



# Executive, Branch and SIG F2F Meeting

16 March 2024

Attendance: Amy Curran, Linda Ng, Shelley Reid, Samantha Lannan, Karen New, Nicol Franz, Sarah Neale, Melissah Burnett, Margaret Broom, Jennifer Middleton (Observer).

Branch Representatives: Laura Briguglio (ACT), Wendy Carlish (Qld), Justine Parsons (NSW), Vic (apology), SA (apology)

SIG Representatives: Donna Hovey (LRC), Erin Church (NDC), Jennifer Dawson (Education), Alicia Blake (Leadership), Gabrielle Kerslake (Nutrition & Feeding), Lyn Chapple (Neo-Skin), Mariann Hennessy and Jane Jones (NNP), Trish Lowe (Research)

Meeting opened at 8am.

1. Welcome: Amy welcomed attendees, invited all participants to introduce themselves, and to explain their roles within ACNN.
2. Sustainability and promotion of ACNN: this is a focus for strategic planning. Discussion on providing support for SIG and Branch committees, especially those new to committee roles. See item 10 below.
3. Affiliations: Amy spoke to potential groups where an affiliation could be proposed. These included ANZNN CPI – have a buy-in there already with a representative at meetings. PSANZ has many subgroups including neonatal nurses, could ACNN be more involved? Australian College of Midwives has not really been considered for affiliation. Also potential to engage more with Neonatal Nurses College Aotearoa. Noted some engagement already though PSANZ conference in Christchurch next month, with opportunity to sponsor awards. ACNN has a memorandum of understanding with Taking Paediatrics Abroad. Question arising regarding Australian College of Nursing (ACN) affiliation benefits, which mostly pertains to discounts for educational events.
4. Representation at events: Amy noted upcoming events and if any members are attending them. Shelley is attending PSANZ in Christchurch, several ACNN members are attending the COINN conference in Denmark this year, Babies in the Vines in NSW is not an ACNN event but is well attended by neonatal nurses and organisers provide a table for promotional activities. Grantley Stable neonatal seminar in Queensland has substantial involvement from neonatal nurses. ACN National Nurses Forum is being held in Cairns, potential for Leadership SIG members to attend. ANZNN CPI meeting is held later in the year and is attended by the ACNN Professional Officer. Australian College of Nurse Practitioners has planned a conference in Cairns in November, usually attended by a member of the Neonatal Nurse Practitioner SIG. The Jo Kent Biggs seminar is a NSW event, attended by NSW members. Australian College of Midwives conference is being held in Melbourne this year, this would be of interest to the Nutrition and Feeding SIG. The Australian Brains Club, a new organisation based in Melbourne, may be of interest to the Neurodevelopmental Care SIG; member present at this meeting is attending. Cool Topics is again scheduled to be held in Melbourne so there is opportunity for ACNN Vic Branch members to attend. Amy encouraged raising awareness of ACNN through attendance at neonatal events, perhaps leading to some level of participation such as trade tables to promote ACNN. There is potential to engage with other conferences and suggestions are welcomed. Website can list relevant events for SIGs.
5. ACNN champions: currently 10 members have volunteered who are invited to forum meetings. Amy noted that a notable proportion of them are not from the large NICUs, with 3 from WA. Offered one year membership to undertake promotion. Membership data reflects that new members are being recruited at the champions' workplaces. Amy contacted the champions to check on their progress, who reported good engagement with staff and plans to be more involved in ACNN meetings. Feedback from the champions included interest from staff regarding educational opportunities, scholarships, more interest in being involved, and encouragement to take advantage of ACNN discounts. Request for more promotional materials. Noted importance of continuous promotion as new staff arrive and events are highlighted. Amy noted while this is encouraging there is room for higher numbers. Some join then allow membership to lapse. No requirement in workplace to be members, unlike

[Australian College of Neonatal Nurses Inc.1300211](https://www.acnn.org.au)

