Delivering urology services in New Zealand



Nurse-manager writes on the challenges of working for a remote community in northern New Zealand



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I am a nurse/manager for Northland Urology in Whangarei, New Zealand, (approximately 200 km north of Auckland). At present I am the only member of the NZ Urological Nurses Society from Northland, and currently hold the position of the vicechairperson. My husband, Tony Nixon is a urologist and since we both wished to live by the sea and work in a smaller community-focussed centre, this brought us 15 years ago to Whangarei.

Northland, with a population of almost 160,000 is New Zealand's least urbanised region and half of the population live in rural areas. About 32% of the population is the indigenous Maori, and the region is considered as one of the country's most socioeconomically-deprived areas. It is not uncommon for our patients to arrange clinic appointments around the tides - yes the beach at low tide is the only way out from some of the most remote areas. They then face a six-hour journey for a 15-minute appointment.

The two urologists who provide the service to this region can be described as "general urologists" since they do everything from trauma, paediatrics, incontinence, stone management to radical cystectomies. NZ citizens get free secondary (hospital) care and subsidised primary health care. Few people in Northland have private medical insurance. You will not find "robot" equipment in our hospital since the budget is tight and our needs are great.

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Whangarei Hospital is the Northland District Health Board (NDHB) "base" hospital with three further regional hospitals in Kaitaia, Dargaville and the Bay of Islands. We have six operating theatres and one endoscopy suite in Whangarei, and two smaller operating theatres in Kaitaia where only day-stay procedures are performed. All urological procedures are carried out here in Whangarei. We do not have a designated urology ward, but instead we have two surgical wards with a total of 58 beds.

Although the urologists provide various types of urological surgery, they do at times transfer some of the more complex cases, such as those requiring major vascular reconstruction during surgery, to Auckland. We have an excellent paramedic helicopter service, which is a necessity considering our large geographical area and remote access.

A welcoming place

As nurse/manage, I run both the public urology outpatients and our private practice. Shortly after moving to Whangarei we set up the company 'Northland Urology' and contracted to the local district health board to provide all urology outpatient services. Our clinics are housed in a specially-modified house, with a beautiful garden where families often gather while waiting for the appointments of their relatives. The rooms were opened and blessed by our local Kaumatua (Maori elder). This not only recognises the spiritual well-being of our Maori patients but all of our patients. We believe clinics need to be welcoming places since the people who come are often anxious and concerned, particularly when the news they receive about their health is not good. It is a very beautiful and peaceful place to work and not a day goes by that a patient fails to compliment us about this.

There are three nurses in our team, though I am the only one who works full time. We run six public outpatient clinics between the two urologists, and three are also attended by our registrar. The clinics attend to various patients and include minor room-based procedures such as prostate biopsies, flexible cystoscopies, stent removals, urodynamics,



Our clinics are housed in a specially-modified house

BCG instillations and catheterisations. We also undertake urology research that usually involves phase III and open label trials. Recently, I have been joined by a second study coordinator who is also a pharmacist and whose expertise is invaluable.

Tony and I undertake a number of medical study days and community information evenings each year. These activities range from an audience of 1,000 men in the local sports stadium to a "chat" over dinner with a dozen members of an isolated rural community in their local hall. We get to see Northland's most beautiful areas that are off the beaten track and meet the most wonderful people.

Our newest team member is a nurse specialist in prostate cancer. We evaluated our service and felt this was an area where we could make some improvements. Prostate cancer is an increasing part of our work load with our patients getting younger. Our local cancer society is also very pro-active and felt that they too could use someone with specific training. The position is a job share between our two organisations and is working really well with positive feedback from our patients.

Our phones are always on and our team accessible. Patients, be they public or private, are provided the services as the need arises. Our fellow consultants and general practitioners have direct access to a urologist or nurse, and they say that the urology service provided here in Northland is second to none.

EAUN Board

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We are truly blessed with the community in which we live, and a vocation that has immeasurable rewards.

I would like to acknowledge the assistance of Patrick Whiu as my Maori advisor as I end this article with some Maori sayings:

E Hara taku toa I te toa taki tahi

My success is not as a result of me alone.

