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2014 CASE STUDY: Data Literacy

Through this action plan, Ms. Marisela and Ms. Boyd aim to improve Maternal and Child Health activities through ensuring that the nursing work-force can skilfully use accurate, consistent and easily accessible public health data.

Fiji Team: Taina Marisela and Leslie Boyd

Mentors: Silina Waqa Ledua

Action Plan: Quality data management: Maternal child health in Fiji
Purpose and Rationale: To improve the standard of Quality Data Management of Maternal Child Health activities using the existing processes of Fiji's National Public Health Information System. The rationale for this is to improve accuracy and reliability of national health reports, as well as to train nurses and supervisors in the appropriate use of data.
Problem: Inconsistent recording and reporting of data which is needed for the implementation of Maternal and Child Health (MCH) activities.
Short term goal: Develop a training schedule to promote quality data management; develop a supervisory checklist to include support to nurses carrying out MCH activities; ensure that all public health nurses have access to the current Public Health Information System (PHIS).
Long term Goals: Promote/contribute to upgraded MCH registers and ensure that they are available at all Health Centres and Nursing Stations; establish a system of feedback from nurse supervisors to Ms. Marisela and Ms. Boyd regarding feedback on the progress of nurses' data management skills; see an increase in the overall accuracy of MCH reports by 32% by June 2015.

Proposed Timeline: As per previous case studies, this timeline will be progressively updated.

2014	July	Presentation of action plan and budget to steering committee (members TBC) (10-31 July)
	August	- Provide progress report to WHO CC UTS (by 13 August) - Conduct steering committee meeting for critique of action plan and to review policies re: MCH and immunisation (by 7 August)
	September	Implement action plan (by 18 September)
2015	January-February	- Develop report regarding action plan (by 9 January) - Update and finish final report for UTS (by 19 February)
Primary Stakeholders: Public health nurses; nurse supervisors; Ministry of Health Fiji; patients and families		
Secondary Stakeholders: stakeholders managing the Public Health Information System (PHIS)		
Limitations: **-**Stalling of the project due to: delay in decision making from the Steering Committee; having to clarify the action plan; unavailability of steering committee members. - Budget: Insufficient funds to print upgraded MCH registers; no funding agency available to support project - Delay in processes: Timelines; reports; decision making; feedback		

FELLOWS QUOTES

"Thank you so much for this great opportunity...I have obtained a lot of informative information...at the moment I am a student in the University back home and what I learned is all related to my learning. [I will] implement some changes to my other colleagues." - *Taina Marisela, AAF Round 14 Fellow, 2014.*

"[I have gained]...insight into appreciating different culture, values and change…[I will] provide an enabling environment to managers to implement change." - *Leslie Boyd, AAF Round 14 Fellow, 2014.*

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2014 CASE STUDY: Discharge Planning

In Nauru, no system of follow-up of patients after discharge currently exists. The Nauru team aims to address this by implementing an action plan that promotes a coordinated patient follow-up system, acknowledging the importance of a proper continuum of patient care.

Nauru Team: Patrina Akua and Susan Star **Mentors:** Gano Mwareow

Action Plan: To add home follow ups to achieve: Continuity of care in the community; reduced hospital length of stay; decreased unplanned readmissions to hospital; and improved coordination of services following discharge from hospital.
Purpose and Rationale: To reduce patient readmission rates through: improving cost effectiveness of hospital stay; improving management of scarce resources; improving staff utilization.
Problem:
- No follow-ups and no system of follow-ups on discharged patients exist.
- The curative and preventative divisions of health workers need to work together
- No uniformed documentation for patient follow-up after discharge
- A need for improved patient education upon discharge
- Families of patients are complaining due to improper continuum of care from hospital staff.

Short term goal:
Plan for home follow-ups and present formed plan to hospital management; craft a budget to implement home follow ups
Long term Goals:
Create a new discharge form; implement action plan and ensure improvement of programme of home follow-ups and documentation of follow-up activity through monitoring of plan implementation.

Proposed Timeline: As per previous case studies, this timeline will be progressively updated.

2014	July	**Completed action:** Presentation on Discharge (mid-July) - project presented during Officers In Charge meeting, July 7, 11, 2014—positive feedback received. Next plan of action is to conduct a meeting and confirm nominated project team members on August 1, 2014.
	October	Plan for home follow-up (early October) Present formed plan for hospital management (mid-October)
2015	April	Organise meeting with physicians for feedback on discharge plan. Set date for presentation of final Discharge plan
	June	Monitor plan implementation (mid-2015) Report on follow-up plan implementation (July 2015)
Primary Stakeholders: Clients (patients); nurses and doctors; Directors of nursing; Director of medical services; plan officer (records); Secretary of Health; Budget Officer; Ministry of Health; District Primary Health Care workers; Zone nurses; Community leaders		
Secondary Stakeholders: Administrations; families of clients; Fellows of AAF;		
Limitations: Shortage of staff nurses; intended budget needed; transportation; time.		

