New social justice focus for Mental Health Research Centre

International Collaborations
Our researchers connect with the world
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To join the School’s email newsletter for periodic research updates email Lisa Williams:
lw.williams.auckland.ac.nz
Kia ora tatou katoa.

At the time of writing this we are enjoying unusually sunny winter weather in Auckland, which seems appropriate as we reflect on the outcome of the recent Performance Based Research Fund (PBRF) round. The primary purpose of the PBRF is ‘to ensure that excellent research in the tertiary education sector is encouraged and rewarded.’ The process involves assessing the research performance of tertiary education organisations across New Zealand and then funding them on the basis of their performance.

Overall, we have a lot to be proud of. The University of Auckland was recognised as demonstrating “the greatest depth and breadth of research activity in the New Zealand tertiary sector” and, whilst having only 25% of the total PBRF eligible staff nationally, recorded 35% of all ‘A’ rated researchers. Here in the School of Nursing we are celebrating having markedly increased the number of PBRF recognised research active staff from 9.8 FTE in 2006 to 26.9 FTE in 2012. This means the amount of PBRF income generated by the School has almost tripled over the last six years, a significant achievement which represents a lot of hard work on the part of staff members.

We have also had successes in other funding rounds. Of particular note is a successful HRC feasibility grant secured by one of our PhD students, Rachael Parke, supervised by A/P Andrew Jull and A/P Robyn Dixon. Rachael also works as a nurse at Auckland City Hospital’s CVICU.

At the recent graduation ceremony it was great to see not only our students graduate, but also some of our staff members. Gigi Lim, Noeline Whitehead and Helen Malcolm were all awarded their PhDs at the ceremony, another example of how our research capacity continues to grow in the School.

At an undergraduate level, we were also fortunate to have eight highly impressive summer students working with us on research projects this year. I’d particularly like to acknowledge William Harris supervised by A/P Robyn Dixon whose project was highly commended in the Wallath Prize Summer scholarship awards held annually within the Faculty.

I’ve also taken on a new role this year, as Associate Deputy Vice Chancellor (Research) which involves working with our Deputy Vice Chancellor (Research), Distinguished Professor Jane Harding, on a number of initiatives to support research activities across the University.

We are now looking at ways we can build on this success within the School and further grow our research activities. One way we are doing this is to think about how we can strengthen existing collaborations with colleagues at other institutions internationally, and develop new collaborations. We provide you with a snapshot of some of them; I’d particularly like to draw attention to the success of John Parsons and Nicolette Sheridan. They are part of a $3.7 million joint NZ Health Research Council – Canadian Institutes of Health Research grant focusing on community-based primary health.

This has given me a unique opportunity to gain an insight into the excellent research that is being conducted across the University and bring back new ideas to support our researchers in Nursing.

I hope you enjoy reading this edition of Reason. As always, we welcome feedback and the opportunity to follow up on any of the issues we raise here with our readers.

We also have a new editor working with us, Dr Lisa Williams, who has lots of innovative ideas for engaging more with our academic, clinical and service user communities. We’ll tell you more in the next edition!

Until then,
Mauri ara
Implications of cross-national health research

by Merryn Gott

Similar to many universities around the world, The University of Auckland is looking to increase its engagement internationally. Research conducted across different countries has the potential to have greater impact, both in traditional academic terms and in terms of wider socio-economic measures.

Within health research, cross-national comparisons can yield important insights into how different health systems and policies can be best configured to provide optimal outcomes for patients and wider communities.

A recent analysis I was involved with, for example, identified that New Zealand has the lowest percentage (34%) of in-hospital deaths of older people, accompanied by the greatest percentage, 38%, in Residential Aged Care. By contrast, few died in Residential Aged Care in Korea (3%) or Singapore (7%). Similarly, we also found that reported rates of hospital deaths vary markedly between countries, ranging from 20% in China to 78% in Japan. This leads to interesting questions about why this is occurring and what it means for how palliative and end of life care services should be configured.

I will have the opportunity to explore such issues with international colleagues over the next few months. I hold an honorary Chair at the School of Nursing & Midwifery at the University of Sheffield in the UK and have on-going collaborations with colleagues there who will join me at the European Association of Palliative Care Conference in Prague in May. I have also been invited to Brussels in July to present both our New Zealand and UK research to the End-of-life Care Research Group, based at Ghent University & Vrije Universiteit Brussel.

Within the School of Nursing, we are currently looking at how we might collaborate more with colleagues in other countries. Here you’ll find out more about some of our existing collaborations and the diversity of their scope. We always welcome the opportunity for further collaboration. We would love to hear from you if you are working in an institution outside New Zealand and do not already have links with us.

services than the total adult population. A second driver is the rising concern about the sustainability of health care systems as expenditures threaten to crowd out other activities in areas such as education, which themselves are key determinants of health and illness.

Although some CBPHC models have already demonstrated success at the pilot stage, this research seeks to address the difficulties faced when expanding them to serve larger populations. “It’s less about the identification of successful interventions than it is understanding what makes different CBPHC models successful for specific populations in different contexts,” John said. “Then it’s a question of developing strategies for scaling them up and expanding them to other populations and contexts.”

**My Canadian experience**

by Dr Karen Hoare

Last year I was selected by the Department of General Practice and Primary Health Care to partake in a primary health care research training programme in Canada. TUTOR-PHC is a one-year, Canadian national interdisciplinary research training program with representation from the disciplines of: Family Medicine, Nursing, Psychology, Epidemiology, Social Work, Sociology, Pharmacy, Occupational Therapy, Education and many others.