E ngari taku toa he toa taki tini

However, my success is as a result of many

Te tumanako kia tau nga tini manaakitanga o te Atua ki runga La koutou katoa

May the blessings of almighty be bestowed upon one and all.

EAUN around the world

The EAUN Board have been involved in or attended the following activities throughout the world recently:

September 2012 Irish Society of Urology Annual

Meeting, Belfast, Ireland

ERUS Congress, London, September 2012 **United Kingdom**

October 2012 **AEEU Annual Meeting,**

Madrid, Spain

Is your National Society organising a meeting and would you like the EAUN to be present? Contact our chair at k.fitzpatrick@eaun.org

14th International Meeting of the European **Association of Urology Nurses (EAUN)**

in conjunction with the 28th Annual EAU Congress

16-18 March 2013, Milan, Italy

www.eaumilan2013.org



Preliminary Programme Friday (pre-congress)

13.00-15.00 Hospital visits*

Saturday, 16 March 2013

08.15-08.30 EAUN Opening

EAUN Workshop 08.30-09.45

> **Catheterisation - Intermittent** catheters **EAUN Workshop**

Complimentary medicine in oncology

08.30-10.30 Writing evidence-based guidelines Followed by panel discussion on

Clinical development in practice 10.00-10.30 State-of-the-art lecture

10.45-12.30 **EAUN Workshop** Bladder instillation for interstitial

EAUN Workshop 10.45-12.30 Implementation of healthy lifestyles in urology pathways

EAU-ESU Course - 1

Prostate Session

Part 2 - Oncological

cystitis/radiation cystitis

13.15-13.45 Poster viewing 13.45-15.00 **Poster Abstract Session**

Prostate Session Part 1 - Benign EAU-ESU Course - 1 14.45-15.45

European Association of Urology

15.00-15.45 State-of-the-art lecture

16.00-17.00 Sponsored session

17.00-18.00 Welcome reception

Sunday, 17 March 2013

EAUN Market Place Workshop Shopping for tools Embarrassing issues in urology

08.30-09.15 Lecture AIURO

09.30-10.30 EAUN Workshop Nursing solutions in difficult cases: Case studies

Overactive bladder syndrome/

The online diary for patients -

11.00-12.00 Research Competition 11.00-12.00 Panel discussion

nocturia/pelvic floor issues Debate & panel discussion 12.00-13.00 PCa Screening

State-of-the-art lecture 12.00-12.30 The gender aspect

communication tool 13.45-14.45 Operating Room Nurses Session

13.45-14.45 State-of-the-art lecture Pre-operative interventions/ nutritional aspects

15.00-15.30 Poster viewing

12.30-13.00 Lecture

15.00-16.00	Panel discussion Bladder cancer
16.00-16.45	Lecture Who takes care of the caretake
17.00-18.00	Sponsored sessions
Monday	27 February 2012

15.30-16.45 Poster Abstract Session

Monday, 27 February 2012

EAU-ESU Course - 2 **Bladder Session** Part 1 - Benign EAU-ESU Course - 2 **Bladder Session**

Part 2 - Oncological State-of-the-art lecture 11.00-11.45 Palliative care in urology

11.45-12.15 Lecture Transition from childhood to adult urology **EAUN General Meeting (AGM)** 12.15-12.45

13.15-13.45 State-of-the-art lecture Brachytherapy in urological cancer 13.45-14.30 State-of-the-art lecture

Urological disorders and surgical problems **Award session** 14.45-15.00

State-of-the-art lecture

Penile carcinoma 16.00-17.00 Sponsored session Lawrence Drudge-Coates, London (UK) Veronika Geng, Lobbach (DE) Susanne Hieronymi, Frankfurt (DE) Susanne Vahr, Copenhagen (DK)

Bente Thoft Jensen, Århus (DK) Willem De Blok, Amsterdam (NL)

EAUN Board members Kate Fitzpatrick, Dublin (IE)

Call for Abstracts, **Difficult Cases and Research Plans Deadline:** 1 December 2012

* Limited places are available and registration will be on a first-come. first served basis through the online

European Urology Today August/September 2012

Join our search for Nursing Solutions in Difficult Cases

If you are among those who encounter atypical cases in daily practice and have found your own solutions, we would like to invite you to take a few photos and write a standard protocol. You can download a form with a list of standard questions. The form should include a description of the problem, the nursing intervention provided, the material you have chosen to help the patient and the final results. Please note: Difficult Cases that have not been (completely) solved may also be submitted!

