Introduction

Welcome to our fourth edition of Reason. The editorial team have a wide variety of articles on new and on-going research activities. On our cover is Professor Merryn Gott photographed at her recent inaugural lecture. See the article on page 11.

Since our last edition in May, a number of staff within the School have secured a variety of grants. These are outlined by those involved and cover a large selection of projects. In our Postgraduate section we have an update on recently completed Masters students and their topics of research as well as an article from a current PhD student and details of studies being undertaken by other PhD students.

There are updates on various projects being led by School members and some new collaborative work that is getting underway. We say congratulations to students from the School for getting involved with presenting at Healthex and the Cochrane Colloquium. Both of these events were very successful with some fantastic feedback for those involved.

We also say farewell to Associate Professor Brian McKenna, who leaves us at the end of the year for a new post in Australia.

We hope you enjoy this new edition and as always electronic copies of Reason will be available on the website www.fmhs.auckland.ac.nz/son

Our next edition will be published in 2013 so we would like to wish you all a Happy New Year.

The editorial team send their thanks to all who contributed to this edition.

Editorial Team: Merryn Gott, Simon Halpenny, Gary Bellamy, Katey Thom

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Visiting nurse academic
Professor Anne Marie Rafferty

The School was recently pleased to welcome a distinguished nurse academic. Professor Anne Marie Rafferty is Dean and Chair of Nursing Policy, Kings College London. In addition to being well-known for her research on nursing history, Professor Rafferty has made a significant contribution in the areas of workforce research and policy, quality of work environment, and nurse and patient outcomes.

Professor Rafferty gave a presentation to the Faculty of Medical and Health Sciences on the findings of a recent EU study on nurse staffing and hospital outcomes involving 12 countries. This is probably the largest study ever undertaken in nursing. Following the presentation, she met informally with academics from the School of Nursing. This was a great opportunity to discuss a range of topics on nursing research, and build on previous links with Professor Rafferty. Whilst at the University, she also held a workshop at the History Department on the use of personal diaries and letters in historical research. The workshop, attended by the NERF Oral History Team and postgraduate history students, allowed us to explore methodological issues in some detail.
Farewell to Brian McKenna

The School will be saying goodbye to Associate Professor Brian McKenna who has accepted a professorial position at The Australian Catholic University in Melbourne.

During his time at the School, Brian has been instrumental in the mental health nursing teaching curriculum, supervision of masters and PhD students and building a research programme around legal issues in mental health.

As Director of the Centre for Mental Health, Brian managed an array of contracted and investigator initiated research projects. These have explored such areas as mental health service provision to prisons, evaluating problem solving courts, problem gambling in prisons, the relationship between mental illness and homicide, media depictions of homicide perpetuated by people who were mentally ill, statutory roles under mental health legislation, reviewing assessment of violence guidelines and media depictions of suicide.

In his new position, Brian will be aligned with North Western Mental Health Services based at Royal Melbourne Hospital. He will be involved in evaluation of service delivery and practice innovation and will maintain an active involvement in forensic mental health research.

Brian sees his new role as a potential catalyst for international research collaboration between North Western Mental Health and the Centre for Mental Health Research.

We wish Brian well in his new position in Melbourne.

Australasian Collaboration for Evidence in Practice Development (ACEPD)

The School of Nursing is now a member of the Australasian Collaboration for Evidence in Practice Development (ACEPD) along with the University of Wollongong, Monash University, the University of Tasmania and the University of Technology Sydney.

ACEPD brings together researchers for the purpose of developing an evidence base for knowledge translation and practice development (PD) in health services and in education, with a focus on influencing policy to bring about improvements in practice to benefit patient outcomes. PD is an approach to change in clinical practice that uses systematic methods to influence work-based cultures that engender person-centred care engaging the needs of patients, families and staff.

Two New Zealand-based PD projects are currently underway at Waikato DHB and Lakes DHB, both led by Dr Ann McKillop in close collaboration with local clinical staff. Also, PD concepts and methods are included in some of our postgraduate courses.

If you have any queries about PD, please contact Ann (a.mckillop@auckland.ac.nz).
Aged Residential Care Healthcare Utilisation Study (ARCHUS)

Dr Michal Boyd is co-investigator on a HRC ($1.2 million) funded multi-disciplinary team intervention study that aims to reduce potentially avoidable residential aged care hospital admissions. The primary investigator is Professor Martin Connolly from the Freemasons’ Department of Geriatric Medicine and the team includes University of Auckland co-investigators Professor Ngaire Kerse, Joanna Broad and Professor Thomas Lumley along with associate investigator Noeline Whitehead from Counties Manukau and University of Auckland School of Nursing. This randomised-controlled study has been implemented across all three Auckland DHBs. The intervention phase began in 2010 and ended in September of this year. The control groups are now receiving the intervention.

The intervention model is based on aged care outreach programmes from all three Auckland DHBs. This includes the Residential Aged Care Integration Programme successfully implemented in Waitemata DHB in 2007. The programme is led by Gerontology Clinical Nurse Specialists who provide proactive education and clinical coaching for facility nurses and caregivers. The intervention model also incorporates Manukau DHB’s residential aged care multi-disciplinary team meetings and aspects of Auckland DHB’s gerontology clinical nurse specialist outreach, including education specifically for aged care staff and quality bench-marking programme.