PO Box 148 Camperdown NSW Australia 1450 | p: 0456 645 261 | e: [acnn@acnn.org.au](mailto:acnn@acnn.org.au)

  [www.acnn.org.au](https://www.acnn.org.au)

ABN 54 975 567 399

for midwives, and many nurse unit managers do not promote ACNN membership as a requirement. Discussion on how to attract new members, given that it is not a requirement for employment. Justine reported contacting NUMs of neonatal units to let them know how many of their staff are ACNN members, to raise awareness. Membership fee may be an obstacle joining but ACNN is introducing the option of monthly credit card payments. Also noted that current ACNN membership is approximately one quarter of the nursing workforce that identify as working in neonatal care. Karen New suggested that the Branches and SIGs take on a more active role in recruitment, using promotional materials. Discussion also on personal approaches to encourage nurses to become engaged, such as conference attendance, explaining benefits. Suggestion to promote ACNN events for CPD requirements.

6. Professional Officer role: Margaret Broom is currently acting in the role as transitional Professional Officer after Denise Harrison stepped down from this position. Margaret noted she was tasked with reviewing this role to assess effectiveness and discuss with the Executive whether it should continue or adapt to current needs. Margaret reported meeting with the University of Tasmania representative (Michelle) to assess the effectiveness of the partnership, for both UTas and ACNN. Noted that from 2019 numbers of members taking up the discount offer have been maintained, and Nicol clarified that numbers are higher as some enrolments were not ACNN members. Discussed whether this option should be promoted to staff who have a few years of experience so that they remain in the specialty. Has attended Coalition of National Nursing and Midwifery Organisations (CoNNMO) meetings, noting other organisations have adopted a more corporate approach to management of their associations. Reports from each member association are sent to the Federal Government that provides the funding for the meetings. Also attended the Australian and New Zealand Neonatal Network (ANZNN) meeting in 2023. Noted that focus is on QI activity, discussion on being more involved as ANZNN is encouraging more nurses to attend and present projects. This year the conference awards guidelines were reviewed, and the poster sessions will be organised to occur in the lunch session with online voting. Family Appreciation Award took place again, online. Some details were missing, including names and contact details that required contact with hospital administration to confirm. Margaret noted that assisting in this activity would be good experience for an observer on the Executive. Noted that sometimes the information is made available too close to the closing date, need to encourage early advertising to families. Also advertised through family groups and social media. Also, a suggestion to provide option to add contact details if parents wish to ask more about the award. Reported some research requests and provided some advice to the applicants. Advised that experience before taking up this role should be a minimum of 5 years, and a good understanding of research processes. Spoke about the guideline for awarding ACNN Fellowships, needs further discussion.

7. Scholarship committee: reported by Karen New, see point 11.7 below

8. Environmental health and greening neonatal care position statement: presented by Justine Parsons and Karen New. Justine discussed on why we are concerned about climate emergency: problem is increased heat. Climate action is attempting to limit global temperatures rising no more than 1.5°C, however currently the world is on track to increase average global temperature by 4°C in 2050. Poor understanding among nurses of consequences, although WHO has declared rising temperatures as the greatest threat to global health that may cause 250,000 extra deaths from heat stress, dehydration, infection and malnutrition. Adverse effects recorded for the fetus and newborn including higher incidence of maternal viral infections, fetal tachycardia and reduced fetal movements during prolonged heat waves, preterm birth, low birth weight, neonatal mortality, malformations and anomalies. Public hospitals contribute an overall percentage (average 7%) to the entire carbon footprint as part of general health services but the percentage for NICU is not known; adult ICU contributes 3 times the carbon footprint compared to a general ward due to higher use of consumables. Governments are seeking to introduce policies and strategies to reduce the carbon output by 30 to 50% by 2030. Groups are being formed to provide education and strategies for reducing carbon footprint to net zero by 2050, including reduce, multiple use and recycling. Recycling should be the last option. Another option is to donate old equipment via Medishare to low-income countries or repurposed, e.g. old cribs can be used for animal rescue care. A climate change tracker is available for global efforts to reduce carbon footprint. Role of ACNN include publishing a position statement, a toolkit of resources, and providing education. These include for events, such as the conference, collaborating with other organisations, and advocating for change to reduce the expected increase in NICU admissions. Karen New presented the ACNN