FELLOWS QUOTES

On what she has gained from this program:
"A lot, to be confident in taking responsibilities of being a leader in my country." *Susan Star, AAF Round 14 Fellow, Nauru*

On what she will put into practice upon returning to Nauru:
"Respect [the] elderly and the culture we have at home." - *Patrina Akua, AAF Round 14 Fellow, Nauru*

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2014 CASE STUDY: Severe Acute Malnutrition in Children 0-2 years.

Samoa Team: Luse Vaeluga Tupuivao and Iuni Faaoso (WHO funded) **Mentors:** Professor Pelenate Stowers and Maatasesa Mathes

Action Plan: Identify causes of severe acute malnutrition in 0-2 yrs in Apia Urban, Samoa and to increase the ability of nurses to collect and interpret the supporting data.

Purpose and Rationale: This project aims to contribute to Samoa's progress towards MDG 4, to reduce child mortality. Apia hospital has seen an incline in admissions of children with SAM, with little information available about the factors that contributed to the child's condition.

Problem:

- Admissions of children with SAM has increased
- The factors contributing to SAM in children 0-2 are difficult to identify
- Data regarding SAM cases is not well recorded, making identification of causes difficult
- The levels of understanding among nurses regarding data collection vary significantly
- Parents must be involved in the treatment of SAM

Short term goal:

To undertake a retrospective analysis of SAM admission patient notes and to gain consent to interview parents and staff involved in SAM admissions. Following collection of this data, it will be analysed. Luse and Iuni will also conduct training for Nurses on effective communication regarding child nutrition and relevant data collection.

Long term Goals:

By 2015, no admissions for SAM from the Apia Urban area and decreased admissions from Samoa overall.

Proposed Timeline: As per previous case studies, this timeline will be progressively updated.

2014	July	**Completed action:** Submission of Project to Ministry of Health Research Committee (9 July 2014) Undertake a retrospective review of SAM patient records
	August	Gain consent and ethics approval to develop and distribute a questionnaire to families of children with SAM and for the nurses working with them
	October	Undertake a literature review on SAM Collate and analyse the data Conduct training for nurses on effective nutrition communication
2015	January-February	Review current data to see if SAM admissions have decreased.
Primary Stakeholders: paediatric patients and patients' families		
Secondary Stakeholders: See above		
Limitations:		

FELLOWS QUOTES

"It's a rewarding experience gained from this program, I am able to meet helpful Professor from different field sharing their expertise and experience about the good quality of a good leader." - Luse Vaeluaga, AAF R14 Fellow, 2014

"The program is very useful to this position [as a data manager for nursing division] and easy to apply to the Samoan context." - Iuni Faaoso, AAF R14 Fellow, 2014.

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2014 CASE STUDY: Credentialing of Nurses

Responding to an evolving workforce and health system in Samoa, this action plan promotes the support and accountability of nurses and midwives in their provision of quality patient care.

Samoa Team: Faimanifo Peseta

Mentors: Pelenatete Stowers

Action Plan: Credentialing of specialist nurses

Purpose and Rationale: To provide a robust credentialing program to ensure a fit-for purpose nursing and midwifery workforce for quality health care services within the whole health sector in line with the health sector plan. This will provide an opportunity to up-skill and validate qualification of the workforce.
Problem: The older and more experienced nurses are near retirement age, and a majority of the current workforce are new graduates. There is a need to prepare the next generation of nurses for leadership roles.

Short term goal: Consult with different stakeholders to work towards the formalization of a credentialing program as a requirement for all nurses and midwives in Samoa.

Long term Goals: That the workforce will demonstrate the appropriate skillset, and that there will be an improvement in patient care.

Proposed Timeline: As per previous case studies, this timeline will be progressively updated.

2014	July	Submit plan to DG/CEO and Nursing & Midwifery Council (21-31 July). **Completed actions:** Action plan presented to Health Service Performance Quality Assurance Nursing and Midwifery Divisional Meeting; detailed report of AAF R14 submitted to CEO for MOH/Director General of Health; meeting scheduled with the Manager of Nursing and Midwifery Division, Ms Maatasesa Samuelu Mathes to present the overview and brief summary of proposed action plan to obtain her views on taking the project further. Meeting with Health Sector Nursing and Midwifery Leadership team scheduled for Wednesday 30 July 2014.
	August	Consultations of the plan with different stakeholders (August-September)
	October	Secure funds for implementation of the plan
	November - December	Submit final report of consultations, outcomes and recommendations for the way forward
2015	January-February	Credentialing program plan launched.
Primary Stakeholders: Health Sector nursing and midwifery leadership team; nurses and midwives		
Secondary Stakeholders: Samoa Nurses Association; Samoa Medical Association; Council of Nursing and Midwifery; National Health Services; Ministry of Health		
Limitations: Financial Constraints; building consensus among key stakeholders; time.		

