

# ON TARGET

Aotearoa College of Diabetes Nurses



Aotearoa College of  
**Diabetes  
Nurses**

NZNO



## Committee update

### **ACDN Committee**

Our committee members met for the first time this month, since our AGM in May where we farewelled Bobbie Milne and Sue Talbot. This was the first time meeting with our new committee members Liz Lewis-Hills and Michelle Williamson who we are incredibly excited to have on board. We had a jam packed meeting with many exciting discussions including, a shuffle around of coordinator roles and the introduction of some new roles.

We met with Sue Gasquoine, Policy Analyst from NZNO who delivered a presentation on how ACDN can go about becoming more political and engage in submissions relevant to diabetes nursing in Aotearoa.

Some other suggested areas of work are developing a national nursing assessment form to guide holistic diabetes nursing practice, particularly for nurses entering the specialisation.

In addition the Diabetes Nursing Knowledge and Skills Framework is due to be reviewed.

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With our previous chair Bobbie Milne stepping off both ACDN and NZSSD exec committees our chair, Amanda will maintain regular contact with the NZSSD exec on behalf of ACDN.

Following a shuffle of coordinator roles we have decided to introduce the role of vice chair, webmaster, study day convener, submissions coordinator. A summary of positions is below.

#### Committee members & roles:

- Amanda de Hoop - Chair & Submissions coordinator
- Solita Donnelly - Vice Chair, Accreditation coordinator & webmaster
- Vicki McKay - Secretary
- Nana Tweneboah-Mensah - Treasurer
- Belinda Gordge - Study day convener
- Michelle Williamson - Membership & grants coordinator
- Liz Lewis-Hills - Committee member
- Michelle McGrath - NZNO Liaison & professional nursing advisor
- Jo Duncan - Study day convener
- Newsletter coordinator - pending

We are looking forward to an exciting rest of the year, with many projects to work on including the NZSSD webinar towards the end of the year. If there are any suggestions for topics or suggested presenters or topics please contact ACDN secretary Vicki McKay on [acd.secretary@gmail.com](mailto:acd.secretary@gmail.com)

Ngā mihi nui,

ACDN committee



## Job Advertisement

**Charge Nurse Manager 1.0  
FTE Whitiora Diabetes  
Nursing Team - Fixed Term  
(12 months)**

Apply here:

<https://careers.countiesmanukau.health.nz/working-here/job/view/?job=CMH202311359>

# NEXT ROUND OF PROFESSIONAL DEVELOPMENT GRANTS OPEN NOW!

Closing date July 31st at 1600.

Applications must be submitted on the [ACDN professionals development grant form](#) and emailed to [acd.membership@gmail.com](mailto:acd.membership@gmail.com).

For the full process and information about the grants please visit our [website](#)

## Have your say on the future of ACDN's On Target Newsletter

We would like to hear from you about what you would like to see from us. The last Newsletter report showed that only 47 people opened the March On Target newsletter. This means that we are spending a lot of time and energy providing content for a newsletter four times a year that isn't reaching many of our members.

After feedback from the AGM, we will work on adding more content to our ACDN Facebook page, however we still don't have many members there either. Please check your junk folder for an invitation to join, or request to join here!

Please take the 2-3 minutes to complete [this survey](#) and have your say about the On Target Newsletter.

**TAKE SURVEY**



## Nau mai Michelle Williamson

### **Michelle's bio**

Kia ora koutou, my name is Michelle Williamson, and I am a Diabetes Clinical Nurse Specialist at Te Whatu Ora Whanganui. I completed a Bachelor of Nursing degree through UCOL Whanganui and began my nursing career on the surgical ward at Whanganui Hospital where I enjoyed the gruesome aspects the role had to offer. After several years, I transitioned into the role of a Diabetes CNS and have completed my Master of Nursing Degree with designated prescribing. I enjoy reducing barriers, improving access to medications for those with diabetes, and striving to achieve positive health outcomes for my community. I have an extremely supportive husband, two young amazing daughters and a dog named Trevor. One of my favourite movies is The Labyrinth, my favourite dessert is cheesecake and I enjoy sharing laughter, good food and wine with my friends and whanau.

I am excited about my new role on the ACDN Committee and look forward to what we can achieve together.