There have been 36 facilities and over 2,000 residents enrolled in the study. Results are expected by mid 2013.

Reducing teenage pregnancy in South Auckland: A project by our nursing undergraduate students

Gemma Veale, Manisha Singh and Laken Rowley

In Semester One of 2012 we were assigned a community project to design an intervention aiming to reduce the rate of teenage pregnancy in a South Auckland school. Working alongside Dr Karen Hoare and Greenstone clinic we spent time at a local high school to gain insight into the rate of pregnancies occurring over the summer. From this we developed a youth friendly ‘summer essentials’ pack. Our pack targets Māori and Pacific youth specifically as we found that they are disadvantaged in the provision of preventative health care. This is evidenced by high Māori and Pacific pregnancy rates in the secondary school population. The pack includes information on contraceptive options for both men and women, dispels common sex myths and highlights where to access free sexual health services in a confidential manner.

Our community project was well received and we were given the opportunity by Professor Bruce Arroll to present at the Cochrane Colloquium conference in October. This was a very exciting opportunity which allowed us to showcase our work to an international audience. The focus of our presentation was the ‘summer essentials’ pack and the statistics behind its development. We received positive feedback which further enforced the need for healthcare interventions for adolescents.

A summer studentship has been approved by The University of Auckland to evaluate the impact of our summer holidays pack. Over 2012-2013 our pack will be piloted at several high schools in South Auckland. If proven successful we feel that it is easily adapted for implementation in other areas of New Zealand. We hope to have made a difference in addressing one of the most prevalent youth issues in New Zealand and would like to see further action in this area. Lastly we would like to thank Dr Karen Hoare and Dr Ann McKillop for their contribution and guidance throughout the project.

Manisha Singh, Gemma Veale and Laken Rowley
Nurses Advocate Equity: Excellence in Equity Awards 2012

The “Excellence in Equity Awards” acknowledge equity-focused research, teaching and learning. The Equity Office - Te Ara Tautika leads The University of Auckland’s commitment to be an equitable, inclusive and world-class place to work and study and supports the contribution the University makes to enhancing New Zealand’s future. Equity is promoted through student and staff equity strategies, policy, projects, information, networks and advice. These initiatives enhance opportunities for participation and success among Māori and equity groups including Pacific, women, people with disabilities, LGBTI (Lesbian, Gay, Bisexual, Transgender and Intersex), and people from refugee backgrounds.

In 2012 a record 20 applications were considered. Associate Professor Nicolette Sheridan, School of Nursing, and Associate Dean Equity, Faculty of Medical and Health Sciences and Dr Michelle Honey, School of Nursing were contributors to two projects that received awards.

A research collaboration to put Health Equity on the agenda
(Faculty of Medical and Health Sciences and four district health boards)

Key people: Associate Professor Nicolette Sheridan (Associate Dean Equity, FMHS), Professor Allan Barber, Ms Mary-Ann Boyd, Dr Peter Carswell, Professor Martin Connolly, Associate Professor Janet Clinton, Dr Gerry Devlin, Professor Rab Doughty, Dr Lorna Dyall, Associate Professor Timothy Kenealy, Professor Ngaire Kerse, Professor John Kolbe, Professor Ross Lawrenson, Ms Faith Mahoney and Dr Allan Moffitt.

“Reducing health inequalities is a matter of fairness and social justice” (Marmot, 2010).

A group of FMHS researchers partnered with four district health boards to undertake research, which resulted in an unpredicted NEW equity agenda and ongoing research collaboration.

The “Alleviating the burden of chronic conditions” is a national survey of district health boards that brought researchers together to examine approaches to the care of New Zealanders with chronic conditions, in particular Māori, Pacific peoples and those with lower socio-economic status. The research collaboration provided a platform to extend our clinical thinking and discuss a more concerning macro issue: how to build health equity into the New Zealand health care system. We agreed that “inequalities that are preventable by reasonable means are unjust and that a fair distribution of health and sustainability are important social goals”.

From a range of disciplines, strongly represented by medicine and with different knowledge about parts of the health system, we discussed and wrote what we knew and what we found in the research. After seven commissioned reports for government and one article we identified a gap: we hadn’t addressed what to do about inequity within the health system. Departing from our usual medical and health service focus, we published “Health equity in the New Zealand health care system: a national survey” in the International Journal for Equity in Health in 2011. We reported health inequity by ethnicity and geography in 15 district health boards and advocated for measurement of equity dimensions within the system. Health equity is a new field of research and measurement is of high international interest.

This research collaboration has continued to build equity into new projects and new roles demonstrating leadership in equity. The research collaboration provides a vehicle for dialogue, co-learning and knowledge generation. This is clearly continuing and is shown by the shared projects and roles of individuals. We recognised the need for a research agenda driven by questions about health equity that could inform the priorities of government, building on what is already known.
Tātou Tātou/Success for All: Improving Māori student success in health professional degree-level programmes
(Faculty of Medical and Health Sciences)

Key people: Dr Michelle Honey, Dr Elana Curtis, Erena Wikaire, Dr Bridget Kool, William Nepia, Fiona Kelly, Associate Professor Phillippa Poole; with former University of Auckland colleagues Torise Lualua-Aati and Dr Myra Ruka.