TUTOR-PHC involved me spending one week in London, Ottawa, Canada last May to meet the team. Whilst I was there we started to look at a ‘call for proposals’ from the Canadian Government to address the escalating problem of childhood obesity. Additionally I got to see Niagara Falls from a helicopter.

Over the year I’ve partaken in online workshops, discussions and our last exercise was to develop the proposal to address childhood obesity. We defended our proposal on Friday 12th April, I had to get up at 3:30 am for the teleconference!

The title of our proposal is: Examining the Feasibility, Acceptability, and Efficacy of a Multi-Faceted School-Based Program to Reduce Obesity-Related Risks and Outcomes Among 6-12 Year Old Children.

**Public health interventions wheel**

Dr Ann McKillop and A/P Nicolette Sheridan have been working with University of British Columbia researchers Dr Elizabeth Saewyc and Joanne Ricci to explore the benefits of the PHI wheel for practice in two university programmes.

Their results indicated that the PHI Wheel is useful when it is implemented in conjunction with ethical values that are explicitly relevant to the socio-cultural environment in which primary healthcare is practiced and taught.

**Canada, UK and Australia**

**Health Literacy**

Associate Professor Robyn Dixon is collaborating with researchers from the UK, Canada and Australia to examine aspects of health literacy. Health literacy concerns the ability to obtain, process, and understand basic health information and services in order to make sound decisions about one’s health and wellbeing.

During the first phase of the project, they will trial a new health literacy questionnaire with undergraduate students enrolled in health professional programmes. They will use the new Understanding Health and Healthcare Questionnaire developed by Professor Richard Osborne (Deakin University) and Professor Rachelle Buchbinder (Monash University).

The second phase of the project will involve recruiting students on entry into their undergraduate health professional programmes. Using a mixed methods approach, the researchers will trace the development of health literacy as the students progress through the
programmes. Measuring the health literacy of undergraduates is an important objective, says Robyn. “If we are to increase levels of health literacy in the wider population, it’s imperative that health professionals themselves are highly health literate.”

Australia

Development of a self-assessment tool for clinicians

Three members of the Australasian Collaborative for Evidence in Practice Development (ACE PD) – the University of Wollongong, Monash University, and the University of Auckland are working together to develop a resource to help clinical teams implement evidence-based practice changes. Dr Ann McKillop is collaborating with Professor Wendy Cross and Associate Professor Cheryle Moss from Monash University and Professor Ken Walsh from the University of Wollongong on the project.

In spite of agreement that the use of evidence to inform clinical decision making is pivotal to the provision of effective healthcare, its uptake and implementation into practice is complex, unpredictable and not informed by what works and why. The resource the team is developing will help clinicians assess their own readiness for successful implementation, monitor their progress and inform improvement over time.

Mental health nursing recovery concepts

Dr Helen Hamer, Debra Lampshire and Dr Jacqui Kidd are collaborating with researchers from CQ University, Curtin University, Southern Cross University and Australian Catholic University. Their project explores to what extent mental health consumer involvement in teaching nursing students is effective in fostering a culture that supports consumer participation in recovery-oriented mental health care.

By comparing and contrasting different university nursing programs with varying levels of mental health content and consumer participation, she and her colleagues hope to identify those elements of consumer-academic taught mental health courses that are most effective in imbuing change.

Korea

Healthbots

As part of the School’s expanding research links with The University of Auckland Engineering School, Dr Kathy Pen served as an investigator on the four-year HealthBots project. HealthBots are designed for such tasks as reminding older adults who live alone to take their medication. The project involved 100 staff and 100 residents from Selwyn Village, a retirement community in Auckland.

The large-scale study, which was funded by the Ministry of Science and Innovation, was an international collaboration between Uniservices and South Korean companies, Electronics and Telecommunications Research Institute, the Yujin Robot Company, ED Corporation and Isan Solutions. HealthBots have been rolled out for use in NZ. The South Island town of Gore is the first to deploy them.

Jamaica, Barbados, Bahamas, USA

Celebrity Worship & ‘Irresponsibility’

Dr Rosemary Frey and Cathleen Aspinall are carrying out the New Zealand aspect of this research. They and their overseas co-researchers are looking at correlations between celebrity worship and the interleaved constructs they are labelling ‘irresponsibility’ (impulsivity, sensation seeking, and considerations of future consequences). Dr Lynn McCutcheon, editor of the North American Journal of Psychology, is leading the project. The team is hypothesising that those who most admire their favourite celebrities and celebrities in general will be those who tend to behave irresponsibly. The data from the surveys administered to undergraduates in the four countries will be combined to create a data set to examine the relationship between celebrity worship and addiction.

Sweden

Medication management in newly graduated nurses

Dr Gigi Lim and Dr Michelle Honey’s study teams them up with Dr Viveca Lindh and Dr Catrine Jacobsson from the Department of Nursing at Sweden’s Umea University. The intent of the project is to understand new graduate nurses’ perceptions of applying their pharmacology knowledge in the clinical practice of medication management.

The sample population will be newly graduated Registered Nurses (RNs) – those who have graduated within the previous 24 months who are working in in-patient clinical settings. Their objectives include understanding how the key principles in pharmacology are applied in clinical nursing practice and determining the frequency that pharmacology knowledge is applied to medication management.

UK

Care Home Handbook

Dr Michal Boyd is co-editing the Care Home Handbook to be published by Wiley Publishers in 2014 in the UK, Australia and NZ. The handbook has its roots in the RN Care Guides that Michal was instrumental in developing with Waitemata Health DHB. Her co-editors are Graham Mulley, Leeds University Ementus Professor of Elderly Care; Dr Clive Bowman, geriatrician and previous Medical Director, Bupa Care Services, UK; and Dr Sarah Fox of the NHS.