## Nau mai Liz Lewis-Hills

### *Liz's pepehā and bio*

Ko Pukekaroro te maunga,  
 Ko Kaipara te awa,  
 ko Ngāti Whātua te iwi,  
 ko Te Uri o Hau te hapū,  
 ko Otamatea te marae.  
 Ko Liz Lewis-Hills tōku ingoa.

I am a clinical nurse specialist Te Whatu Ora Waikato. Specialising in Māori and diabetes in pregnancy and is passionate about bridging the gaps of ethnic disparities. I also serve as the coordinator of the multidisciplinary Waikato Regional Diabetes Services, the NZSSD founder and chair of the Diabetes in Pregnancy (DiP) Special Interest Group (SIG), sits on the Steering Group National GDM guidelines and is newly appointed committee member of the Aoteroa College of Diabetes Nurses.

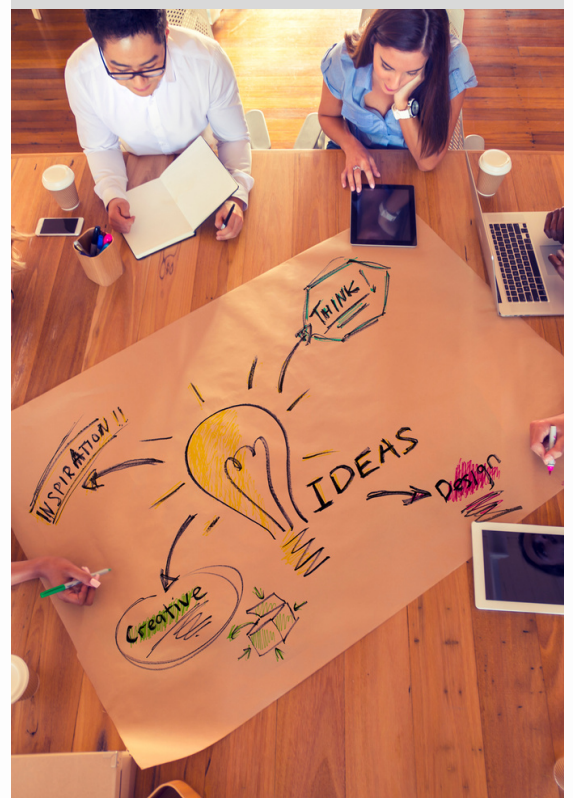
## ACDN FACEBOOK

### JOIN HERE

Our Facebook group is slowly growing. We will be working to add more content to the facebook group and make it a safe space for members to network and share resources.

We would love to see it grow into a space where you can connect with the committee and guide us in what you would like to see done.

Currently we have a closed FB group to support members chat, but we would be open to creating an open page for anyone interested in diabetes nursing to get access to information and resources.



# MASTERS ABSTRACT: Ngā hua o te kōpū – improving health outcomes for wāhine māori with diabetes in pregnancy

Elizabeth Lewis-Hills (Ngāti Whātua),<sup>1,2,3</sup> Donna Cormack (Kāi Tahu, Kati Māmoē),<sup>3</sup> John Parsons,<sup>2</sup> Jade Tamatea (Ngāti Maniapoto, Te Aitanga-ā-Māhaki)<sup>1,3</sup>

<sup>1</sup> Te Whatu Ora Waikato, Hamilton, New Zealand

<sup>2</sup> Department of Nursing, Faculty of Medical Health Sciences, University of Auckland, Auckland, New Zealand

<sup>3</sup> Te Kupenga Hauora Māori, Faculty of Medical Health Sciences, University of Auckland, Auckland, New Zealand

## INTRODUCTION

Ngā Hua o te Kōpū recognises colonial impacts on Māori inequities in diabetes in pregnancy (DiP). The prevalence of DiP rise in Māori results in poor intergenerational health outcomes. This study's objective was to amplify voices of wāhine Māori to produce recommendations to the Waikato DiP service to improve Māori health outcomes.

## METHODS

Utilising transformative kaupapa Māori research (KMR) methods five focus groups occurred across the Waikato region in Kirikiriroa (Hamilton), Hauraki, Rāhui Pōkeka (Huntly), Taumarunui and Tokoroa, to share wāhine Māori space, knowledge, and experience of DiP.