Understanding the distinctive worldviews of Māori students is critical to the knowledge base that drives teaching and learning practices in tertiary health programmes. While some evidence has been gathered about lecture-based learning in universities, little is known about non-lecture teaching activities that complement traditional en masse teaching, with few studies focused on representing indigenous student voices. This evidence-based project targeted Māori student success in degree-level tertiary education. Research questions included: What teaching practices in non-lecture contexts helped or hindered Māori success in degree-level study in nursing, pharmacy, medicine and health sciences? What changes does research in this area suggest are needed to teaching and higher education practices in order to best support Māori success in degree-level study designed to prepare students for work in the health professions?

This qualitative study utilised Kaupapa Māori research (KMR) methodology using the Critical Incident Technique (CIT). Interviews were conducted with 41 Māori students currently enrolled in or recently graduated from the Bachelor of Medicine (17), Bachelor of Nursing (7), Bachelor of Pharmacy (3), and Bachelor of Health Sciences (14) at The University of Auckland. The research identified 1346 incidents that both helped (n = 898, 67%) and hindered (n = 448, 33%) student success. The majority of student stories were related to the provision of Māori Student Support Services (n = 789, 59%) followed by the Undergraduate Programme (n = 375, 28%) and Māori Student Whanaungatanga (family bonding) (n = 182, 14%). Thirteen sub-categories describe helpful and hindering incidents as being associated with: MAPAS/Tuākana Tutorials, Resources, Academic Transitioning, MAPAS staff and Māori academic staff, Māori Mentoring and Role Models, Racism / Stigma Towards Māori, Teaching Staff Characteristics, Programme Organisation, Linking Theory to Practice, Programme Incorporation of Māori Cultural Values, First Year Health Study Competition, Supporting Whakawhanaungatanga or Group Learning.

Based on our findings, quality tertiary teaching for Māori students within health programmes should: (1) Use effective teaching and learning practices, (2) Provide academic support that is culturally appropriate, (3) Provide pastoral support that is culturally appropriate, (4) Provide a culturally safe learning environment, and (5) Encourage cohort cohesiveness.

Wallath Prize for Public Health

Ahmed Abdile, a second year medical student won the Wallath Prize for Public Health research for his summer studentship which focused on self harm presentations to Auckland City Hospital. Here Ahmed explains more about this project.

“Intentional self-harm is a major health concern both internationally and in New Zealand. A history of self-harm attempts is the strongest indicator for future suicide mortality. Under the supervision of Anthony O’Brien (Senior Lecturer in the School of Nursing), I conducted a descriptive analysis of people presenting to Auckland City Hospital with deliberate self-harm.

In addition to fundamental epidemiological data collection, our study broke ground in several areas. We were able to describe the length of stay in ED for this population of patients with links to MoH Shorter Stay in ED health targets. Also we were successful in characterising a host of risk factors yet to be described in the literature, especially in the New Zealand context. The research process was enjoyable, I experienced the full range of emotions. From feeling out of my depth in a sea of data, to breaking through the wall of statistics and the excitement of connecting the dots and seeing the bigger picture.

Having lived in Mount Roskill since our family emigrated from Somalia in the early 1990’s, I studied at Mount Roskill Grammar School before gaining entry into The University of Auckland. I am currently in my third year studying medicine and looking forward to more clinical attachments next year.”
A Spotlight on Research

Research staff in the School of Nursing undertake a wide range of projects aimed at improving the health and welfare of New Zealanders. In this issue, we throw the spotlight on two recently completed studies highlighting the diversity of research projects undertaken and some of the key findings from those studies.

Advance care planning project

Investigators: Gary Bellamy, Merryn Gott, Michal Boyd

Researchers have been working with IDEA (Intellectual Disabilities Empowerment in Action) Services this year on a commissioned study to explore the views of staff and families of service users, to review their practices and to develop service improvements in relation to end of life care for those with intellectual disabilities.

IDEA services has over 800 community group homes supporting approximately 5,800 people with intellectual disabilities across New Zealand, of whom 24% are already aged 50 years and over. With the ageing of this population has come an increase in the incidence and prevalence of dementia and the service identified a need to pay attention to appropriate palliative and end of life care. Little research had previously been conducted to support the development of appropriate models of care for this group, particularly in relation to future care and treatment preferences. Researchers worked with the service to help them identify ways in which the needs of service users, their families/whanau and staff members could be met.

Led by Dr Gary Bellamy, the team spoke to key individuals to find out their views of what contributes to good support at the end of people’s lives, and what the service could do to keep improving. Dissemination of research to end users is considered important and the team invited all those who had participated to a feedback session to listen to some of the findings.

The findings highlighted the challenges of caring for intellectually disabled adults at the end of life in addition to some exceptional work that the South East Auckland teams have done, showing that the service can provide when the right things are in place. This includes having staff who enjoy working with older people and are suited to caring for people at the end of life, great training (hands on support included), knowledgeable managers, relationships with local palliative care teams and funding mechanisms to enable caring for older intellectually disabled adults in community homes. The final report written by the researchers for the service will help inform their end of life care policy and contribute to other guidance materials for managers and support workers.

