



Brainstem

www.anna.asn.au

Presidents Report

Hi all and welcome to another online edition of the Brainstem, your newsletter for the association. Well it's goodbye to winter and a cheery hello to spring. I do hope that spring finds you well, with the busy and hectic time for nurses and hospitals alike.

The executive have remained busy this year with ongoing monitoring and support of the transition of executive business to PAM's, conference planning, strategic planning and the ongoing review of association processes. It is amazing how quickly the year has flown by and the conference is upon us.

Come join us in Oct this year at the Swiss Grand Bondi, Sydney for the Annual Scientific Meeting, mix with old friends and meet new ones during two days of sharing of information and networking with like minded colleagues. The social events will allow time to relax and unwind from the day to day pressure of work and kick your heels up, let your hair down and enjoy good company. I hope to see you there.

On a quick note, a very big congratulations, goes out to our new exec mum's Sharon and Rochelle and their little young men, we wish both of them a very big good luck and lots of sleep in the coming months.

You will notice a new refreshed Brainstem style courtesy of our Brainstem Editor Emma. If you have any feedback or any comments about the style, or you would like to contribute something to the Brainstem, then please contact the exec. We would love to hear from you.

Make sure you continue to check out the website on a regular basis. All updates from the exec about up and coming events will be posted online regularly. Please keep in touch with the news as it occurs.

Hope to see you all at the conference

Cheers
Tracy



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Hi ANNA Members!

The Conference is a month away so it is time to get your registration in we have an exciting program for you!

We have record exhibitors that we hope you will visit throughout the conference and our social activities.

The welcome happy hour on Wednesday 22nd October & the conference dinner on Thursday 23rd October and the theme is 'Bondi Rescue'

*'Get in the spirit of sun, sand and surf
and come in your best Beach outfit'*

We trust that the program will not only provide new insights into many aspects of managing the neuroscience patient, but also provide an update on many of the established principles.

The registration brochure is on the website so remember to keep checking the [Website for updates](#), and if you have any questions about the conference, please don't hesitate to contact me:

conferenceconvenor@anna.asn.au



Thank you for your support,
we hope to see you soon in Sydney
at the Swiss Grand Bondi
from 22nd to 24th October 2008.

Alison Wilson

Conference Convenor



The Australasian Journal of Neuroscience

- Career development
- Opportunities
- Take the leap
- Jump your neuroscience career to new heights

Editorial Advisory Board

Calling for expressions of interest to [join the journal team](#).

The Australasian Neuroscience Nurses Association is seeking expressions of interest from ANNA members who wish to join the editorial advisory board or become a peer reviewer for the *Australasian Journal of Neuroscience*. Associate editors would provide assistance and advice to the editor and peer reviewers advice to the editor/s and authors on manuscripts submitted for publication.

A position description is available for these positions.

Journal editor

The Australasian Neuroscience Nurses Association is seeking expressions of interest from ANNA members who wish to take on the role of [Editor of the Australasian Journal of Neuroscience](#) from October **2010**. The editor co-ordinates the publication of the Journal through liaison with the Editorial Advisory Board., peer reviewers, ANNA Executive and authors.

A position description including selection criteria is available.

Authors

ON THE HUNT!

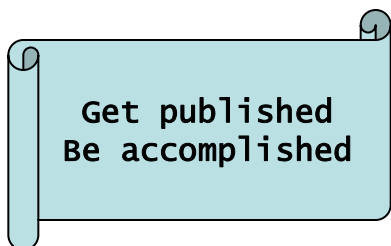
The *Australasian Journal of Neuroscience* is in search of [authors](#) interested in submitting manuscripts for publication.

New and experienced authors are welcome and support is available for new authors.

Persons who presented at the 2007 ANNA Conference are invited to submit their presentations for review for publication.