The handbook is the first of its kind to specifically target the needs of residents in aged care. It will include more than 100 topics written by international clinical experts on subjects relevant to older adults.
Kicking off in August, this pilot study will explore the end-of-life circumstances of Māori and non-Māori kaumātua (elders) and whānau (families’) caregiving experiences.

Professor Merryn Gott is the principal investigator and Dr Tess Moeke-Maxwell (Ngai Tai ki Tamaki Makaurau & Ngati Pukeko) will be leading the project. Tess, with research assistant Stella Black (Tuhoe) will conduct in-depth interviews with Māori in urban and rural communities in Central and East Coast communities on NZ’s North Island. Dr Lisa Williams will work with Tess interviewing non-Māori participants.

The intent is to record stories from people about their experiences of providing care to an older family member. The researchers will gather information from families about their expectations and the older person’s expectations of end-of-life care. Family bereavement experiences will also be recorded. The study will explore the types of things that help families to provide care to an older family member as well as identifying some of the things that make it more difficult.

“Some whānau...regarded their summary reports as taonga (something treasured) because it upheld the mana (prestige) of their loved one and the whānau and family as carer.”

Participants will be offered the opportunity to provide comment, amend, delete or change information incorporated into a summary report of their interview. This approach echoes an ethnographic methodology Tess employed in Kia Ngawari, an earlier study with Māori participants.

Some whānau stated that the reports made them feel as though they had been heard and they often regarded their summary reports as taonga (something treasured) because it upheld the mana (prestige) of their loved one and the whānau and family as carer.

The summary reports also facilitate co-construction of Māori knowledge between researchers and whānau, reflecting Kaupapa Māori research, which aims to “meet the expectations and quality standards set by Māori”.

Te Pākeketanga is linked to Life and Living in Advanced Age: A Cohort study in New Zealand (LiLACS) investigating successful ageing but is a separate and independent piece of research. At present, it’s a one-year study but may be extended to three years if funded by the Health Research Council (HRC).
Research Highlights  
Health Research Council funding, Maori youth and the financial burden of caring

Rachael Parke to undertake HRC funded feasibility study

PhD student Rachael Parke has been awarded a $137,000 Health Research Council (HRC) Feasibility Study grant starting in July.

Her study is a randomised controlled trial involving the reduction of fluid intake in post-surgery cardiac patients. Following cardiac surgery, patients receive large amounts of fluid in the intensive care unit. This may cause problems with wound healing and delay hospital discharge.

Her trial will compare a restrictive fluid regime with a more liberal approach utilising advance hemodynamic monitoring. If proven successful, the health system as well as individual patients will benefit from this simple and inexpensive nurse-led protocol as it will decrease the length of hospital stays.

Ultimately Rachael hopes the trial will lead to a multi-centre randomised controlled trial with 900 patients. Rachael’s interest in the research stems from her work as a Research Nurse Coordinator in CVICU.

This is Rachael’s 3rd HRC grant. Her other grants include a Clinical Research Training Fellowship to support her PhD investigating the use of nasal high flow oxygen in patients after cardiac surgery and a project grant for a multicentre RCT of an open lung strategy in patients with acute respiratory distress syndrome.

Factors associated with binge drinking among Māori secondary school students

Analyses led by Dr Terryann Clark (Nga Puhí), senior lecturer and Adolescent Health Research Group member, looked at issues related to binge drinking amongst Māori secondary students in New Zealand. Her co-researchers were Elizabeth Robinson, Dr Sue Crengle, Associate Professor Janie Sheridan, Nicki Jackson and Professor Shanthi Ameratunga.

The data utilised was from the 2007 survey (Youth’07) and part of a series of national youth health and wellbeing surveys undertaken in 2001, 2007 and 2012 (www.youthresearch.auckland.ac.nz).

“Unlike previous international studies, their research found that witnessing parents drinking alcohol in the home did not appear to increase the odds of Māori students’ binge drinking behaviours.”

The research appeared in the March issue of the New Zealand Journal of Medicine. Among the findings Clark, et al. discussed were factors strongly associated with binge drinking. Those Māori students who thought that ‘drinking alcohol is okay for people my age’, having friends who drink alcohol, obtaining alcohol from friends, obtaining alcohol from ‘other’ adults, and being able to purchase one’s own alcohol were strongly associated with binge drinking.

Unlike previous international studies, their research found that witnessing parents drinking alcohol in the home did not appear to increase the odds of Māori students’ binge drinking behaviours.

Finally, many students who reported binge drinking also reported difficulty accessing drug and alcohol services. This highlights the perception by Māori students that drug and alcohol services are unaccessible or might not meet their needs.

The High Cost Of Caring

The cost of caring is high for those with a loved one requiring palliative care, according to the results of this study conducted by Professor Merryn Gott, Dr Tess Moeke-Maxwell, Dr Ruth Allan and Jackie Robinson. They identified a significant level of financial burden borne by whānau and family when supporting a person with a life limiting illness. Tess and Ruth conducted interviews with 29 whānau/family and found direct and indirect costs associated with four major domains: personal, interpersonal, sociocultural and structural.

A key finding was that costs were carried by carer networks/whānau, not just an identified ‘carer’, and that these networks/whānau often faced multiple and continuous support needs. For example, potential long term effects on the financial wellbeing of the family/whānau included opportunity costs relating to children/education, employment, accommodation, and health effects (for example, depression and insomnia).

