each aspect (head-to-toe) in a sequential way.

• Ongoing assessment at appropriate intervals

Safe Correct Timely Care
Click the area in the MPS where you can best assess and treat the patient. Then choose an option from the Menu above.
Click a question to ask the patient, or the person who came in with the patient, to help you assess and treat the patient.

**Ask Patient**
- General
- Signs/symptoms
- Pain
- Allergies

**Ask Friend**
- Do you have any allergies you know about?
- What about pain medications, fish, iodine, food or bee stings?

- No.
- At the hospital.
- Tuesday.
- Oh, I have a wine each night, it depends. I had two last night.
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
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</thead>
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Rural Generalist Nurse program
2016
Meeting the learning and support needs of **NSW Nurses and Midwives** to provide the right care in the right place at the right time.