## RESULTS

Thematic analysis identified three themes 1) impact of diabetes: the importance of time for wāhine to accept their diagnosis and activate self-management of diabetes; 2) relationships: between wāhine and clinicians, and value whānau contributions; and 3) aspirations for DiP: including three subthemes calling for options in the areas antenatal clinic, modes of communication mode and Māori led sharing of information and education.

## DISCUSSION

The themes and their associated sub-themes illustrated four kaupapa pou (pillars) that illustrate how services can meet the aspirations of wāhine Māori. Whanaungatanga (reciprocal relationships), tino rangatiratanga (self-determination), manaakitanga (centralising Māori with DiP voices), and the Crown's obligation to uphold te Tiriti obligations.

## CONCLUSION

Ngā Hua o te Kōpū highlighted themes explaining wāhine experience of DiP care which extend to four pou outlining wāhine Māori-informed initiatives for DiP service changes. While it is not possible to undo the impacts of colonisation on Māori, this research project reflects and learns from the past to make progress for the future. A future where Māori navigate their own journey for DiP care (tino rangatiratanga) with support of the Crown (te Tiriti obligations), utilising reciprocal relationships (whanaungatanga) within a DiP service that delivers respectful, generous, care for others (manaakitanga).

## ACKNOWLEDGEMENTS

Waikato Medical Research Foundation. Wāhine research partners experiential expertise and knowledge.





## Job Advertisement

**Nurse Practitioner (Full-Time), Te Mana Ki Tua - Specialist Weight Management Service, Te Whatu Ora-CMH202311448**

Apply here:

<https://careers.countiesmanukau.health.nz/working-here/job/view/?job=CMH202311359>

## NZNO Constitution review

### ***Have your say here!***

#### BACKGROUND

At the 2020 AGM a remit was passed which called for a full independent review of the NZNO Constitution. The independent review was completed by Morrison Kent. Then Morrison Kent's report was peer reviewed by Ross Wilson. The report from Morrison Kent and the peer review from Ross Wilson were presented to the AGM in 2022. The AGM agreed to next steps in the Constitution Review, calling for consultation with members on what concepts should be included in a revised constitution.

#### PURPOSE

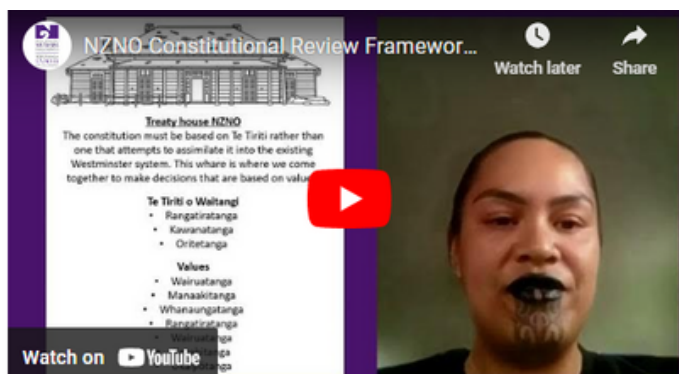
The Purpose of this Review is to:

1. Give recognition to Te Tiriti o Waitangi in NZNO's Constitution.
2. Embed democratic processes for members into the operations of NZNO which work\* in a bicultural environment.

\*In this context, work means working efficiently and effectively in a timely fashion and guided by the NZNO objectives.

#### VIDEO SUMMARY OF THE REVIEW

Watch the Constitution Review Panel's six minute video which explains the history, intent and process of this Review. Guidance on how to give your feedback and more information about the Review both follow below



#### WHAT TO EXPECT NEXT

After consultation closes on 7 July 2023 your responses will be used to finalise the Constitution concepts which will be presented to Hui-ā-Tau and AGM this year.

Following AGM 2023 the new Constitution will be drafted and presented for adoption in 2024.



## ACDN 2023 Study Day Feedback

### ACDN Committee

Following the study day, we asked attendees to complete a survey monkey to provide feedback on speakers, content and the format of the day. We have included the feedback below along with some quotes from the presenter feedback.

How did you find the study day?