position statement including ACNN's position, commitment, expectations from healthcare practitioners, manufacturers and suppliers of neonatal products. Initial steps for helping members to become involved in their workplace. For the conference, considering inviting local speakers to reduce air miles for carbon offsetting, recycled products including conference bags, reducing satchel inserts. This statement is open for comment but will be published on the website soon. Suggestion to form a SIG but agreed to start with a working party of interested members.

9. Neonatal education position statement: proposed and developed by the Education SIG, led by Patricia Bromley. Jennifer Dawson spoke to the content, which included key principles, recommendations and references. Links into the ACNN Standards for Practice, included footnotes for critical care nurses and provided bulleted list of items for a neonatal nursing curriculum. Will need to be updated when Standards are updated. To be reviewed by other SIGs such as Research SIG. Commented on using the term neonatal care rather than special care. Also needs reference to surgical aspects as well. Will need to formally launch the statement as a college. Responsibility for review and updates to lie with Education SIG committee. Document to be circulated for feedback.

#### 10. Strategic plan 2026 – 2030 key points and directions:

Amy asked participants to form groups to discuss ideas for 5 points, summarised below.

10.1 Increase visibility and sustain the growth of membership: payment of member fees will be easier with monthly debit payments; need for a member as referee may be a barrier as new staff may not be aware who is a member. Highlight ordinary members of ACNN at meetings to increase profile in workplace and encourage applications for membership. More social media on caring for neonates and families. Survey members for what they want/need from ACNN. Need to raise profile of ACNN in units. Reach out to NICUs in each state, profile members and smaller units. Avoid members taking on more than one role. Add recorded testimonials on the website. Have representatives travel to NICUs to promote ACNN. Need to be attentive to long-standing members as well as new ones, and those in smaller units with lower acuity.

10.2 Advocate for the neonatal nursing profession: place information on ACNN website including conferences and training opportunities. Access ACNN resources to promote engagement. Consider collaborating with Neonatal Nurses College Aotearoa but need a pathway. Promote profiles of NICUs across Australia. Collaboration with other groups, for example Australian College of Nurse Practitioners and ANZNN. Establish a fellowship program.

10.3 Support and foster the provision of nurturing care to neonates and their families: various programs such as NIDCAP and FINE may not be available to all nurses. Provide support and mentorship to members of the committee, such as structured mentorship for new members. Development rounds to engage with families.

10.4 Promote excellence in the innovation in neonatal care by setting and endorsing standards for practice, providing opportunities for education, leadership, knowledge translation and research: noted there is a gap with the indigenous health, need resources, also need to understand the experience of indigenous families with a baby in NICU; pilot research is being done at John Hunter Children's Hospital NICU. Let staff know about scholarships, events coming up. Consider sustainability of some SIGs, some becoming smaller, may be possible to merge some. Templates for reporting as standardised forms. Better use of SIG funds to encourage members to attend events. ACNN t-shirts to be made with natural fabrics.

10.5 Establish and strengthen the ACNN profile with collaboration with neonatal nurses, consumer groups, healthcare organisations and professional bodies: attend other non-neonatal events to raise awareness, possibly have a table at conferences. Groups to potentially collaborate with include the Tory Finnane Foundation, Miracle Babies Foundation, and Life's Little Treasures; ask these groups to provide educational sessions. Provide content to social media.

#### 11. Executive roles

11.1 Secretary and public officer: Shelley Reid presented the role of secretary and its responsibilities, which is based on NSW legislation for incorporated associations, with additional responsibilities as required. Noted that

the only 2 roles that are prescribed are for Treasurer and Secretary. The Secretary is usually the first point of contact, is responsible for taking minutes for meetings, keeping records of Executive Board meetings, and communication. If another person has not been appointed as public officer, the secretary is responsible for those duties. The public officer submits annual financial reports to the NSW Office of Fair Trading and registers any changes to the constitution. As ACNN is registered as an association in NSW, the public officer must live in NSW. The secretary is ultimately responsible for processing membership applications, but this may be delegated to an assistant secretary.