[The journal is looking for manuscripts in the following areas:](#)

- Literature reviews of subjects related to neuroscience nursing
- Case studies of neuroscience patients, children or adults
- Research reports
- Ethical issues in neuroscience nursing
- Outcome studies
- Quality management
- Systematic reviews of nursing interventions
- Nursing management of neuroscience patients in outpatient clinics (diagnostic or treatment focussed)
- Peri-operative care of the neurosurgical patient
- Emergency management of the neuroscience patient
- Care of persons with chronic neurological problems
- Patient/family education related to neuroscience nursing
- Developing roles in nursing care of neuroscience patients
- New therapies
- Team approaches to care



Positions vacant ANNA executive

The following positions will become vacant this October, please forward any expressions of interest to the executive prior to Friday 17th October.

- Treasurer
- Secretary

Education evenings:

Let everyone know about your education sessions and advertise in your Brainstem!

Send information at least 1 month before the event

Send information to Emma Everingham

Email: annaexecutive@anna.asn.au

QLD delegates

Calling all Queensland members, we urgently need new state delegates to represent you, all positions are currently vacant, president, secretary and treasurer. Please contact ANNA executive.

ANNA Professional Standards:

These are posted to all new members and additional copies are available for \$30

Brainstem now on website:

All Brainstem issues will now be available from the website, copies will no longer be posted to each member.

Next issue published on the website by the **end of December 2008**

Nursing conferences

◆Second Annual International Neuroscience Nursing Symposium
February 20-21, 2009

Ritz Carlton South Beach, Miami.

<http://neurosurgicalinstituteff.com/symposium.html>

NEW MEMBERS

The ANNA executive welcomes the following new members.

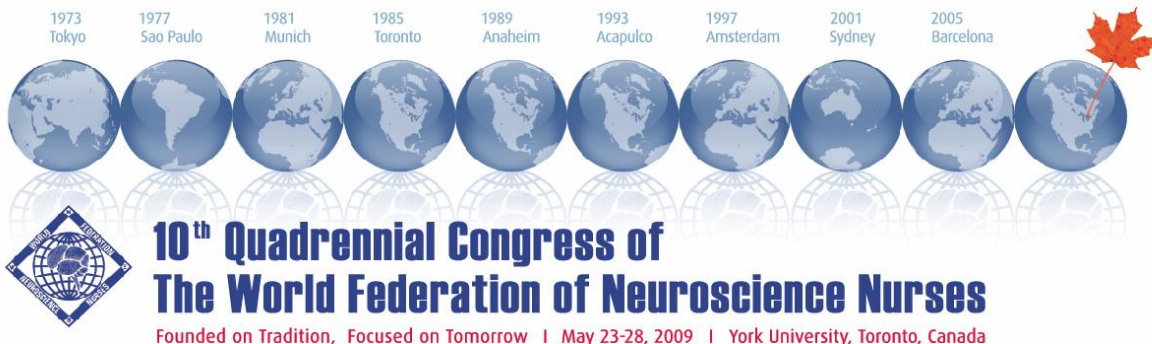
First Name	Last Name	State	Employer
Catherine	Hardman	NSW	Westmead Hospital
Rosemary	Merheb	NSW	St Vincent's Hospital
Anne-Marie	Daly	NSW	Prince Of Wales
Sheetal	Sood	NSW	St George Private Hospital
Maria	Raftopoulos	NSW	John Hunter Hospital
Belinda	Endler	NSW	NSICS RPAH Camperdown
Louise	Keirs	NSW	CRGH
Linda	Madley	NZ	Waikato Hospital
Linda	Madley	NZ	Waikato Hospital
Cecile	Combrinck	NZ	Neuro Surgery
Tiffany	Schwass	NZ	Waikato District Health Board
Delwyn	Bond	NZ	Schering Plough
Carly	Mills	QLD	Princess Alexandra
Beth	Gabbusch	SA	Womens' & Childrens Hospital
Emma	Goodes	SA	Womens' & Childrens Hospital
Michelle	Crawford	TAS	Royal Hobart
Rachael	Levy	VIC	Geelong Hospital
Suzanne	Vaneslow	VIC	Austin Hospital
Sarah	Hodges	VIC	Cabrini Hospital
Marisa	Pineiro	WA	MSS SCGH
Beverly	Ewens	WA	ECU

MAINTAINING ACTIVE MEMBERSHIP

- Please notify ANNA promptly of change of address via the website
- OVERDUE: as per your ANNA handbook, if renewal payments are not received within 3 months you are required to rejoin as a new member
- All renewals are \$90 and new members \$100 per annum
- All membership specific enquiries can now be directed to PAMS on ph:03 9895 4461

MEMBERSHIP PROCESSING WITH “PAMS”

All membership processing is now managed by the Professional Association Management Service (PAMS), including processing of all new memberships, renewals and conference registration. Please contact them directly for all your membership enquiries. See contacts page for details.