Staff and families from Cornwall/South East during a feedback session, led by Dr Gary Bellamy

Culturally appropriate care for older lesbians and gay men

Investigators: Gary Bellamy, Michal Boyd and colleagues

University of Auckland researchers, with colleagues from Massey University and representatives from health and social care organisations, have conducted research examining the views and experiences of staff caring for older lesbians and gay men living in residential aged care facilities.

Funded by the Rule Foundation, a charitable trust, the study was carried out in response to increasing awareness of the unique issues faced by sexual minorities as they age in New Zealand. An earlier report published in Western Australia concluded that older sexual minority groups accessing retirement and residential aged care facilities experienced high levels of unmet needs and fears of discrimination. No comparable research was available in New Zealand.

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The recent study, conducted over three district health boards in the Auckland region, involved discussion groups with 47 staff from seven residential aged care facilities. Case scenarios of older gay and lesbian residents living in aged care were used to facilitate discussion.

Registered nurses within New Zealand work within a prescribed code of conduct and have legal and professional responsibilities towards patients. However, unqualified caregivers who are involved in direct care receive most of their training “on the job”. The attitudes of medical staff, nurses and caregivers can impact significantly on acceptance and understanding of the unique perspectives of LBGTI residents.

Staff who took part in the study said that knowing family members, friends and colleagues who identified as lesbian or gay helped in their ability to empathise with others. They also noted that individuals react differently to the transition to residential care. For all people, regardless of sexual orientation, this was an unsettling time and, once they had made the move into residential care, good assessment and developing relationships were crucial.

Older lesbians and gay men were not identified as a homogenous group, but issues of trust were fundamental as they had grown up at a time when homosexuality was criminalised and lesbianism vilified. As a result, affording older lesbians and gay men the time to develop trusting relationships with care workers was important. Personal privacy was seen as a fundamental right for all older people in aged care, and staff acknowledged the importance of being able to help ensure personal privacy, along with partner involvement in care.

The findings from the study have been used to develop some practice guidelines for staff working in aged care facilities. The intention is to follow this project with research aimed at testing these guidelines with other facilities and exploring the views and experiences of older gay, bisexual and lesbian people and their partners regarding residential aged care.

### Planning for future mental health crises

Allowing patients to make advance decisions regarding their future health care is becoming an increasingly important feature of health service provision. Dr Katey Thom has been awarded a University of Auckland New Staff Grant to explore the various models of advance care planning that have been developed internationally within mental health services, with the aim of considering their applicability in New Zealand.

Katey explains that “many advocates believe such planning has the potential to facilitate autonomous decision making and increase patient perceptions of control over treatment which is particularly relevant to users of mental health services who are at risk of being denied choice, validation, voice and dignity when receiving compulsory treatment”.

The project will be undertaken alongside colleagues Tony O’Brien, Stella Black and Graham Panther and will aim to generate the necessary preparatory information to develop a Health Research Council proposal for a clinical trial of advance care planning in mental health services. It will do this by undertaking a systematic review of the different models of advance care planning in mental health currently in operation internationally; identifying clinicians’ attitudes to advance care planning in mental health; and exploring mental health service users’ experiences of using advance directives (the current option available to service users in New Zealand).

The consideration of advance care planning in mental health care is extremely relevant given the current policy climate following the ratification of the Convention for the Rights of People with Disabilities by the New Zealand government. Katey explains that “the Convention promotes service users’ ability to claim their right to make important decisions regarding their lives, rather than being viewed as ‘objects’ of medical treatment and social protection. It can be argued that advance care planning is one method of ensuring service users have a stronger role in the decision making about their health and social care needs”.

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Exploring key factors in potentially avoidable admissions from aged residential care

Investigators: Rosemary Frey, Merryn Gott, Michal Boyd, Jackie Robinson

In New Zealand, approximately 28,000 people over the age of 65 live in aged care facilities and 31% die in this setting. However few data exist regarding palliative care provision within aged care facilities despite concerns raised by the Ministry of Health that such provision is ‘scanty’ and ‘uncoordinated’. This project builds on a recently completed HRC partnership grant headed by Prof Merryn Gott, conducted in collaboration with Auckland District Health Board (ADHB), which aimed to identify mechanisms for optimising palliative care management within ADHB.

Project results from qualitative interviews with Auckland City Hospital clinicians also identified both families’ confusion regarding a relative’s current status as well as a lack of formal palliative care training among aged care staff as contributory factors to potentially avoidable admissions from aged care facilities. Building on this evidence, the proposed project will gather data from staff working within aged care and families of residents who have died to better understand these two potential contributors to hospital admissions from aged care settings. There is evidence to show that greater family understanding is dependent on the knowledge, skills, and abilities of aged care staff.

However, improving both staff formal palliative care training and family understanding will require the development of a complex educational intervention. The successful design of such an intervention requires an identification of the evidence, both theoretical and empirical to form the basis for larger trials within aged care facilities. Drawing from the Medical Research Council framework for the development and evaluation of complex services and treatments, and informed by the findings of an on-going systematic review undertaken with colleagues at the University of Sheffield in the UK, the project will establish an evidence base to support an HRC grant application for the development of a palliative care educational intervention in aged care facilities.