94% rated it 5/5, while 6% rated it 4/5, no lower ratings.

Would you prefer ACDN study days run alongside NZSSD?

87% yes, 13% no, 0% Study day not required at all.

Dr Chris Cameron' - Autonomic Neuropathy feedback

"Excellent", "Great learning and relevant" " A+++++++" "Really helpful, excellent clinical gems" Really interesting, the cardiac one was absolutely new information" "Fantastic".

Kiralee Schache - Diabetes Distress feedback

"Very useful and good reflection on practice" "Love every word she said" "Great relaxed presentation with helpful tips and tools" "Good reminder" "Fabulous reminder to keep a positive frame of mind at all times".

Prof Geoff Shaw' - Hyperglycaemia in ICU feedback

"Excellent session, very thought provoking" "Excellent, enthusiastic and inspiring" "Entertaining" Very engaging and quite funny" "Wow! what great use of technology".

**"All speakers content was relevant to practice, challenging, inspirational and motivating"**

**"Really enjoyed variety of speakers"**

**"Easier to get leave approval and funding to attend one longer meeting than two separate"**

**"Started too early"**

**"Thanks for all efforts in organising"**

# MASTERS ABSTRACT: Nursing perspectives on the use of a continuous glucose monitoring system in ICU and its transferability to a ward setting.

Belinda Gordge

## INTRODUCTION

Patients undergoing total pancreatectomy surgery require intravenous insulin for many days post-surgery, which involves 1-2 hourly capillary blood glucose monitoring to adjust the amounts of IV insulin. This results in patients regularly complaining of pain and disturbance owing to the constant finger pricking.

In the contemporary nursing shortage predicament, this constant need for monitoring becomes an issue for nursing staff, due to the frequency and length of time this vital sign takes to complete (4.7 minutes) per hour which includes adjustment of insulin (Aragon, 2006). Continuous glucose monitoring (CGM) without the need for constant finger pricking has been in use in the health sector, however, often restricted to ambulatory settings.

Locally, CGM was piloted in an Intensive Care Unit (ICU) setting. This research explored ICU nurses' perspective of using GCM to investigate its potential to improve patient care and transferability outside of the critical care environment.

## METHODS

Semi structured interviews of ICU nurses who had volunteered to be interviewed were recorded and the transcriptions were thematically analysed

## RESULTS

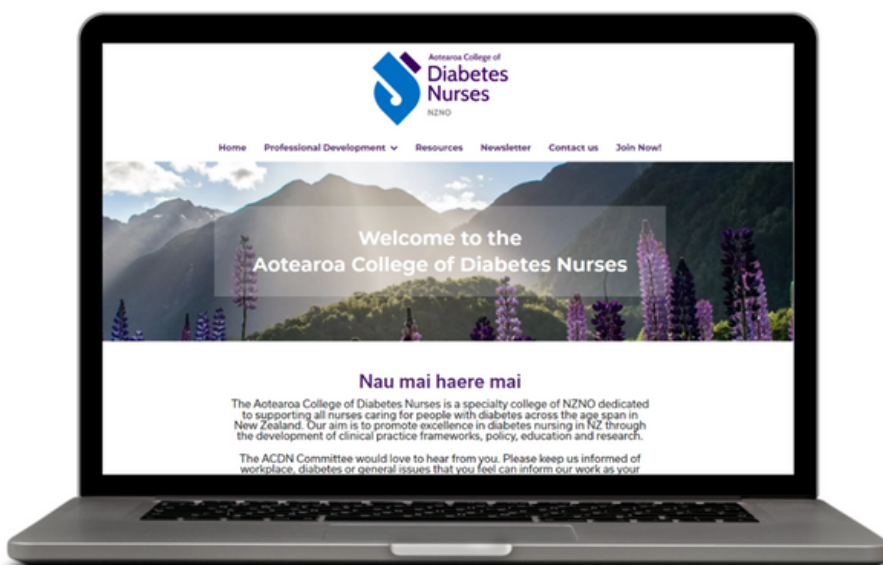
The results show agreement amongst nurses that CGM technology would reduce nursing time spent on the task and remove the necessity of frequent painful monitoring for patients, thereby improving patient care in both the critical care and ward setting.