Request for Congress Moderators September 2008.

The WFNN Scientific Committee is looking for interested parties to assist in the Scientific Program by being a Moderator for the many sessions planned at the 2009 Toronto Congress.

Guidelines for Congress Moderator – Toronto, 2009

The role of the Moderator is to:

- Familiarize yourself with the content of the presentation, by reading the abstracts and by listening to the speakers.
- Make contact with each speaker before the session begins to discuss practical details (audio-visuals, organization of the session, speaker information etc).
- Familiarize yourself with the audio-visual equipment. (There will be a technician available).
- Arrive in the allocated room 10 minutes before the session begins.
- Introduce yourself to the speakers before the session begins.
- Introduce yourself to the audience, welcoming the participants and the speakers.
- Announce/comment on any necessary practical information.
- Announce the content, structure and duration of the session and the possibility for questions and discussions.
- Introduce each speaker with:
 - Name and country of the speaker
 - Title of the abstract
 - Other relevant information (as agreed with the speaker before the session)
- Keep to time, inform the speaker when there are 5 minutes left to speak - interrupt the speaker if necessary. Sessions **must** keep to time. Time cards will be in each room.
- Thank the speaker.
- Open and chair question/discussion time. Be prepared to facilitate discussion and/or start with a question if none are asked.
- Encourage the audience to introduce themselves by name and country before asking a question or making a comment.
- Summarize and thank participants for their questions.
- Close the session by thanking all speakers and the audience for their participation.

If you would like to be involved in assisting with the success of the program, please send your details to Vicki Evans (Roach), Scientific Chair, yevans@nsccaahs.health.nsw.gov.au

Thank you for your consideration. Here's to a great Congress!
For the WFNN Scientific Committee,

Vicki Evans (Roach)
WFNN Vice-President and Scientific Chair, Toronto 2009.

Managing the Cognitive and Behavioural Effects of Brain Tumour

The staff training workshop titled “Managing the Cognitive and Behavioural Effects of Brain Tumour” was held at Liverpool Hospital on Wednesday 27th August, 2008. This workshop was conducted as part of a research project funded by the Cancer Institute of New South Wales to evaluate the efficacy of a Behaviour Consultancy Model in addressing impairments in the cognitive and behavioural domains of executive functioning among adults with Brain Tumour (BT). The workshop was attended by 50 delegates from disciplines such as nursing, psychology and allied health.

The keynote speaker for the day was Dr Kathryn Hoskin, a Clinical Neuropsychologist from the Acquired Brain Injury (ABI) Behaviour Consultancy in Victoria. The ABI behaviour consultancy is a state-wide service providing community-based behaviour management support to people with ABI, their families and people working with them. Other speakers included Kylie Wright, Neurosurgical Clinical Nurse Consultant/Case Manager and Diane Whiting, a Clinical Psychologist at the Brain Injury Rehabilitation Unit, both from Liverpool Hospital.

The program opened with a presentation outlining the journey of a brain tumour patient. Then ‘what is challenging behaviour?’ was explored including defining challenging behaviour, exploring factors that influence challenging behaviour and discussing behaviour management principles. This was followed by presentation of the prevalence of challenging behaviours in patients with brain tumours. These were results found by the research team and concluded that challenging behaviours were reported by both carers and the person with the brain tumour in up to 32% of cases. The program then went on to explore methods of managing cognitive behaviour and the golden rules and principles of behaviour management. All that was presented was then reinforced by exploring case studies used in the intervention phase of the research project, and further case studies of challenging patient behaviours that were discussed and brainstormed in small groups to suggest suitable management plans.