Potentially avoidable admissions and interventions amongst hospital inpatients with palliative care needs: A New Zealand perspective - an update

Investigators: Merryn Gott, Rosemary Frey, Jackie Robinson, Anne O’Callaghan, Michal Boyd, George Laking, Leigh Manson, Barry Snow

Key findings:

• Results of a Snapshot Census identified that 19.8% (n=99) of the total inpatient population at Auckland City Hospital met criteria for palliative care need, of whom over half (n=57) had died within 6 months of the admission.

• 21 of these 99 admissions were classified as potentially avoidable; these hospitalisations were estimated to cost ADHB $13 million annually.

• The staff palliative care education survey found that only 19% of clinicians had received formal palliative care training following their initial qualification. Confidence in palliative care delivery was significantly greater for those clinicians with formal training.
A new study exploring palliative care health literacy for Māori

In August Dr Jacquie Kidd was awarded a Health Research Council grant to study Palliative Care, Health Literacy, Māori communities and health services. This year long project uses a Kaupapa Māori approach, meaning that its theoretical base is centred within Te Ao Māori and its aims include validation of Māori voices.

Health literacy involves how people come to have information about health issues and how that information is used in everyday life, translated into new situations, and passed on to others. It is not only a characteristic of patients/whānau but is also a function of health care systems, health professionals, and their communication with patients/whānau. Low health literacy is associated with a range of adverse health outcomes including poorer health status, poorer outcomes from treatment, increased hospitalisations and increased mortality.

Most patients/whānau receiving palliative care services have cancer; however, there are a range of other conditions for which palliative care services are required including heart diseases, chronic obstructive respiratory diseases and emphysema, renal and liver failure. Identifying changes in a loved one’s condition and symptoms and appropriately managing them places a great burden on caregivers. High levels of health literacy are likely to be required to identify and manage patients' requirements and to enable whānau to feel capable and effective in the care of their loved one.

The study is based in the Bay of Plenty and Auckland, and is expected to finish in June next year. It involves interviews with Māori patients and whānau, and focus groups with health care professionals as well as examining the tools and resources used by health services and professionals to help them communicate with Māori patients and whānau.

Jacquie is joined in the project by Research Co-ordinator Nikki Collins, Research Assistant Stella Black, Ms Susan Reid, and Mr Rawiri Blundell.

Inaugural lecture Merryn Gott

Jackie Robinson

The delivery of an Inaugural Lecture by a newly appointed professor is a time for celebration and an opportunity to showcase their research to friends, family and colleagues. Professor Merryn Gott delivered her inaugural lecture entitled “Navigating a career in palliative care research – a geographer’s tale” earlier this month.

Merryn shared with us an eclectic journey from geographer to international researcher highlighting the critical events that have shaped her career. She introduced us to the people who had inspired and supported her to achieve an impressive academic record. A review of her research to date and her vision for the future in relation to palliative and end of life care research was inspirational.

Merryn’s determination and ongoing commitment to her work has made and will continue to make a real difference to improving care for those at the end of life.
Using Electroencephalography (EEG) in clinical environments for Reminiscence Therapy for patients with mild cognitive impairment

Investigators: Stephen Jacobs, Matthew Parsons, John Parsons, Claire Davies and colleagues in Mechanical Engineering

Dr Stephen Jacobs (Applied Ageing Research Group) and Dr Claire Davies (School of Mechanical Engineering) both received Faculty Development Research Fund grants (a total of $143,000) for their project seeking to address the following objectives: i) Develop a simple EEG system to identify key Event Related Potentials (ERP) signals with a minimal set of electrodes; ii) Identify the ‘real world’ feasibility of using EEG to inform therapy by clinicians for older people with Mild Cognitive Impairment (MCI) and their family; and iii) Explore the value of using EEG to identify meaningful topics to lead a programme of Reminiscence Therapy amongst a group of older people diagnosed with MCI.

Dr Einat Ofek, who will be a co-investigator on this project, has demonstrated that EEG can be used to identify key words or topics amongst people with impaired language, such as aphasia following stroke and Autism Spectrum Disorder. Evoked potentials (scalp potentials derived from the EEG by averaging time-locked activity in response to a stimulus) are employed as a tool for non-invasive study of motivational (emotional) processes in the human brain. This allows identification of meaningful words with either positive or negative emotional connotations so clinicians can tailor their counselling or communication around those areas.

The largest hurdle to clinical application is the complexity of the EEG system setup. The time required to distribute and evaluate electrode signals can extend beyond the patience of both the patient and the clinician. This project will develop a portable system useable by a clinician within ten minutes. Once electrode sites have been identified, a "cap" that contains electrodes at specific locations will be developed for clinical purposes, along with software to analyse these signals in real time to provide an indication of the “significance” of certain words to the participant.