## DISCUSSION

This research showed there was a clear indication of the potential benefit, viability and value of this technology in the ICU and ward setting. The issue of cost of introducing this technology and the potential change of insulin algorithms could be topics for further research.

## CONCLUSION

CGM technology would appear to have not been widely used in the New Zealand inpatient setting. This research has shown, from a nursing perspective, CGM could easily become established in both critical care, and ward settings in New Zealand hospitals.



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## NZSSD STUDY SESSION WEBINARS

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## [JOIN NZSSD HERE](#)

membership gives you access to reduced fees for all meetings, awards, additional and national information and updates, free webinar education sessions and a quarterly newsletter.

Health Learning Online is available for FREE as a basic foundation of diabetes education

## Free Education Reminders

### ACDN Committee

#### ADVANCED DIBETES MANAGEMENT COURSE

– University of Waikato, Dr & NZSSD

This free, online diabetes teaching program led by Dr Ryan Paul is delivered via a combination of webinars and mentoring sessions. Registrations are due to close mid-June ready to start the course by July 17th. If you are still interested register [here](#).

#### NZSSD STUDY SESSION WEBINARS

– Delivered for NZSSD members

These webinars initially were introduced in place of SIG study days in 2021, however thanks to their success have continued to be delivered for NZSSD members throughout 2022. Remember to register for these study sessions as you can watch back if you are unable to attend the session live, and if you are not already an NZSSD member this is another great reason to join.

#### NATIONAL DIABETES KNOWLEDGE PROGRAM

– [NZSSD Health Learning Online platform](#)

This course is delivered via Health Learning Online & Ko Awatea Learn and is a free program aiming to provide all health care professionals with the knowledge and skills to work effectively with people and whanau living with diabetes. The content aligns with the National Diabetes Nursing Knowledge and Skills Framework 2018, Skills and Career Framework for Dietitians 2016 and the draft Podiatry Competency Framework for Integrated Diabetic Foot Care in New Zealand. The program provides fundamental knowledge on a range of subjects with an assessment on each. On completion you receive an NZSSD certificate and professional development hours.



Did you know there is a full specialist nursing library available to NZNO members!

There are highly skilled librarians who are keen and willing to help you with your topic, research and interest requests.

### Contact:

Phone:  
0800 28 38 48

Email:  
[Library@nzno.org.nz](mailto:Library@nzno.org.nz)

Website:  
[www.nzno.org.nz/resources/library](http://www.nzno.org.nz/resources/library)

Physical Address:  
NZNO Library  
Level 3 Findex House  
57 Willis Street  
Wellington 6011

## NZNO Library

### *Specialist library and information services for NZNO members*

Ask us about:

- Borrowing books, RCN and ICN publications
- Library current awareness e-newsletter  
[https://www.nzno.org.nz/resources/library/library\\_newsletter](https://www.nzno.org.nz/resources/library/library_newsletter)
- NZ Nursing thesis, dissertations and scholarship reports collection <https://www.nzno.org.nz/resources/library/theses>
- Topic-based resource lists  
[https://www.nzno.org.nz/resources/library/resource\\_lists](https://www.nzno.org.nz/resources/library/resource_lists)
- Research/topic queries
- NZ and overseas journal articles on employment, nursing and allied health
- NZNO College and Section journals
- – The Dissector, The Tube, Emergency Nurse New Zealand, L.O.G.I.C, The Outlet & On Target

Search online journals and databases via the NZNO website  
[https://www.nzno.org.nz/resources/library/online\\_databases](https://www.nzno.org.nz/resources/library/online_databases)

### Looking for recent journal articles on Diabetes?

Search Proquest Public Health database via the NZNO website

### Kaitiaki Nursing Research

Kaitiaki Nursing Research (KNR) is an annual subscription only journal which has showcased New Zealand nursing research since June 2010. KNR is an internationally double blinded peer reviewed research journal. It publishes original, full length research manuscripts from New Zealand based nurse researchers (or other researchers where the research can be shown to have particular relevance to nursing in New Zealand.

Some of the members of ACDN may be involved in study and/or research and they may be interested in submitting an article to be considered for KNR. There are various options in terms of the types of manuscripts that can be submitted.