One participant’s experience encapsulated the dilemma for carers, believing family/whānau care is best but struggling under the burden:

“Mum, she was a very private person and Mum always believed that the whānau are responsible for your own, yeah. And if you really want to look after your whānau, you pull out of your pocket, don’t expect, this is her words, ‘Don’t expect the Pakeha to look after you, because that’s not going to happen.’”
Nurse navigators and undergraduate nursing communication skills

Contact Susan for a copy of the brochure or for more information about the entire study: It’s not just about heart failure: Optimising the primary health care (practice nurse) role as a navigator in supporting patients with multiple long-term conditions and their family/whānau. Susan Waterworth: s.waterworth@auckland.ac.nz

The New Zealand Heart Foundation and in particular, the Grace Craston CharitableTrust supported the research.

Assessing undergraduate nurses communication skills

Cathleen Aspinall and co-investigators Dr Rosemary Frey and Dr Stephen Jacobs are examining the impact of the new communications component to the undergraduate nursing programme on students’ communications skills. The aim of their four-year mixed-methods study is to provide an evidence base for the programme’s development and ongoing quality improvement.

The need for the research arises out of the growing recognition that communication skills training can improve patient-centered communication, enhance empathy and assist the discussion of psychosocial needs, amongst other benefits. However, short-term, unstructured didactic training has not proven effective as a learning tool. Therefore the development of an evidence-based approach to communication skills training is vital.

The research is tracking students’ progress in communication skills through a quantitative pre and post test design as they proceed through the programme. A later project phase will include a purposive sample of clinical nursing staff who are independently involved evaluating the students’ communication plans. In focus groups they will offer their perceptions of the communication skills development of the students.

Matthew delivered his Inaugural professorial lecture at the Grafton Campus earlier this year. While this lecture presented some serious and detailed information, it was also highly entertaining.

At one point some of Matthew’s colleagues acted out being white-haired wise older people demonstrating the pressures our ageing population is predicted to place on the health care system in New Zealand.

His lecture covered his academic career from his start at Kings College in London through to his appointment as the Clinical Chair in Gerontology, a joint position with the School of Nursing and Waikato DHB. The lecture showed what a great contribution Matthew has made, and continues to make, to improving health services for older people.

The research projects discussed included goal setting, restorative home support services, comprehensive assessment and case mix, robots and technology, and supported discharge from hospitals. What is abundantly clear when Matthew presents his work is the wide scope he covers and his amazing enthusiasm.
Since its creation in 2005, The Centre for Mental Health Research has been responding to the growing demand for high quality research in the field of mental health and addictions.

Today, the Centre functions as a hub for researchers and teachers who are interested in these areas, particularly as they relate to recovery and service user-led research. The Centre is led by co-directors Katey Thom and Jacqui Kidd who are joined by others in the School, including Kate Prebble, Tony O’Brien, Helen Hamer, Debra Lampshire and, more recently, academics from across the University.

Katey and Jacqui answered some questions about the Centre’s new focus and upcoming projects.

Q. Why the new emphasis on social justice?
A. We’re all driven by such issues as legal coercion, ethnicity and culture, social exclusion and violence and trauma, so social justice provides us with the lens through which to undertake research on these topics. And the Centre has always had a strong focus on working in partnership with mental health service users to help increase our understanding of mental health and the impact on individuals, whānau and the wider community. Social justice is an ideal framework to strengthen our commitment to this partnership.

Q. Particular emphases at this point?
A. We’re a diverse group of people with particular areas of expertise. Most of us have a focus on the operation of mental health law and concentrate on such issues as legal coercion, the role of legal advocacy, rates of compulsion and its links with social deprivation, and the complex problem of balancing individual rights with issues of risk and safety.

Q. What are the Centre’s goals?
A. One of our key goals for the near future is to spend time working with potential collaborators in NZ and overseas. Our new direction means we’re identifying opportunities to share information and resources with organisations with similar philosophies. It’s an exciting time! We already have links to like-minded groups in Australia, Canada and the United States.

Left to right; Dr Jaquie Kidd, Deborah Lampshire, Dr Kate Prebble, Tony O’Brien, Dr Helen Hamer and Dr Katey Thom
Another passion for many of us is the discriminatory effects on the lives of people as a result of being subjected to the instruments of mental health law. Helen, Debra and Jacqui’s study is a great illustration of work in this area.

We’re also particularly passionate about supporting service users to take on leadership roles in research and service provision. For example, Jacqui’s focus at present is to establish peer support in primary health care settings.

She believes that advice, company, and support from someone who has already successfully worked through the learning involved in living in the community and accessing care through primary health services will enable people with experience of mental distress to navigate the move from specialist care to independence.

CURRENT PROJECTS

These on-going and proposed projects emphasise the Centre’s focus on mental health and the law as well as social inclusion.

Dr Katey Thom

“Touchy-feely justice or veiled retribution? An ethnography of therapeutic jurisprudence in New Zealand’s problem-solving courts”

Katey’s project has just been shortlisted for a Marsden grant which, if funded, will allow her to look at what ‘therapeutic’ means in the context of problem-solving courts in New Zealand. These courts use legal processes and therapeutic approaches to problem-solve the underlying psychosocial causes of offending.

Their aim is to promote healthy behaviours and ultimately reduce recidivism. But what exactly therapeutic means in this context remains unclear. Katey wants to carry out an ethnographic study to explore how therapeutic discourse is constructed within some of these courts.