Reminiscence Therapy (RT) is a technique that targets the maintenance of self-identity utilised with groups or individuals to stimulate community or collective memories. RT has been shown to enhance mastery by focusing on inner resources by recalling how one coped with past difficulties and how (important) goals were achieved. However, a consequence of the cognitive-communication difficulties experienced by people with MCI and dementia is that individuals are unable to reminisce and retell their life stories in a coherent manner or, more importantly, even identify the topics that are meaningful to them. Once the EEG cap has been developed, a Randomised Control Trial (RCT) involving 60 people with MCI and their families will explore the possible advantages of EEG directed RT over normal RT, looking at quality of life and life satisfaction for both the person with MCI and their family members. Evoked potentials observed at EEG assessment will also be assessed, as previous studies have shown significant changes in this variable following therapy.
Matakana writing retreat- April 2012

By popular demand, the first writing retreat of 2012 took place at Matakana again. In line with t-shirts that have theoretical underpinnings, these events are also designed with a theory in mind. Twelve members of staff from the School took the opportunity to work on a variety of projects that included research publications, funding proposals, book chapters and their PhDs. The event enables staff to take time away from the department and focus their attention on these important endeavours:

“I found the retreat very helpful for shaping up publications. I had the opportunity to read, write and discuss work that I wouldn’t have had at my office base, or at home working alone. It was also helpful to hear from others about their publications, how they were progressing and the issues they were encountering in getting work published. One especially helpful aspect of the retreat was the opportunity to discuss writing projects with colleagues working in related areas. We are all working on nursing and health issues, but it is easy to become quite insular in terms of discussions and conversations about academic work. The atmosphere of the retreat was collegial and supportive. It was encouraging and motivating to be able to dedicate time to writing.”

Our next writing retreat will be held later this year. We have extended the invitation this year to PhD students in the department and we look forward to updating you on their views on the retreat at Albany in our next edition.

School of Nursing staff members at Matakana
Back Row: (left to right) Tony O’Brien, Anna King, Helen Malcolm, Jane Barrington, Karen Hoare, Stephen Jacobs
Front Row: (left to right) Barbara Daly, Terryann Clark, Merryn Gott, Ann McKillop, Michelle Honey
Photograph: Gary Bellamy
Kate Prebble completed her PhD on the history of psychiatric nursing in New Zealand in 2007. Since then she has continued to pursue her historical interest and is exploring issues such as mental illness, immigration, gender, nurse training, and forensic psychiatry within their various historical contexts. Here, we draw attention to three of Kate’s projects.

Early in 2012, with Dr Gabrielle Fortune, Kate published a chapter in *Migration, Ethnicity, and Mental Health: International Perspectives, 1840-2010*, edited by Angela McCarthy and Catharine Coleborne. The chapter entitled, ‘Suitable girls’: Recruitment of British women for New Zealand mental hospital nursing post-World War II’ tells the story of a UK assisted immigration scheme in which young women enthusiastically signed up for mental nursing in New Zealand, primarily because of the opportunity to move across the world. They were not so keen to stay, however, once they realized the realities of New Zealand public mental hospital conditions. Two historical discourses are disturbed in the telling of this story: first, the assumption that the government and society valued women primarily as wives and mothers in post-war New Zealand and second, the belief that health officials strove for professionalisation and feminisation of psychiatric nursing during the 1940s.

In June 2012, Kate had two chapters published (one co-authored) in a book on the history of mental health in the Waikato: *Changing Times, Changing Places: From Tokanui Hospital to Mental Health Services in the Waikato, 1910-2012*. It was edited by Catharine Coleborne and the Waikato Mental Health History Group. Kate’s chapter on nursing education makes a significant contribution to New Zealand nursing historiography. She traces changes that occurred in psychiatric/mental health nursing education over nearly a century: from 1912 - when mental attendants and nurses snatched an hour or two from their duties as fence-builders, laundry hands and bathroom supervisors to attend classes taught by medical officers, to 2010 - when undergraduate students prepare for their nursing careers in comprehensive degree-based programmes, and registered nurses acquire specialty mental health qualifications in post-graduate, university-based programmes.

NERF Oral History Project: A team of researchers from the University of Auckland’s History Department and School of Nursing successfully tendered to undertake a national oral history project on behalf of the Nursing Education and Research Foundation (NERF). The team, led by Professor Linda Bryder, will interview 60 nurses who completed their basic nursing education during the decades of the 1950s and 1960s. The project extends a NERF collection of 185 interviews stored in the Alexander Turnbull Library. Already, after completing the first round of interviews, the team is excited by the depth of stories and variety of memorabilia shared by the participants. For Kate, this is a wonderful opportunity to build on her expertise in oral history and contribute to recording the history of nursing in New Zealand.


In May I attended the WUN Public Health Global Challenge Meeting in Southampton. My attendance at the conference was supported by a grant from The University of Auckland International Central Networks Fund.

The meeting took place over 5 days with approximately 150 delegates representing the 10 WUN partner Universities from the UK, South Africa, USA, Canada, Australia, Hong Kong and of course New Zealand.

My main reason for being at the meeting was to participate in the establishment of WUN Health Literacy Network and the associated Health Literacy Conference. In addition I was honoured to be asked to be a member of a panel, at the Global Challenge meeting, addressing the issue of how social determinants of NCD could be addressed and in particular how proposed interventions could be accurately evaluated.