They include:

- Research manuscripts: Original research papers should be 3000-5000 words in length for the main text
- Research briefs: Limited reports (1200-1500 words)
- Research methodology articles: Reports (2000-3000 words) featuring a methodology with important implications for research in practice

Submit your research: [kaitiakiresearch@nzno.org.nz](mailto:kaitiakiresearch@nzno.org.nz)

# Whakamanatanga - Accreditation

## **Solita Donnelly**

Tēnā koutou ACDN members, I am taking on the role of accreditation coordinator from Amanda who has done a fabulous job of coordinating the programme but is moving on to the greater role of chairing the ACDN committee. Amanda is kindly going to support me in the role as I get to grips with the processes. I thought as an introduction to the role I should give you some background about my accreditation journey.

I have only had Specialist RN accreditation since 2020. Prior to this I had not done accreditation as it seemed like an intimidating process and it wasn't a requirement where I was employed. I was lucky enough to work with Bryan Gibbison (a previous accreditation coordinator) who assured me it actually wasn't that difficult, especially as I had completed an RN Prescribing portfolio & Senior Nurse PDRP. In submitting my application and being accredited I felt really proud and it helped rid some of the imposter syndrome, that I am sure many of us are familiar with when working in a senior nursing role. I strongly believe that seeing examples of portfolios and reports can be really helpful and make you realise, 'hey that isn't too difficult' or 'yeah I am working at that level', or alternatively, it can be helpful to see the level of work you are aspiring to do.. This is my favourite part of being an assessor - having the privilege of reading about the inspiring mahi that others are doing around Aotearoa and celebrate fellow tapuhi's hard earned expertise.

### ACDN COMMITTEE GOALS:

- Move the accreditation process online (this is a long term goal)
- Inspire more people to become accredited & maintain accreditation.
- Offer exemplar portfolios for initial & maintenance applications on the website

### CURRENT ACCREDITATIONS:

We currently have 48 accredited nurses - 38 Specialist RNs, 9 Specialist NPs, and 3 Proficient RNs.

### NEXT ROUND:

The next accreditation round will be closing **4th of August**. All required documents are available on the [ACDN website](#) and should be used over previously saved old application forms. Reminder there are [grants available](#) of \$100 to go towards fees for an accreditation application.

### ASSESSORS:

A big thanks to fellow assessors: Amanda de Hoop, from Mid-Central, Bryan Gibbison and from Waikato, Pauline Giles from Whanganui, Heather Campbell from Capital Coast, Andrea Rooderkerk from Bay of Plenty, Bobbie Milne and Harpreet Kaur from Counties Manukau, and Lois Nikolajenko and Emma Ball from Midcentral. Your contribution to the accreditation process is much appreciated. We are always looking for more accredited nurses to become assessors, so please get in touch if this is something of interest. Assessment of portfolios occurs twice a year. The time it takes to complete an assessment varies but in general you should allow two hours. Assessors are paid an honorarium of \$50 for each portfolio assessed and it is a rewarding experience.

Ngā mihi nui,

Solita Donnelly (She/Her) Pākehā

ACDN Accrediation coordinator

Director & Diabetes Nurse Specialist, Aotearoa Diabetes Collective

[solita@aotearoadiabetescollective.org.nz](mailto:solita@aotearoadiabetescollective.org.nz)

## Call for diabetes nursing assessment forms around Aotearoa

### **Jo Duncan**

The ACDN committee is looking to collate and review the various diabetes nursing assessment forms used by secondary care diabetes services across Aotearoa. The purpose is to review the current assessment forms/framework being used to determine if there is a need to standardise an assessment framework that aligns with aspects of care in the NDNKSF to ensure our nursing assessment is holistic and consistent across the country.

If you are willing and able to share the assessment framework or form used within your rohe, please email through to me [Jo Duncan](#).

## Member news and highlights

### ***We want to hear from you***

Do you know of someone in your team who is doing amazing mahi, or are you keen to showcase the work you do for tanagata with diabetes?

Do you have an exciting new program or an example of work going on in your community making a real difference. You may have recently completed a research or clinical project or published elsewhere. We would love to show case more of our members and what they do throughout the motu. If you are keen to submit something to the newsletter please send it through via email to [Solita Donnelly](#)

A scenic landscape photograph showing purple lupine flowers in the foreground, rolling green hills, and snow-capped mountains under a blue sky with white clouds. A semi-transparent white rounded rectangle is overlaid on the center of the image.