FELLOWS QUOTES

"Thank you very much for the opportunity to learn more about leadership roles. [I have gained] more understanding on the expected outcomes of my roles… [and] skills [and] knowledge on how to improve the work I'm doing." - *Faimanifo Peseta, AAF R14 Fellow, 2014.*

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2014 CASE STUDY: Nurse Task Analysis

To maximise the efficiency of nurses in the local healthcare system that has increasing demands on hospital resources and staff, the Solomon Islands team has developed an action plan to refine nurses' job descriptions with a focus on Nurse Managers.

Solomon Islands Team: Maria Noela Gelibali and Hellen Orihao

Mentors: Michael Larui

Action Plan: Task analysis of registered nurses at the national referral hospital, Solomon Islands

Purpose and Rationale: To improve nurses' efficiency; improve patient satisfaction; and increase cost effective use of hospital resources.

Problem: With a double disease burden of communicable and noncommunicable disease, the Solomon Islands faces a shortage of nurses, with nurses practicing beyond their scope. Less time is spent on patient care, with poor patient outcomes. Furthermore, an increased demand on hospital resources is coupled with a decrease in the annual budget in 2014.

Short term goal: Refine nurses' job description (with a focus on Nurse Managers) in collaboration with different ward managers, and implementation of the new job description through development of a nurse training programme.
Long term Goals: To improve nurses' awareness of their roles; improve nurses' efficiency; improve patient satisfaction; increase cost-effective use of hospital resources.

Proposed Timeline: As per previous case studies, this timeline will be progressively updated.

2014	July	**Completed action**: Write email to National Head of Nursing and Director of Nursing to raise awareness of this project (July 4) **Completed action:** Formal letter seeking authorization for action plan submitted July 4, 2014. - Present project plan for support and guidance from team members (by July 18)
	August	Work with different ward managers and develop a more refined job description (by August 21)
	September	- Present to team members the draft job description for critique (by Sept 3) - Facilitate training on Nurse Managers' job description (by Sept 10) - Pilot the refined job description (by Sept 15)
	November	Monitoring and evaluation of Nurse Managers' role (by Nov 31)
2015	June	Make amendments and final draft for submission and endorsement (by June 26)
Primary Stakeholders: National Head of Nursing; Solomon Island Nursing Council; Director of Nursing (M) National Referral Hospital; Nurse Managers; Patient		
Secondary Stakeholders: Hospital Senior Accountant		
Limitations: Unpredictable disasters; knowledge and skills; finances; resistance from Nurse Managers		

FELLOWS QUOTES

"This is a very excellent kind of programme in the sense that it … picks out our areas of weakness and makes improvements that will benefit the consumers. Also the support we get here is excellent." - *Maria Noela, AAF Round 14 Fellow, Solomon Islands*

[I will] "Communicate clearly…[and] continue to collaborate with the mentors"
"Indeed the knowledge gained had helped me on other related leadership and management projects and also to assist my students (Nurses) from the Solomon Islands national university"
- *Hellen Orihao, AAF Round 14 Fellow, Solomon Islands*

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2014 CASE STUDY: Obstetric Emergencies Policies & Procedures

Boat travel between the atolls of Tokelau can range from 9 to 26 hours. This can be fatal in the case of an obstetric emergency, where human

Tokelau Team: Tiga Olouta Miliama Lapana and Anna Fita Sinapati **Mentors:** Liza Kelekolio

Action Plan: Guidelines for obstetric emergencies

Purpose and Rationale: The purpose of this action plan is to improve the ability of healthcare providers to treat and manage obstetric emergencies on location. Tokelau should have guidelines for this, and this should be recognised at all levels of the health system. It is linked to the country's health plan in terms of upgrading the existing health system (midwifery training and training of new nurses) plus procurement

Problem: Because of the geographic location of Tokelau, the country needs ready availability of skilled health staff and the appropriate equipment to cater for obstetric emergencies. At the moment the three hospitals are manned by one doctor, 2-3 registered nurses, and a registered midwife. Most of the time, there is no doctor—therefore, most obstetric emergencies are being referred to Apia. Other problems involve in this is transport to and from the other atolls.