She hopes the study will clarify the therapeutic intentions of the problem-solving courts and help define their place in a criminal justice system characterised by rising punitiveness.

Dr Kate Prebble

“Misfits of deinstitutionalisation? A social history of care for mentally-ill criminal offenders in the Auckland region, 1972-2012”

Kate’s proposing to undertake a social history of care for mentally-ill criminal offenders in the Auckland region. She’ll concentrate on the years from 1972-2012. Her emphasis will be on the development of special forensic psychiatric services and question why these services have assumed a significant place in the wider context of a mental health system underpinned by post-institutional philosophies.

Kate argues that this contemporary history will fill gaps in the literature and contribute to recent debates around risk, dangerousness and the re-institutionalisation of people who experience mental health problems.

The study will provide a unique opportunity to explore the intersections of cultural, social and political issues that were contested in New Zealand during the late twentieth century. These include: Māori self-determination, biculturalism, trade unionism, community care, public safety, consumer rights, and healthcare reform.

Dr Helen Hamer, Debra Lampshire, Jacqui Kidd and Shona Clarke

Stories of success: Mental health service users’ experiences of social inclusion in Aotearoa New Zealand

This study, funded by the Mental Health Foundation of New Zealand, explores mental health service users’ experiences of social inclusion in order to highlight the factors that facilitate their full participation within society.

The findings from this study will help shed light on how the stigma and discrimination programme may have had a positive impact on society, thereby increasing a sense of social inclusion for service users.

News

Teaching, Innovation and Excellence Professional Teaching Fellow Group

by Cathleen Aspinall

An enthusiasm for teaching excellence is evident within the School of Nursing, as witnessed by the newly formed Teaching Innovation and Excellence (TIE) Group. The group consists of eighteen Professional Teaching Fellows (PTF), all new to the academic role, but some with years of experience within the school. Lee and Boud (2003) stated that when the identity of academic staff is under review or revision, the changes pose both threats and opportunities. It is widely known that nurses, as a professional group, do not necessarily avoid a challenge, and so the role change was embraced. The opportunity had presented itself to take ownership, and to develop and promote teaching excellence.

The newly formed TIE Group sits under the umbrella of the School’s Educational Innovations Unit and its emphasis is on the continuing development of its members in scholarly teaching, educational innovation, evaluation and audit. Activities will include publication and dissemination, locally, nationally and internationally. The group itself provides a platform for collaboration, peer support and productivity.

The group aims to develop its networks and collaborate with other Professional Teaching Fellows within the Faculty, across the University, and with relevant national and international bodies. In doing so the TIE Group would highlight excellence in scholarly teaching through shared learning and dissemination, utilising evidenced based practice. In developing a reputation for teaching and innovation excellence, the TIE group would promote the importance the School of Nursing and the University of Auckland places on teaching.


Centre for Mental Health Research CONTINUED
May marked the graduation of three staff members who were awarded their PhDs: Gigi Lim, Helen Malcolm and Noeline Whitehead.

Underpinning Gigi’s research is a commitment to safe prescribing. “Safe prescribing is for all. They have the same need for it – nurses, doctors, midwives. And as an educational institution, how are we going to promote it, no matter the discipline?” As an outcome of her study, Gigi is seeking to develop an inter-professional continuing education programme that will address this need.

Among her findings was that many participants held an unwavering expectation of state-funded support for their age-related functional needs and residential care. Helen concluded, however, that their expectations may be unrealistic. Current levels of Government-provided services coupled with the next generation’s work and family commitments may leave baby boomers to face ageing without adequate support.

Noeline’s PhD had a dual focus: to assess the impact of quality improvement activities including benchmarking (QIAs) on adverse events in residential care (nursing homes) for older people and to explore the effectiveness of a Data Envelopment Analysis (DEA) quantity/quality model for providing additional information.

Her cluster randomised controlled trial used longitudinal resident-level data to compare the impact of QIAs including benchmarking with benchmarking alone on adverse event rates. The data for the two groups was applied to quantity and quality DEA models to explore the effectiveness of DEA as a best practice benchmarking application for nursing homes. The relationships between care staff and adverse events were also explored.

Noeline found that the QIAs had limited impact on the observed adverse events. “I statistically analysed which made the difference and was able to establish that actually benchmarking alone made a bigger difference.”

Facilities don’t get much of an opportunity to benchmark, so they don’t really know where they sit in relation to other facilities in New Zealand. And often they don’t get to see data in a way that’s meaningful to them. So being able to be charted over a 15-month period gave them good information to work with.”
Sleep apnea, palliative care patients and a protocol for post-cardiac surgery patients

PhD student Kim Ward wins prestigious Senior Health Research Scholarship

The purpose of the scholarship, which is awarded by the Faculty of Medical and Health Sciences, is to attract health professionals to return to the University to study full-time for a PhD. The scholarship runs for up to 36 months and includes a $40,000 yearly stipend. Kim, a nurse and nurse educator, is using a grounded theory approach to explore the experiences of people who receive Continuous Positive Airway Pressure (CPAP) for Obstructive Sleep Apnoea (OSA). The primary aim of her study is to develop an explanatory theory of what it’s like to live with night-time CPAP.

A secondary outcome will be to devise recommendations useful for clinicians involved with CPAP to aid successful management of this therapy. One early discovery Kim has made is about the pivotal impact a person’s bed partner has on how he or she manages CPAP. “The patient doesn’t exist in isolation out in the community,” Kim says. “The patient sleeps in a bed with somebody. CPAP’s there in the bedroom. It makes a noise, it blows cold air. People talk about that it looks a bit like Darth Vader. It’s definitely an invasive presence.”