Thanks to our sponsors

# MEDIRAY Diabetes



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Free to download on iPhone and Android

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Now with optional alarms and zero finger pricks†

Share your glucose data and alarms in real-time with your loved ones and healthcare professionals.



6.2 <sup>mmol/L</sup>



## The knowledge to manage your glucose more confidently.

With FreeStyle Libre 2, easily know your glucose level and where it's headed with zero finger pricks.\*

### Now You Know



\*Data based on the number of users worldwide for FreeStyle Libre family of personal CGMs compared to the number of users for other leading personal CGM brands and based on CGM sales dollars compared to other leading personal CGM brands.  
† Finger pricks are required if glucose readings and alarms do not match symptoms or expectations.



# DOABLE

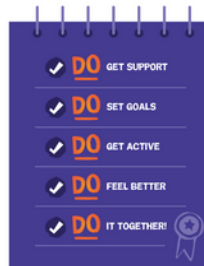
## DEALING WITH DIABETES TOGETHER

### What is DOABLE?

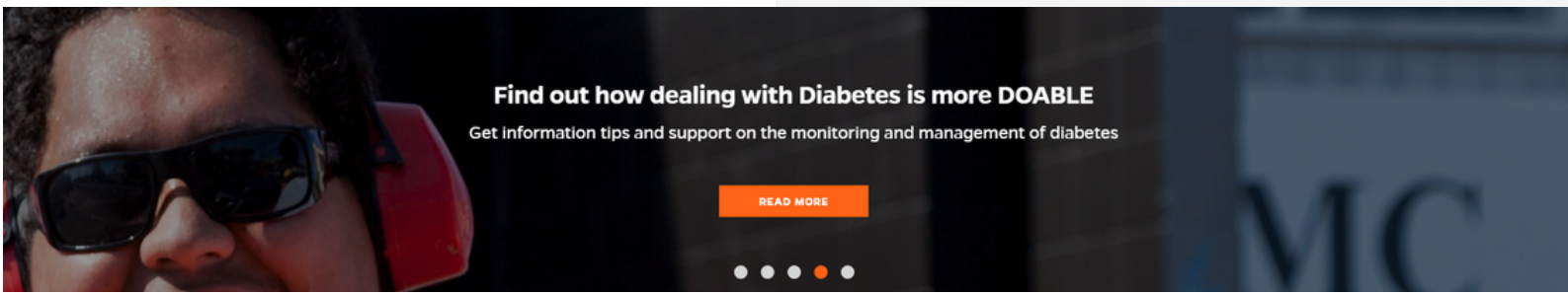
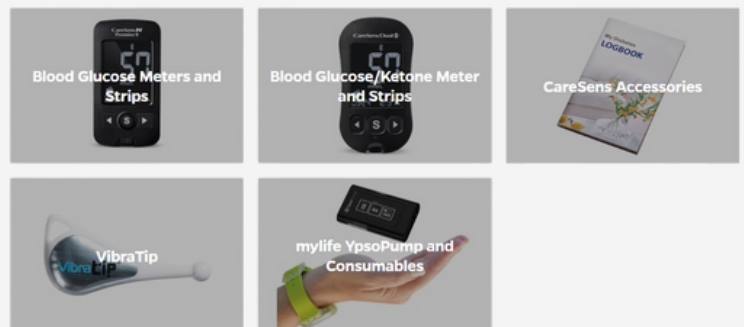
**DOABLE** is an initiative designed to bring people dealing with the challenges of diabetes together. With loads of practical advice, tips and support, it's here to help you **DO** something about your diabetes, and take small, **DOABLE** steps towards improving your health.

Best of all, it's all about **DOING IT TOGETHER**: with support from JumpStart and Pharmaco Diabetes.

It is super easy to be a part of DOABLE. So why not join us? Feeling better might just become a whole lot more **DOABLE**.



# Pharmaco Diabetes



### Find out how dealing with Diabetes is more DOABLE

Get information tips and support on the monitoring and management of diabetes

[READ MORE](#)