Short term goal: Review protocol for managing postpartum haemorrhage (PPH); discuss the possibility of sending nurses for midwifery training; discuss procurement of equipment with the Department of Health Tokelau; discuss the boat schedule with the appropriate authority.

Long term Goals: If midwifery training is possible, get replacements for nurses that will be attending training; establish a uniform protocol for the management of PPH (shock); develop education program for the implementation of the protocol.

Proposed Timeline: As per previous case studies, this timeline will be progressively updated.

2014	July	Report to managers and consult with health staff; report to UTS (early July). **Completed action:** Report to Taupulega (employer) submitted July 2014. Positive feedback received regarding capacity development of health staff. Requested time with senior health staffs from the other 3 hospitals, Chief Clinical Advisor, and mentor Liza Kelekolio. Plans for transport between three atolls to be discussed at top level; plans for satellite sessions with other health staff from other hospitals.
	September	Review protocol for PPH
	December	Main hospital on Nukunonu to be equipped—facilities and skilled health staff
2015	January-February	- New protocol prepared (by end of January) - Dissemination of new protocol (February)
	April-May	- Evaluation of new protocol (April) - Final report to UTS (May)
Primary Stakeholders: Department of Health Tokelau; Healthcare practitioners (nurses and midwives); birthing women		
Secondary Stakeholders: Employer (taupulega)		
Limitations: Employer (funding); human resources; time		

FELLOWS QUOTES

Regarding what she has gained from the program:
"How to be a good leader; data analysis; team work; SMART format." - *Anna Fita Sinapati, AAF Round 14 Fellow, 2014*

"Excellent program, thank you for sharing your knowledge and wisdom, really appreciated." - *Tiga Olouta Lapana, AAF Round 14 Fellow, 2014*

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2014 CASE STUDY: Family Planning

Using data regarding the rates of contraceptive use, teenage pregnancy and utilization of family planning services, Ms. Maloto and Ms. Reete have identified the need for the implantation of an appropriate Reproductive Health Policy in Tuvalu.

Tuvalu Team: Sokolito Paama Maloto and Tenako Reete **Mentors:** Filoiala Sakaio, Dr Nese I. Conway

Action Plan: Reproductive health policy implementation—increase usage of contraception in all women of child bearing age
Purpose and Rationale: To promote the use of contraceptives, the importance of family planning, and to decrease the adolescent birth rate.
Problem: A reproductive health policy is needed secondary to a low contraceptive prevalence rate; an increasing number of teenage pregnancies; limited community awareness of family planning and myths of side effects; high unmet need for family planning especially among married women; and the fact that there is no systematic programme of increasing awareness about family planning.

Short term goal: Establish dialogue with home groups, women in the community, and senior girls in primary/high school regarding the importance of implementing a reproductive health policy. Increase awareness of contraceptive use among 13-16 year old women.

Long term Goals: Establish a reproductive health policy to ensure increased access to contraceptive use and expand programmes on contraception.

Proposed Timeline: As per previous case studies, this timeline will be progressively updated.

2014	July	- Report to home groups (early July) - Report to the significant decision makers (Director of Health, Director of Nursing) and report to UTS (mid-July) -**Completed action:** Ms Reete has met with employer to discuss the project. The director has suggested to include the other health centres on the eight islands when implementing the action plan.
	August	Meet with women in the community **Completed action:** Ms Reete has spoken with the head teacher about the action plan. Head teacher will arrange a time for parents of the upper classes to speak with Ms Reete. Ms Maloto and Ms Reete have both met with mentor, Dr Conway who was please with project and willing to provide funding according to workplan. Discussions about funding with mentor ongoing.
	September	Present powerpoints to the senior girls in primary and high school, with permission from the Principal/head teachers
	December	Conduct evaluation of the action plan (6-12 months after completion of the AAF R14 Sydney study days)
2015	January-February	
Primary Stakeholders: Ministry of Health; Department of Women's Affairs; Ministry of Education; Tuvalu Family Association; Tuvalu National Council of Women; consumers; community		
Secondary Stakeholders: Secretariat of the Pacific Community; UNICEF.		
Limitations: Insufficient resources: teaching material, contraceptive devices; transportation; limited staff; lack of understanding of the importance of contraception		

FELLOWS QUOTES

"I gained skills and knowledge on the processes of project/proposal writing." - *Sokolito Paama Maloto, AAF Round 14 Fellow, Tuvalu*

"I am encouraged to move forward for higher positions...I will try to put into action what is relevant to my setting." - *Tenako Reete, AAF Round 14 Fellow, Tuvalu*