The health and economic burdens associated with OSA make Kim’s project especially relevant. OSA has a strong association with obesity and is implicated as an independent risk factor for hypertension and cardiac sequelae up to and including death. Those with untreated OSA are likely to spend more time in hospital and experience occupational and vehicular accidents more frequently than the general population.

Patient and family experiences of palliative care

by Jackie Robinson

In most developed countries, acute hospitals play a significant role in palliative care provision and are the setting in which most people die. Understanding the experiences of hospital admissions for people with a life-limiting illness and their families is essential in understanding the role acute hospitals play in providing palliative care.

In order to clarify my PhD research objectives, I completed an integrative review to synthesise current evidence regarding the experience of palliative care in an acute hospital setting from the perspectives of patient and family. In total, 32 articles were included in the review. Five recurring themes were identified from the synthesised data: symptom control and burden, communication with health professionals, decision-making related to patient care and management, inadequate hospital environment and interpersonal relationships with health professionals. The review identified that, largely as a result of study design, our knowledge of patient and family experiences of palliative care in an acute hospital remains limited to discrete aspects of care.

My research is a mixed methods study exploring the experiences of hospital admissions for patients with palliative care needs, with a focus on the benefits and burdens of having been in hospital. The integrative review has been accepted for publication by Palliative Medicine. I am also presenting the results at the European Association of Palliative Care Conference in Prague next month.

Jackie is a nurse practitioner with the Auckland City Hospital palliative care team and a professional teaching fellow with the School of Nursing.

WWW’ protocol jumps ship from ‘World Wide Web’ to cardiac intensive care unit

Warm. Wake. Wean. The three W’s that have nothing to do with the Internet, but everything to do with improving post-surgical cardiac care.

For her Master’s project Evaluation of an enhanced recovery pathway in post surgical cardiac patients in intensive care, Lourdes Noronha, supervised by Dr Ann McKillop and Marie Cameron, evaluated the impact of the Warm, Wake and Wean (WWW) protocol on patients who had undergone elective cardiac surgery at Auckland City Hospital. The purpose of WWW is to limit sedation time to three hours, which means patients can be weaned off ventilator support much more quickly.

Results from the study showed that length of sedation time was strongly associated with length of intubation time and was a significant predictor of prolonged intubation. When sedation time was reduced, patients were much more likely to be extubated in less than six hours. Other promising findings were that there were no post-operative complications in the early extubated cohort.

The impetus for the project came from the hospital’s cardiothoracic and vascular intensive care unit (CVICU). The unit was seeking to increase its elective cardiac surgery cases, streamline patients’ journeys and improve cardiac service delivery.

Eighty-three patients who were to undergo elective cardiac surgery agreed to take part. They were enrolled if they met the inclusion criteria for the WWW protocol. Patients were excluded if they returned to theatre, had cardiac tamponade or heart failure.

While the project was limited to a single facility, the results for WWW are promising. They suggest it is an approach worthy of further investigation into how to safely fast-track cardiac patients undergoing elective surgery.
Student research news: Master’s news

Recently completed Master of nursing and Master of Health Science projects

**MARY MCLEAN RESEARCH PORTFOLIO**
Supervisor Dr Helen Hamer

Quit attempts and smoking cessation engagement in a general practice setting

**JENNIFER BOUDREAU, RESEARCH PORTFOLIO**
Supervisor Dr Gigi Lim

Prevalence and management of intrathecal morphine induced pruritus in the NZ Māori population

**SUSAN FRYER, THESIS**
Supervisors Professor Merryn Gott, Dr Gary Bellamy

Silent partners in health care: Providing end of life care to the older person-the health care assistants’ perspective

**JIAMEI JING, RESEARCH PORTFOLIO**
Supervisor Dr Michelle Honey

Exploring the impact of using a checklist in robotic-assisted laparoscopic radical prostatectomy (RALPR) on theatre efficiency

**JENNY LIU, THESIS**
Supervisor Dr John Parsons

The rehabilitation nursing role within interdisciplinary team work: The perspectives from nurses, patients, therapists and doctors

**LORDES NORONHA, THESIS**
Supervisor Dr Ann McKillop

Does early exhibition mean early discharge from ICU?

**SUSAN MOYLE, THESIS**
Supervisor Associate Professor Robyn Dixon

Barriers to the early identification and management of cardiovascular disease risks in the Cook Islands

**JENNIFER CAMERON, RESEARCH PORTFOLIO**
Supervisor Susan Waterworth

The lived experience of metastatic colorectal cancer patients that undergo more than 12 months of ongoing palliative chemotherapy in the outpatient setting

**STEPHANIE BESSELING, DISSERTATION**
Supervisor Reena Patel

How does intra-hospital patient transfer and hospital design influence patient safety?

**TANIA HELYER, DISSERTATION**
Supervisor Susan Waterworth

Can palliative care improve a person’s quality of life in end stage renal disease?

**VERONICA CHERRETT, THESIS**
Supervisor Dr Stephen Jacobs

Defining leadership in nursing: The role of a charge nurse as a leader

**LEONIE GALLAGER, DISSERTATION**
Supervisor Jane Barrington

What correlation exists between childhood abuse and borderline personality order? An integrative review

**ROBERT ARMSTRONG, DISSERTATION**
Supervisor Jacque Kidd

How has mental health nursing responded to the introduction of primary mental health initiatives in New Zealand?

**KATIE LATIMER, THESIS**
Supervisor Professor Matthew Parsons

Changes in healthcare assessment tool

**JANE E. KELLY, THESIS**
Supervisor Dr Stephen Jacobs

How does simulation influence critical thinking?