The Health Literacy Conference, whose theme was preventing illness, promoting health was stimulating, and a highlight for me was meeting and talking with Professor Don Nutbeam whose work on health literacy I was very familiar with. A particular interest of mine is health literacy in young people and how this can be promoted. To this end I presented a poster reporting on a study of health literacy in young people in the context of sexual health which I co presented on behalf of Lara Baylis a past student of the School of Nursing.

While the meeting and conference were stimulating and interesting, the main reason for attending was to establish collaborations to foster international research. Since returning to New Zealand I have been in regular contact with Professor Richard Osborne from Deakin University who with Professor Rachelle Buchbinder from Monash University has developed a measure of health literacy. To date the tool has primarily been used with patients with chronic conditions in the context of disease management. Health literacy among health professionals was identified at the meeting in Southampton as an area in which little research has, to date, been undertaken. To this end I am currently working with members of the WUN collaboration in Australia, UK and Canada to implement a study which traces the development of health literacy in undergraduate students in the health professions.

In addition I have been asked to lead the health literacy work stream on - Health literacy in the digital age- so all in all I believe that funding me to attend the meeting was more than worthwhile in establishing new research partners and opportunities which I am working hard to ensure come to fruition.

Finally, for me being a nurse, a special highlight of the trip was the conference dinner which was held in the chapel that originally formed part of the Royal Victoria Hospital, a project inspired by Florence Nightingale’s work with wounded soldiers during the Crimean war. It was a truly unique and historic venue.
Focus on PhD student Jo Wong

With a globally increasing ageing population, end of life care needs are becoming more important. The Emergency Department (ED) was established as a speciality to provide life sustaining treatment for traumatic and acute events. However, often patients with longstanding chronic illnesses and those with terminal illness are high users of the ED. The ED has received little research attention with regards to improving end of life care and therefore very little is known about palliative care management within ED settings, both in New Zealand and internationally, including the true incidence of palliative care presentations. It is likely that the use of ED amongst patients who are near the end of life reflects gaps in community services. However, no previous research has explored this issue and crucially no studies could be identified that have examined ED use from the perspectives of patients with palliative care needs.

It is within this context that I have developed my PhD study to examine the incidence of potentially avoidable presentations amongst patients with palliative care needs.

I am undertaking a mixed methods approach to answer my research questions. In a nutshell, there are four phases to this study:

Phase 1 – Narrative and integrative literature review.
Phase 2 – Quantitative phase.
Phase 3 – Qualitative phase.
Phase 4 – Integrating the data.

I have just completed my provisional year of the PhD programme here at the School of Nursing, and I am doing this PhD ‘with publication’ which was recently introduced by The University of Auckland. At this stage, I am completing Phase 1 and I am on the brink of starting data collection for Phase 2. I am excited about commencing this study and look forward to learning more about palliative care in the emergency department and about myself during this journey.

We invite you to take a look at a selection of our recently completed masters students

Terrance Rings, Thesis
ATPase and Microbial Surface Counts: Issues in Interpretation in a Clinical Setting
Supervisor: Nicolette Sheridan

Karen Schimanski, Thesis
Comparison of the left upper arm and Forearm Non Invasive Blood Pressures in Adult Emergency Department patients: A Randomised Cross-over Trial
Supervisor: Andrew Jull

Jacqueline Watkins, Thesis
Percutaneous Endoscopic Gastronomy (PEG) nurse first assist: a logical conclusion
Supervisor: Heather Baker

Nicola Corna, Thesis
Obstructive Sleep Apnoea and Type 2 Diabetes Mellitus
Supervisor: Heather Baker

Shrenika Lal, Research Portfolio
Emergence agitation and effect on length of stay in post anaesthetic care unit
Supervisor: Heather Baker

Catherine Beazley, Research Portfolio
Cardiac Rehabilitation in Rural Northland
Supervisor: Robyn Dixon

David Drower, Research Portfolio
Early detection of in-hospital adult physiological deterioration
Supervisor: Andrew Jull

Junqi Ma, Research Portfolio
An evaluation study of a nurse delivered smoking cessation service for inpatients admitted to the Coronary Care Unit at Auckland City Hospital
Supervisors: Lesley Doughty and Ann McKillop
In our next edition of Reason in 2013 we will be spotlighting three members of staff that recently submitted their PhDs and are currently in the examination process. Gigi Lim, Helen Malcolm and Noeline Whitehead.

Noeline and Helen look at different aspects and impacts of ageing, Noeline around residential care and Helen at the effect of ageing baby boomers and Gigi’s work looked at the emergence of nurses in prescribing practice.