11.2 Treasurer: Samantha Lannan presented the role of the treasurer, which is about managing the financial business of ACNN. She receives payments and sends invoices as required, keeps an ongoing report of income and expenditure throughout the year, liaises with the accountant and compiles a report for presentation to members at the AGM. She also makes recommendations on matters such as term deposit terms that yield the best interest rates. Bank account is with Westpac (main account, debit card and term deposits), and processes are assisted by website functions to create invoices and receipts and programs such as Dropbox, Xero for accounting, PayPal and now starting to use the Square device for POS payments. Branches and SIGs have their dedicated funds. Reports can be generated in Excel so specific event payments can be extracted to allocate funds to the appropriate Branch or SIG. Looking at moving to Stripe as moving to recurring payments, such as monthly membership payments. ABN altered due to changes in practices as now required to submit quarterly reports after being registered for GST due to exceeding the limit for mandatory GST. Other responsibility is insurance for events. Samantha suggested an assistant treasurer would be helpful.

11.3 Social media committee: Sarah reported on social media posts and increased marketing activity with most relating to conferences and events. Noted that the committee is small and works differently by interacting with other ACNN subgroups such as the conference committee. Posts require time to create so need to allow time for that when requesting posts. Noted that posts may take time to be available to viewers, so help is required. Platforms include Facebook (largest group of followers), Instagram and Twitter. Highest number of followers are for Facebook then Instagram then Twitter. Presented statistics for each media platform. Numbers of followers vary for each with highest for Facebook, lowest for Twitter. Most popular post on Facebook in 2023 was for NNP week in December, followed by posts in November for World Prematurity Day and the Family Appreciation Award. Highest posting on Instagram was in August for International Neonatal Nurses Day. LinkedIn is set up but requires someone to manage it. Sarah emphasised that a 7-day lead-in to prepare a posting on social media.

11.4 Membership secretary: Nicol presented her newly created role from 2023. Manages and processes applications and provides reports to the Executive and Forum meetings. Reviewed membership over the past year with a steady increase in new and renewing members.

11.5 Ordinary members: not addressed at this meeting.

11.6 Conference chair: Melissah outlined her history as a member, starting with VANN. Noted that experience of not only participating in a conference but also in the conference organisation. Discussed the theme choice, which relates to the venue. Worked with Karen on the program and liaised with speakers. Discussed logistics of planning for speakers, extending invitations to guest speakers. Discussed how to assess venues for capacity to accommodate the delegates and speakers. Planning social activities for delegates. Melissah will document processes, position description and project plan. Call for abstracts open. Discussed how sustainability is being supported, including preventing food wastage. Planning more use of QR codes for poster voting and an electronic passport for exhibitors. Considering how to identify specific people.

11.7 Executive support officer (paid position): Karen New came to the role with extensive experience in various roles to undertake organising activities for up to 12 hours per week. Her role includes developing and managing the website, happy to train others to perform some functions. Karen took on the leadership of the Scholarship committee earlier this year due to Kristen Hughes stepping down for personal reasons. Karen has called for committee members to review applications. Expecting a high calibre of application, which is useful for members to learn for applying for funding from other sources. Also assisting with writing abstracts. Noted that

scholarships are no longer aligned with SIGs as the funds per SIG have been pooled so that more applicants have access. The scholarship is now paid out in instalments, dependent on reports submitted at the end. Discussed whether to notify SIGs if scholarships are awarded in their area of interest. Informed committee members that minutes can be posted on the website. Discussed ways to deliver items to local events.

Meeting closed at 2pm

Accepted as a true and accurate record of the meeting

*Amy Curran*

Amy Curran  
Meeting Chair and President  
13/05/2024