Greetings from the FPNL Chairperson’s Desk

For The Forum for Professional Nurse Leaders this is an exciting day for this first edition of our own newsletter is a longtime dream coming true. The newsletter will be our own way of communicating with our members to keep you updated on interesting nursing and leadership related issues.

Founded on 28 February 1996, the FPNL was born out of a need expressed by Nurse Managers. The Forum would take up and champion industry nurse leadership issues through an alliance between the public and private sectors, with the aim of implementing solutions which benefit nursing and to deliver world-class healthcare.

The Forum launched a campaign ‘Nurses on Purpose’ in 2007 and this theme will be the main drive for the newsletter for the next year, as one of the pillars identified as the basis for an effective campaign going forward is “Communication with a different tone”.

Communication within the Forum was

The Constitution of the Forum for Professional Nurse Leaders (FPNL) has been amended earlier in the year. The revisions to the Constitution were put to the vote by the members of the FPNL and supported by the majority of the members who voted.

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Provincial meetings and branches will be revived. The Exco members will be visiting the provinces over the next few months. Meetings have been scheduled for the following places:

• Polokwane - 10 September 2009
• Cape Town - 20 October 2009
• Durban - October 2009
• Free State - November 2009
• Gauteng - November 2009

You are invited to attend these meetings which will last approximately 2 – 3 hours. Membership forms will be available at those meetings or you can send a mail to info@fpnl.co.za to get an application form. Membership is R150.00 per annum.

Join us and strengthen the collective voice of nurse leaders in South Africa - we can only do this with many of us joining the Forum.
Outgoing SANC Registrar

Hasina Subedar has stepped down from the position of Registrar at the South African Nursing Council (SANC) at the end of June 2009. Hasina has made history in many aspects when she was appointed into this position in September 2000 in that she was the first nurse, first woman and the first woman of colour to fill this position since the inception of the Nursing Council in 1944.

She did her diploma in general nursing and midwifery at the Nico Malan Nursing College at Groote Schuur in Cape Town followed by a diploma in psychiatric nursing at the Iris Marwick Nursing College. She continued her studies at the University of Natal where she obtained an advance diploma in education, B Social Science, B Hon and M Cur degrees. More recently in 2008 she has completed the Edward Masons Certificate in Public Policy and Management and Masters in Public Administration, Kennedy School of Government, Harvard University.

As qualified nursing practitioner she has worked as professional nurse in a variety of clinical areas. In 1986 she joined the staff establishment of Community Mental Health Services: Department of Health: House of Delegates. From 1991 she worked as lecturer at the University of Natal before she moved to the Western Cape to take up the position for Deputy Director Mental Health Programme in 1995 from where she moved to take up the position of Registrar of the Council. In this position Hasina has made a significant contribution to the development and proclamation of the new Nursing Act.

Hasina, as nurse leaders we thank you for your significant contribution to the nursing profession and wish you well with your future endeavours!

Acting SANC Registrar

Sizeni Angel Mchunu has been appointed as the acting Registrar of the South African Nursing Council (SANC) in July 2009 until such time as the new registrar is appointed. She has been in the position of Deputy Registrar: Professional Affairs at the Nursing Council since March 2007.

Sizeni was born in the highlands of KZN and did her basic diploma as general nurse and midwife at McCord Hospital in Durban. She went on to obtain a post graduate diploma in nursing education, BA Cur and BA Cur Hon degrees at the University of South Africa followed by a Masters of Nursing in Education at the University of Zululand.

During her professional career she has worked as professional nurse in McCord, Gelukspan and St. Mary’s Hospitals. She worked as tutor at the Mariannhill Nursing College for 6 years before she joined the University of Zululand in 1996 where she stayed until she joined the SANC as the Executive Manager Education & Training in August 2002.

Sizeni, from the Forum for Professional Nurse Leaders, we wish you well with this challenging and demanding portfolio!

ICN 24th Quadrennial Conference in Durban

Durban, July 2009 - a once in a lifetime event took place in Durban during June/July - the International Council of Nurses’ (ICN) 24th Quadrennial Conference was hosted in South Africa. This was the first conference which took place on the African continent in the 110 years’ existence of the ICN. Those who could attend this event were indeed privileged to share in the historical event!

The conference was attended by more than 5,000 nurses from all over the world - what a wonderful opportunity to establish and build worldwide networks to share experiences and best practices and to learn from each other!

The conference programme featured four plenary sessions, 30 main sessions, 70 symposia, 490 concurrent session presentations (4 - 5 presentations per session) and 800 posters. Many of our nurses used the opportunity to share with the world what we are doing in Africa and South Africa to improve the health of our nations.

Some of the important debates focused on task shifting, migration, HIV&AIDS, regulation in nursing, a variety of workshops including writing skills, immunization, regulation and professional conduct hearings and meetings of the ICN networks. Go to www.icn.ch to see all the networks that any of us can be involved in.
**H1N1 virus or “Swine flu”**

The H1N1 virus or swine flu has claimed its first casualties in South Africa with the highest number of fatalities amongst young people and pregnant women. Everyone has to be vigilant about her/his health and the health of those around us.