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**PhD Corner – Some of our other PhD projects**

- **Nabeel Abdrabalnabi**
  Ageing in place for older people with dementia
  **Supervisors:** Matthew Parsons and Stephen Jacobs

- **Mark Garish**
  Identification of success factors in the implementation of new technology in the public health sector
  **Supervisors:** Matthew Parsons and Anthony Rouse

- **Dianne Marshall**
  Professional Competence: The nurses’ role in the surgical team using a human factors approach
  **Supervisors:** Robyn Dixon and Mary Finlayson

- **Anthony O’Brien**
  Application of Mental Health Legislation
  **Supervisors:** Rob Kydd and Brian McKenna

- **Rachael Parke**
  Can nasal high flow therapy prevent respiratory complications following cardiac surgery?
  **Supervisors:** Robyn Dixon and Andrew Jull

- **Lisa Stewart**
  Aligning undergraduate nursing education to meet the future health needs of an ageing population
  **Supervisors:** Matthew Parsons and Mark Barrow

- **Carole Wilson**
  Increasing numbers of older people are moving into retirement villages – why is this happening?
  **Supervisors:** Matthew Parsons and Kathryn Peri

- **Kim Ward**
  Night time CPAP: the patients experience
  **Supervisors:** Merryn Gott and Karen Hoare

- **Reena Patel**
  Exploration of practice patterns that demonstrate expert decision making and expertise within nursing and medical health providers and its impact on patient outcomes
  **Supervisors:** Robyn Dixon and Craig Webster

- **Tracey Lee Dalton**
  Supporting caregivers: developing critical success factors that are associated with positive outcomes for adult caregivers of adults with disabilities
  **Supervisors:** Matthew Parsons and Nicolette Sheridan

- **Barbara Foster**
  An exploration of the impact of mental health legislation on nursing practice in New Zealand.
  **Supervisors:** Brian McKenna and Jacquie Kidd

- **Jackie Robinson**
  An exploration of the factors that influence potentially avoidable hospital admissions for those with palliative care needs
  **Supervisors:** Merryn Gott and Christine Ingleton

- **Shirley Wang**
  Health literacy and its relationship with to sexual health knowledge and behaviours among Chinese university students in New Zealand
  **Supervisors:** Robyn Dixon and Nicolette Sheridan

- **Gemma Aburn**
  Resilience amongst staff working with children with leukaemia
  **Supervisors:** Merryn Gott and Karen Hoare
Healthex 2012

In September this year two School of Nursing post graduate students threw caution to the wind and entered Healthex, a faculty wide competition to showcase student research. Susan Fryer, the Nurse Manager of Franklin Hospice and a palliative care nurse is a Masters student nearing the end of her Masters in Nursing journey, and Kim Ward, Professional Teaching Fellow in the School of Nursing, is close to the end of her first year of doctoral study.

It was a pleasure for both nurses to present at Healthex as well as a little daunting. Susan has been researching ‘Caring for dying residents in aged care facilities - the experiences of health care assistants in the Franklin region’. Kim is asking ‘What is it like to live with night time continuous positive airway pressure for sleep apnoea?’ via qualitative grounded theory. Both found it very useful to articulate out loud what their research was about and the path that led them to where they were by September this year. Sharing in the event and hearing about other student journeys was also affirming and helped them feel part of a wider research community and the University of Auckland. It was also a privilege to represent the School of Nursing as the only two nurses taking part.

But it didn’t end there. To the surprise of both Susan and Kim they found themselves congratulated on being ranked as one of the top presenters in the oral presentation category at Healthex, and were asked to represent the Faculty of Medical and Health Science in the University-wide Exposure competition which took place in early October. Having the opportunity to present their research as well as showcasing the work of the School of Nursing in a formal University wide event has been a great way to cement the ideas both Kim and Susan have had with their research and to set the tone for their future research presentations.

Well done Kim and Susan.

Hood Fellowship - Merryn Gott

I was fortunate to have the opportunity to spend three months in the UK, having been awarded a Hood Fellowship by The University of Auckland. Hood Fellowships are supported by the Lion’s Foundation to enable greater international exchange between Auckland and other Universities. I spent most of my time at the University of Sheffield, working on a collaborative programme of work with colleagues there exploring palliative care management in the acute hospital setting.

Comparing and contrasting findings from studies conducted in England and New Zealand (funded by the National Institute of Health Research and the HRC respectively) provided valuable insights into ways to improve service provision in both countries. There was great interest in this work in the UK, as evidenced by the fact that I won the prize for the best research presentation at the annual UK Health Services Research Network Symposium conference, identified by the conference organisers as the ‘premier knowledge event’ for health services research in the UK.

With several publications and grant applications also completed with UK colleagues, overall it was a very productive and enjoyable trip. I even got to watch some of the Olympics...cheering on both team GB and team NZ obviously!
HOD comments

It gives me great pleasure to be able to comment on our fourth edition of REASON.

In this issue we have celebrated a variety of events, including the inaugural lecture of Professor Merryn Gott. We also farewell Associate Professor Brian McKenna who is off to Melbourne to take up a professorial position at the Australian Catholic University.

We also showcased a variety of new projects being undertaken by staff in the School, a visit from Professor Anne Marie Rafferty, and Associate Professor Nicolette Sheridan’s and Dr Michelle Honey’s equity awards. Also highlighted was the recent success of one of our summer students who received the top prize for his project supervised by Anthony O’Brien on self-harm admissions at Auckland City Hospital.

2012 has been a busy year for the School, particularly with the Performance Based Funding Exercise taking place. We look forward to keeping this momentum going and presenting to you our further successes in research in the first edition of REASON for 2013.

As always, we thank you for your positive feedback.