**RICHARD BENVELL**
Supervisor Dr Stephen Jacobs

Analysis of lean six sigma as a method for developing and implementing a falls prevention programme in a geriatric rehabilitation setting

**KELERA LEDUA TUIFAGALELE, THESIS**
Supervisor: Dr Rosemary Frey

How Can Practice Nurses Effectively Engage and Communicate with Pacific People to Support Self-management in Type 2 Diabetes?

Caring for imminently dying residents in aged care facilities: The experiences of health care assistants in NZ

Susan Fryer earned an A+ for her Master of Nursing project in which she described the challenges Health Care Assistants (HCAs) face when caring for imminently dying residents. Her supervisors were Professor Merryn Gott and Dr Gary Bellamy.

Her thesis addresses a gap in the literature that has predominantly focused on the perspectives of registered nurses and family caregivers concerning the provision of end-of-life care for residents living in aged residential care (ARC) facilities.

Four themes emerged out of the six focus groups Susan held with HCAs: supportive leadership, team recognition, building connections and attributes of HCAs. These themes strongly influenced participants’ ability to care for dying residents. After further analysis, Susan organised the themes into two conceptual domains: Organisation and Self.

Susan who is a clinical nurse manager at Franklin Hospice, Auckland, asserted that undertaking the research gave her a new perspective on HCAs. “It was a great opportunity to speak directly with them and get to hear their experiences,” she says.

“They spoke very openly. It was obvious that for many HCAs this was more than a job. They genuinely cared for residents and took it upon themselves to be their advocates.”

**There’s no reason to be without Reason...**

No need to wait six months for the latest research news from the School of Nursing. Join our email news list for periodic updates. Send your name and email address to Lisa Williams: la.williams@auckland.ac.nz.
Summer research student projects
Developing undergraduates’ research capacity through hands-on learning

The students worked under the supervision of School staff and completed a write-up of their research that also included a reflection on their experience. The placements were competitive and included a $5000 stipend.

An exploration of young men’s views of healthy relationships

William Harris, Medicine
Supervisor: Associate Professor Robyn Dixon

William was highly commended at the Wallath Prize awards ceremony in April. Each year the Wallath Prize recognises the best summer studentships.

The widespread problem of intimate partner violence in New Zealand. Understanding their perceptions will be useful for outcomes designed to promote the development and maintenance of healthy relationships within communities.

The results of the study showed that young men value healthy relationships, particularly the emotional intimacy and companionship they provide. The barriers they perceived to good relationships arose mainly through third party influence, past relationship experiences, changes in outlook/ goals, and location.

The study contributes to a programme of research being established by Robyn and Janet Fanslow. Their programme aims to inform interventions or programmes to facilitate the development of healthy relationships as a way to foster health and wellbeing and address issues of intimate partner violence.

International sore throat guidelines

Erin Ward, Nursing
Supervisor: Dr Karen Hoare

Erin undertook a systematic review of guidelines published internationally that address sore throat management in general practice. Her review forms an essential part of Karen’s larger study, a realist review examining the high rates of Acute Rheumatic Fever (ARF) in New Zealand.

“A realist review is a relatively new methodology with only a few studies reported in the literature,” Karen says. “It’s a complex methodology, yet Erin demonstrated her comprehension of it. In addition to her research, Erin spent time in a GP practice in South Auckland becoming familiar with the extent of the health problems people face in this area of the city.

Advance care planning for mental health crises

Briar Mannering, Nursing
Supervisors: Dr Katey Thom, Tony O’Brien

Briar undertook a systematic literature review supervised by Dr Katey Thom and Tony O’Brien to investigate issues concerning Advance Care Planning (ACP) relevant to mental health. She focused on outcomes and barriers to implementation.

The need for the study arose out of the recognition that there has been limited implementation of Advance Directives (ADs) in mental health settings. It is intended to inform subsequent research on the implementation of ADs in New Zealand. The review has provided the basis for an ethics application for a study led by Katey to explore service user and clinician views of ADs.

Nursing student takes 2nd place at SOPH competition

Nursing student Eve Decker was runner up in the School of Population Health (SoPH) Summer Student Progress Presentations. Supervised by Dr Karen Hoare, she reported on her research into the long term impact of teen pregnancy. Her study targeted the development and evaluation of a health promotional leaflet aimed at reducing the problem.

Thirty summer research students participated in the day-long event in January. SoPH staff Professor Bruce Arroll and Research Development Manager Dr Denise Greenwood judged the seven-minute presentations, giving out awards for the top two spots. Students were assessed on their presentation skills and learning experience by demonstrating their understanding of and role in their research projects.

Dr Greenwood, who has been a judge for the past two years, reported that with so many high calibre presentations selecting the top two presentations this year was quite a challenge “Eve gave an excellent presentation of her summer studentship research experience.”
Palliative and end-of-life care

Rachel Haas, Medicine
Supervisor: Dr Rosemary Frey

Project sponsored by The NZ Charitable Society of Geriatric Medicine

Rachel looked into the views of bereaved family members concerning the palliative and end-of-life care of family members in aged residential care facilities. In her systematic review, she identified five relevant domains: communication and family care, staffing, physical care and symptom management, transitions in care and psychosocial/spiritual needs. The five themes are closely linked and have implications for the interaction of care facility staff with patients.

The review is part of Rosemary’s larger study about avoidable hospital admissions of persons with palliative care needs who reside in aged care facilities.