The day concluded with representative from the NSW Cancer Institute Mr Mark Anns officially launching a series of 16 Fact Sheets and information resources for patients and their carers that have been written by the research team to provide important information about many of the behavioural and cognitive problems experienced by brain tumour patients. Each fact sheet contains a definition of the problem, some statistics about how often the problem occurs among people with brain tumour, a list of common symptoms, the story of a person living with the problem, strategies that the person with brain tumour can use to manage the problem, strategies that carers or family members can use to support the person, key questions patients or family members can ask their doctor or other health professionals, and links to more information on the web. The list of Fact sheets and resources are as follows:-

Managing the Cognitive and Behavioural Effects of Brain Tumour continued...

Overall the workshop was evaluated positively with many requests to run further workshops in the future. What participants liked best was the practicality of information provided, the provision of frameworks and strategies to manage such behaviours, and feeling more confident in understanding behaviours of ABI and helping patients and carers to manage these behaviours. Participants thought the workshop was “interesting, stimulating and inspiring” and commented on how useful and needed the Fact Sheets would be to Brain Tumour patients and their families.

For copies of the Fact Sheets contact:

Kylie Wright

CNC / Case manager Neurosurgery

Liverpool Hospital

(02) 98284078

(02) 98283000 ask for page 49455

kyliem.wright@swsahs.nsw.gov.au



“THIS WAS MY NEUROSURGICAL LIFE”

by Lenore Savill, ANNA Life Member.

This is a new section where ANNAs' dedicated life members provide us with their 'This is your life' story. Thank-you so much to Lenore for providing us with the very first piece for our ANNA members



I retired from nursing in November, 2005, having worked at the Royal Children's Hospital, Brisbane for 35 years. During this time I was in Charge of a 35 bed ward which housed neurosurgical, orthopaedics and ophthalmology patients. The title "Charge Nurse", changed to "Nurse Practice Co-ordinator", and then to "Nurse Unit Manager".

My prime interest was orthopaedics, my knowledge of neurosurgery was very limited, I felt very inadequate. The Neurosurgeons were wonderful people to work with, they took me and taught me, never once did they put me down. The more I learned the more I wanted to know. Royal Brisbane Hospital had a unique neurosurgical unit; a specialist neurosurgical theatre was attached to a specialist neurosurgical intensive care. All paediatric neurosurgery was undertaken in this unit. Patti Cay was in Charge of the theatre, she was a wealth of knowledge, what the doctors didn't teach me Patti did. After approximately 14 years the number of beds in the ward was reduced to 24. Seat belt legislation had significantly reduced the number of children admitted with head injuries and multiple trauma. Rubella immunisation had reduced the number of ophthalmic patients admitted with cataracts.

I first learned of the Australasian Neurosurgical Association in 1977, when the Matron of Royal Brisbane Hospital asked Patti Cay to prepare for a meeting as members from ANNA were going to hold their annual meeting at the hospital, after having attended the Neurosurgical Scientific Meeting. It was at this meeting I was asked to form a state branch and accept the role of State Delegate. Neurosurgeons from Royal Brisbane Hospital and Princess Alexandra Hospitals were invited to speak at our meetings which were held approximately twice a year. In 1984, I was asked to accept the role as President of ANNA. The members who formed the executive were, Patti Cay, Secretary, Wendy Clarke, Vice President and Elizabeth Davies, Treasurer. We joined the neurosurgeons each year at their annual scientific meeting and set aside an afternoon to hold our annual general meeting, one nursing paper was presented at this meeting. The meetings were usually held in a nurses' lecture room, attached to a hospital... During my time as President the American Nurses invited me to their meeting in Honolulu, what better venue for a meeting. In 1984 we handed the executive over to Jenny Blundell and Gaye Reeves in Western Australia. I continued as State Delegate until 1999 when Tim O'Malley accepted the position. Neurosurgical scientific meetings and ANNA meetings provided wonderful learning experiences.

Neurosurgical nursing has evolved over my 35 year career. The diagnostic tools of CAT scans and MRI scans have made a huge difference in the treatment of neurosurgical patients. The development of neuroradiology has also improved diagnosis for neurosurgical patients. Prior to CAT scans, invasive procedures were used to make a diagnosis. Hydrocephalus was diagnosed by air ventriculogram, a needle was introduced into the ventricles and air injected which acted as a contrast. The needle was inserted through the fontanelle of babies, while older children required a burr hole. The children complained of bubbles in their head for some days.



