

# SHARON HANSEN NURSE PRACTITIONER





# INTRODUCING MYSELF

- ❖ Registered as a Nurse Practitioner in 2007,
- ❖ Via Masters of Nursing 2005, Bachelor of Nursing 1997, Registered Comprehensive nurse via psychopaedic (1978) and general obstetric registration (1984)
- ❖ In Primary care, employed in remote rural/rural/semi rural and after hours, in South Canterbury until present.
- ❖ Currently hold positions on SCDHB alliance, and current chair person of the New Zealand General Practice Network.







# WHAT MAKES RURAL PRACTICE DIFFERENT



- ❖ Generalism
- ❖ Connectivity
- ❖ Weather Dependence
- ❖ Emergency Care (Out of Clinic/In the field)
  - ❖ Distance to help
- ❖ Interprofessional Collaboration

# ISSUES FOR RURAL PRACTITIONERS

- Distance from Support Services
- Professional Isolation/ongoing education/maintenance of skills.
  - Working in a low technology environment.
  - Patient Expectation
    - Holiday influx with big city expectation
    - Patient poverty/ lack of transport
- Severity of accidents/lack of back up, eg volunteer ambulance and fire service.
  - Family expectations.
- Being personally embedded in the community.



# NURSES AND DOCTORS WORKING TOGETHER FOR IMPROVED HEALTH SERVICE



# OTHER WORK WE DO

- ❖ Support legislation change to enhance NP and GP work, eg Life Extinct Certificates, Medical Certification for WINZ, Medicines Act, funding changes, consultation and rural proofing documents.
- ❖ Representation at at General Practice Leaders Forum.
- ❖ Support for educational changes eg Medical Schools proposal.
- ❖ Representation at National Rural Health Advisory Group.
- ❖ Representation, eg Primary Health Care Sustainability Working Party
- ❖ Working for rural equity.
- ❖ International Conference Presence, ICN, WONCA.







# NURSING

NZNO - Nursing in Aotearoa New Zealand is an evidence-based practice discipline

underpinned by nursing theory and research. Nursing core focus is people (he tangata)....

Many tasks , procedures and technical skills and activities can be performed by many health practitioners ....it is the registered practitioners of each discipline who determine how, when and under what conditions these are carried out: with their perspective and knowledge they take leadership and accountability for achieving the health purpose as a collaborative interdisciplinary effort”



# MEDICINE

- ◆ Distinct discipline of medical knowledge concerned with pathology and its cure and control (Litchfield 2003).
- ◆ Nursing the humanness of the health circumstance.



# COLLABORATION

- ❖ Two or more people working together on a shared goal.
- ❖ To work with someone else for a special purpose.
- ❖ communication, sharing, problem solving, ... implies shared responsibility and accountability for patient care ( The free dictionary)
- ❖ Dependent on the contextual situation and includes variables such as, organisational values, collaborating participants, and type of problem and the culture of the underlying community.
- ❖ It is not about control, hierarchy, tradition, or superiority.
- ❖ Can also mean traitorous cooperation with an enemy



# BUILDING RELATIONSHIPS

- ❖ Knowing yourself, your own biases, goals and models of practice.
- ❖ Creating an environment which is encouraging of collaboration.
- ❖ Mutual respect for the skills, challenges and limitations faced by our colleagues
- ❖ Clear guidelines for treatment and point of care support if required. Following agreed pathways.
- ❖ Respect for first on call, working with very challenging patients.
- ❖ Support for further inter professional education and mentorship.
- ❖ Understanding of the underlying values and culture of the community.



# RURAL PRACTITIONERS:- DELIVERING QUALITY, SERVING COMMUNITIES