Pharmacology knowledge and medication management

Rachael Narbey, Nursing
Supervisors: Dr Gigi Lim & Dr Michelle Honey

Rachael undertook an exploratory study led by Gigi and Michelle that examined the links between pharmacology knowledge and medication management in the clinical practice of newly graduated nurses. The results showed that newly graduated nurses demonstrated a good application of their pharmacology knowledge.

The nurses also demonstrated knowledge gaps, notably in the areas of drug clearance and mechanism of action. An important first step, this study’s findings could inform further research in different areas related to pharmacology.

The Christchurch earthquakes, older people and mass media

Richard Chen, BHSc/LLB
Supervisor: Dr Kathy Peri

Under Kathy’s supervision, Richard undertook a content analysis of the reporting by NZ newspapers and TV current events shows The purpose of the study was to determine how these media outlets reported on older people during the Christchurch earthquakes and their aftermath from February 2011. The results showed that the media typically portrayed older people in a negative or neutral way, often victimizing them by using inappropriate language.

The development of a citizenship framework to inform mental health clinicians’ practice

Sarah Viggiano, Nursing
Supervisor: Dr Helen Hamer

Sarah worked with Helen on an exploratory qualitative scoping study that investigated the notion of a ‘citizenship framework’. The purpose of crafting a citizenship framework is to provide an environment that promotes the visibility of service users as active citizens within society.

After analysing the results, Helen and Sarah identified the overarching theme of ‘contracting’. Contracting concerns the idea of honouring the contract between mental health professionals and service users.

In their own words

Erin Ward: “Being granted this incredibly valuable opportunity to meet and observe community workers on the front line of New Zealand’s rheumatic fever epidemic in South Auckland has been inspiring and has cemented my desire to work in the community in primary health care.”

Sarah Viggiano: “I believe I have increased my research skills and am now closer to attaining the level of academic rigour and scholarship appropriate to the sciences.”

Brior Mannering: “I hope that with the knowledge I’ve gained this summer, in my future as a clinician I’ll be realistic about the barriers and potential of advance directives, and thus encourage and support my patients in gaining autonomy in situations where this is so often lost.”

Rachael Narbey: “By undertaking research as a student I have gained understanding and specific research skills. Research is what enables nursing as a profession to move forward and to continue to provide the best care for people.”

Richard Chen: “This studentship has equipped me with the confidence to take on new innovative projects, as I was a novice researcher of mass media.

Rachel Haas: “This project has bettered my understanding of aged care, end-of-life issues, and the palliative care that supports those at this stage in their lives. This insight will help me in my future studies and role as a physician, particularly because these themes are relevant to every patient and every member of our communities.”

William Harris: “This studentship has given me insight into the issue of domestic violence in New Zealand in terms of the scope of the problem and the complexity of combating it.”
The School was sad to say goodbye to Gary who left the shores of NZ to live back in the United Kingdom. Gary was a research fellow for three years. Within that time he achieved a substantial amount in his research on various aspects of end of life care.

He developed strong links with groups progressing the use of advanced care planning (ACP) in end of life care. He was a member of the sub-group of the National Advance Care Planning Co-operative based at Auckland District Health Board, leading a range of studies exploring public understandings of ACP and helping to develop a model of ACP for people with intellectual disabilities and their families/whānau.

Another focus was his work on ageing issues that concerned Lesbian, Gay, Bi-sexual, Transgender and Intersex (LGBTI) individuals. He led an NZ-first study into the views and experiences of staff caring for older lesbians and gay men in residential aged care facilities.

Towards the end of his time at the School, Gary became involved in a project that investigated appropriate ways of working with older Māori and their family/whānau in the last year of life in an appropriate and acceptable manner.

Gary also contributed greatly to research development in the School, providing supervision to a number of postgraduate and summer students. He was also an ethics advisor to students and staff and a core member of the editorial team who write Reason!

Dr Gary Bellamy returns to the UK
by Katey Thom

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Educational innovations unit responds to rapid change

The Educational Innovations Unit (EIU) is the School’s response to rapidly changing trends in nursing education and rapidly changing priorities in NZ healthcare delivery. The EIU draws together academics, postgraduate students and professional educators who share a commitment to cutting-edge research that enhances nursing scholarship, capability and excellence.

Heather Baker, Senior Lecturer and Director for the Bachelor of Nursing programme, and Research Fellow Rosemary Frey are co-chairing the unit.

The EIU’s primary role is to promote professionalism and excellence in nursing education. It does so through improved communication about education-related scholarly and research opportunities; curriculum development and evaluation; and the support of collaborative educational research.

Dr Deborah Rowe named to head Nursing Council NZ

Deb has been appointed as the new Chairperson of the Nursing Council of New Zealand. The Council is the regulatory authority responsible for the registration of nurses.

Deb holds a joint appointment between the School of Nursing as a Lecturer and as a Nurse Consultant with the Auckland District Health Board. She also works as a registered nurse at the Women’s Health Neonatal Intensive Care Unit.

2013 Autumn writing retreat north of Auckland

In April, seven researchers from the School escaped the city to spend 3.5 days north of Auckland on a writing retreat. The quiet bush setting (and great meals that appeared like clockwork) spurred their creative output.

“Just getting the chance to focus on a single project without the usual distractions made such a difference,” said Lisa Williams.

The only change the researchers would recommend is that the two pet donkeys in residence forego their early morning alarm clock duties. Every morning, they brayed loudly well before sunrise to announce the arrival of a new day.

Jackie Robinson, Kathy Peri, Merryn Gott and Michal Boyd take a break from their projects