“THIS WAS MY NEUROSURGICAL LIFE”

Continued

Lesions of the spinal cord were diagnosed by myelogram with a contrast dye. The Glasgow Coma Scale has made a huge difference to nursing observation and early diagnosis of patients with neurological deficit.

Prior to the introduction of the Glasgow Coma Scale, the Children's Hospital used a chart which had date, time, level of consciousness, TPR and pupil size and reaction. One tired night nurse wrote, under level of consciousness, "Orientated in time and space!" Everyone has a different perception of size when drawing, which made it hard to determine how large the pupils were.

One of the many interesting patients I nursed, I will call Jane. Jane was approximately 9 years old, she was a pedestrian who was hit by a car; Jane's mother was a single parent and a Registered Nurse. Jane was unconscious when admitted and remained so until discharged. She was dystonic and/or opisthotonos, to the extreme that there were occasions when she arched herself over the bed rail and fell out of bed. There were no CAT scans and the Glasgow Coma Scale had not been introduced. Did she have a brainstem injury or a severe axonal injury, what was her diagnosis? There were no Rehabilitation facilities in Queensland for head injured children, so the mother took her home after approximately 6 months. The mother said to me, "Sister Savill it is easier to look a dead bones than to look at this" Jane's condition had shown very little improvement since her admission; she was still dystonic and responded only to painful stimuli. The mother enlisted the help of the Damon Delacato technique, which involved repetitive patterning of the limbs. The technique was not approved medically, what more could the mother do; there was no other help available. Approximately 6 months later the mother returned to visit the ward with Jane. Jane had a normal gait, she said, "Hello Mr. Butler, Hello Sister Savill and Hello Sister Tan". While hospitalised she did not make any response when we talked to her, I asked her mother did she tell her who she was coming to see. Her mother's reply was, "No, she remembers you from when you talked to her as a patient". Last I heard of Jane she had grown up and had a university degree.

I feel privileged to have been a member of ANNA, to have witnessed the association's development and to have been given the status as "Life Member".

Kind regards,

Lenore Savill

“BRANCH OUT”

by Elizabeth Mackey, VIC branch delegate

This is a new section where we ask a branch to give us an insight into their state, facts and figures and interesting points.



ANNA Victoria has over 80 members, from graduate nurses to some who have been around since the Australasian Neurosurgical Nurses' Association's first meeting in 1974. This gives ANNA Victoria a great depth and breadth in it's knowledge base and great opportunities for networking with like minded nurses with a passion for neurosciences.

Our members include nurses with an interest in a multitude of neuroscience nursing areas, across the broad spectrum of the care continuum for patients with neuroscience conditions - including research and academia. Our meetings are held every second month, with a range of activities - such as simple presentations, evening seminars and social gatherings.

In 2008 our Victorian State branch is administered by: Elizabeth (Liz) Mackey, the State Delegate; Kellie McIntosh, the State Secretary; and Pip Balfour, the State Treasurer.

Liz currently works clinically at the Austin Hospital on the Neurology Ward, and is also the Project Nurse for the Stroke Nurse Practitioner Project at the Royal Melbourne Hospital. Kellie is the Nurse Manager of the Neuroscience Ward at Monash Medical Centre. This unit encompasses an HDU and Stroke Care Unit, and cares for patients with neurological and neurosurgical conditions. Pip works at Monash Medical Centre as a nurse in the neurosurgical operating suite - caring for patients during cranial and spinal procedures.

A big area of development in Victoria at the moment is in the realm of Stroke. Our health department - the Department of Human Services (DHS) - has many exciting projects running to improve our stroke patient care. Several hospitals are looking at the role of the Stroke Nurse Practitioner, and are working collaboratively to design the Stroke Nurse Practitioner model. Several of our members are involved in this process - so we will share our experiences with our ANNA colleagues as the project progresses.

Congratulations to Andrew Scanlon - Victoria's first Neurosurgical Nurse Practitioner Candidate - who is currently in America developing his NP skills through a Nurse Practitioner Fellowship.