While this flu was originally labelled Swine flu, laboratory tests have shown that this virus is different from the virus that normally circulate in North American pigs. It contains genes from flu viruses that normally circulate in pigs in Europe and Asia and avian genes and human genes.

**Symptoms of H1N1 flu**

The symptoms of novel H1N1 flu virus in people are similar to the symptoms of seasonal flu and include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. Many people have also reported diarrhea and vomiting. Severe illnesses and death has occurred as a result of illness associated with this virus.

High risk populations for this virus includes pregnancy and other previously recognized medical conditions that increase the risk of influenza-related complications, like asthma and diabetes. One thing that appears to be different from seasonal influenza is that adults older than 64 years do not yet appear to be at high risk. The majority of deaths worldwide were between 5 - 24 years old.

**Spread of the virus**

Flu viruses are spread mainly from person to person through coughing or sneezing by people with influenza and one cannot get H1N1 virus through preparing or eating pork or pork products.

People may be contagious from one day before they develop symptoms to up to 7 days after they get sick. Children, especially younger children, might potentially be contagious for longer periods.

**Protect yourself and others**

Some guidelines for the general public to protect themselves have been issued by world health authorities:

- Avoid crowds.
- Try to avoid close contact with sick people where possible.
- Apply the general principles of infection control.
- Cover your nose and mouth with a tissue when you cough or sneeze and discard the tissue in the dustbin.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread this way.
- Stay home if you are sick for 7 days after your symptoms begin or until you have been symptom-free for 24 hours to keep from infecting others and spreading the virus further.
- Follow public health advice regarding school closures, avoiding crowds and other social distancing measures.

Be prepared in case you get sick and need to stay home for a week or so; consult your doctor or clinic, get sufficient alcohol-based hand rubs, tissues and other related items could be useful and help avoid the need to make trips out in public while you are sick and contagious.

**What can nurse leaders do?**

The most important aspect is to identify and prioritise high risk population groups or areas for disease (those areas that are crowded or closed settings) or high risk for death (those persons with underlying disease, pregnancy or poor access to healthcare).

Reduce death by treating acute respiratory illness or pneumonia by:

- increasing awareness amongst personnel and capacitating them to identify, triage, classify and treat acute respiratory illness and pneumonia according to national protocols.
- planning for buffer stock of medical supplies such as paracetamol, antibiotics, and oxygen at both in and outpatient departments - the recommended buffer is 30%.
- educating and informing the community about the home-care of the symptoms of non-severe influenza-like illness, including diarrhea and dehydration. Include voluntary separation of the sick and when to seek healthcare.
- ensuring the use of antivirals where it is accessible to people.

Reduce the spread of the disease by preparing and disseminating risk communication messages. These messages should promote home-care for mild illness, reduced time in crowded settings, respiratory etiquette and hand washing.

Prepare to continue critical services while also strategising for worst case scenarios. This includes having buffer stock of essential medicines for the treatment of other serious diseases such as diarrhoea, HIV, TB, malaria. But it also includes managing the maintenance of the provision nursing and health care in the event that many nurses may fall ill and go on sick leave.

Incorporate pandemic activities into existing coordinating mechanisms such as information systems. Collaborate with other sectors, services or companies in the development of strategies to manage the pandemic.

(Adapted from ICN Call to Action, Aug 2009 available at www.icn.ch)
**Book review:**

By Annelie Meiring

**SAVING LIVES. Why the media’s portrayal of nurses puts us all at risk**

Sandy Summers and Harry Jacobs Summers

Kaplan Publishing, 2009

*Saving Lives* highlights the important role that nurses play in the healthcare system worldwide. The essential services managed by nurses are often the only healthcare available for communities and means the difference between life and death for many people. *Saving Lives* explores the influence the media has on the nursing profession and discusses how most media portrayals fail to convey that nurses are well-educated professionals who save lives. *Saving Lives* discusses in detail how popular TV shows like Grey’s Anatomy and House do not portray the real role nurses play in the treatment and care of patients. The trend to only include a nurse in a show as part of a romantic plot or to emphasize the superiority of the doctor is highlighted by the authors.

The perception of the public and how these perceptions were formed are an essential part of the discussions in the book. The inspiring part of the publication is, however, that it does not only highlight all the challenges and issues within the media portrayal, but also gives detailed ways of addressing these issues. The nurses themselves must play a leading role in improving the image of the profession. This includes changing everyday habits and to start living a professional image in our daily dealings with patients and the public.

“Changing the way the world thinks about nursing may require a superhuman effort”. This task is a lot easier if we all participate and start to empower nurses to get the respect they need.

A book that every professional nurse must read and can be used in the classroom for discussion groups when teaching ethics and professional practice. A real means of educating the value of nursing in society.


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**A thought for the season…**

Gratitude takes three forms

A feeling in the heart, an expression in words, and a giving in return

- Julie Otlewis -

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**Save the date!**

‘Nurses on Purpose’ continues its drive to champion leadership in nursing with the FPNL conference in May 2010.

Be sure to save these dates so that you can attend this important event! Watch this space for more information!

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