We are always keen to meet new members and other neuroscience nurses at different hospitals and places of neuroscience nursing care from across Victoria. Thanks to those hospitals that have hosted meetings this year - The Alfred, The Austin, Box Hill and The Royal Children's Hospitals.

STATE News

WA,

ANNA (WA branch) Report – September 2008

The WA branch has recently had the AGM, and elected Harriet Chan as the state delegate. Harriet has had many years of experience in nursing and more specifically neuroscience nursing. She has developed a Graduate Certificate in Neuroscience Nursing, and has continued to expand on that to include a Certificate in Neuroscience Nursing (Neurology or Neurosurgery) and subspecialty areas such as Multiple Sclerosis. Harriet also works with the Australian Neuromuscular Research Institute.

Janet Doherty has remained as our state treasurer. Janet is the Clinical Nurse Specialist with Parkinson's (WA), and is also a very resourceful person to have in our group. Lee Fyfe has stepped back into the role of state secretary, following a period as state delegate. With Jo Chadwick as our new coordinator in social and fundraising activities, we are looking forward to creative activities.

Our meetings remain quarterly, and we have continued to expand on the venues used for ANNA meetings. The membership is continuing to grow, with new members joining from a diverse range of neuroscience nursing areas, including the community nursing sector, and hospitals (post/acute and rehab. areas).

In August we had a presentation from Louise Clark (Nurse Educator) from Epilepsy Action and the Epilepsy Association. As nurse educator, Louise is involved in community education, schools and workplaces, and with individuals and families. This year a camp was organized for individuals and family members, with exciting activities of orienteering, rock climbing and archery included.

Lee (WA – state secretary)

VIC

Hello from your committee..

We look forward to getting to know you, and welcome any suggestions/feedback. For some exciting facts and figures see our report in the new section of Brainstem "BRANCH OUT"

Elizabeth.Mackey@easternhealth.org.au

Neuroscience Clinical Nurse Educator at
Box Hill Hospital

STATE News

SA

SA branch report 2008

In March this year the SA branch held its first education evening at the Queen Elizabeth Hospital. Our expectations were exceeded when 47 people attended.

The evenings topic of neuro imaging and its applications (including the use of CT perfusion scanning as screening in acute stroke) was presented by neuroradiologist Dr Sandy Patel. Refreshments were kindly provided by Ian Common of Bayer Health Care.

Planned education sessions for the future include:

Neuro-oncology

Brain injury rehabilitation

Speech pathology intervention for the neuroscience patient

Neurosurgical interventions/procedures

(Please feel free to forward any suggestions)

Last meeting for 2008

November 24th

Meeting dates for 2009

February 24th

May 25th

August 24th

November 23rd

These are dinner meetings and will be held at The Broadway Hotel, Broadway St Glenelg at 7pm



Photo: Sharon Horn (Clinical Practice Consultant, Comprehensive Epilepsy Program, The Queen Elizabeth Hospital); Ian Common (State Manager, Bayer Health Care); Dr Sandy Patel (Neuroradiologist)

ACT

State branch meeting dates for 2008 are:

February 26

April 29

July 29 - AGM

Sept 30

November 25

The meetings are held the last Tuesday of the month at 1730 in the 9B tutorial room at TCH.

Sonja Eldridge Sonja.Eldridge@act.gov.au

STATE Contacts

South Australia

Calling all interested members,
new branch developing

Contact: Mahlah Watchman
mwatchman@calvarysa.com.au

WA Branch

Contact: Harriet Chan

QLD Branch

Calling all interested members to
become a state delegate.
Go on you can do it! Give me a call.
Contact: Emma Everingham
executive secretary

NSW Branch

Contact: Liz O'Brien

Ph: 02) 9926 8735
eobrien@nscchahs.health.nsw.gov.au

ACT Branch

Contact: Sonja Eldridge
Sonja.Eldridge@act.gov.au

Victorian Branch

State Delegate –Liz Mackey
Elizabeth.Mackey@easternhealth.org.au

New Zealand

Contact: Denise Le Lievre
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