Share your expertise

Together with the EAUN you will share and pass on this knowledge to other nurses. The cases will be evaluated by an international expert jury. The 10 most interesting cases are presented by the authors and discussed with the audience in a special session at the 14th International EAUN Meeting in Milan. The EAUN will place the material on their website as a unique opportunity to learn from each other. All submissions that meet the criteria will be published on the EAUN website and in European Urology Today.

Some of the Submission Criteria and Rules

- The authors and presenter of this Difficult Case must be registered nurses
- The topic selected must be of relevance to urology nursing interventions in Difficult Cases
- The case is illustrated with photos of the problem and the solution (if any), preferably 2-5 photos
- The solution described in this Difficult Case is your own solution and a nursing intervention
- The case is presented in a completed submission form accompanied by a written patient consent
- When invited to present the Difficult Case in Milan you will present the case using the EAUN Difficult Cases slides

All criteria can be found at the Milan website: www.eaumilan2013.org/14th-eaun-meeting

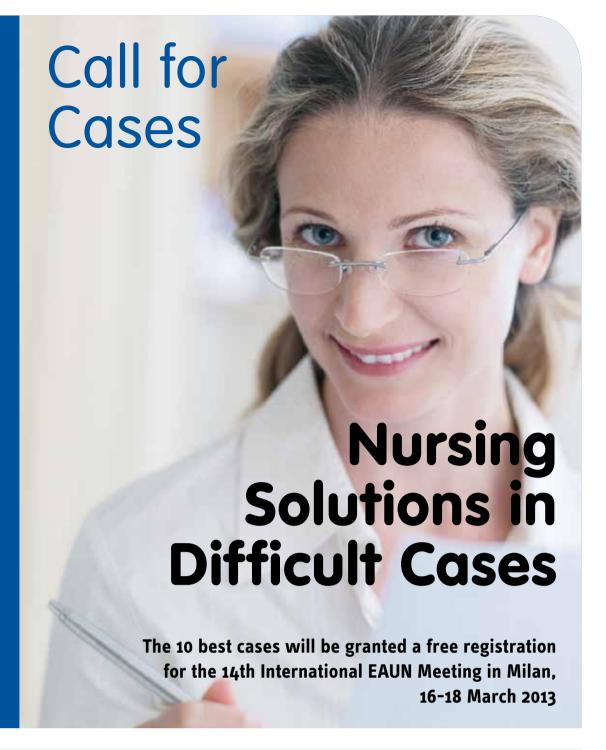
How to apply

- Please check the special page on Difficult Case submission at the congress website for full details.
- For more information you can contact the EAUN Office at eaun@uroweb.org

Submission deadline: 1 December 2012

Join our search for the best nursing solutions! We are looking forward to your contributions!





Do you have an idea for a project that will......

- Improve the quality of your daily work in urology care
- Turn a new or unique aspect of nursing care into a research project
- Evaluate developments which have taken place in your urological field Turn practical clinical issues in nursing into a research project to help resolve
- Or do you have a small practical project which you would like to develop into a research project

.. then we invite you to submit a research project proposal for the EAUN Nursing Research Competition.

You can find the full details of the submission process and details of previously submitted research project plans on our website. The winner in 2012, H. Cobussen, for example, submitted the project: "Which factors make clean intermittent (self) catheterisation successful"

During the 14th International EAUN Meeting in Milan (March 2013), all projects of the nominees will be discussed in a scientific session, enabling all participants to learn through feedback and discussions. If English is not your first language do not let this deter you from submitting a research proposal; the jury are well aware that it is much more difficult to write such a proposal in a foreign language, and your proposal will be judged on its merits.

A winner chosen from the final six nominees selected by a jury, will receive € 2,500 to (partly) fund the research project.

To be eligible participants must comply with the following:

- Be a registered nurse
- The project must not have started at the time of submission
- The proposal, the presentation and the project must be undertaken by the submitting nurse
- The topic selected must be of relevance to urological nursing
- The results of the prize-winning research project will be published in European Urology Today and on the EAUN website and the winner is invited to present the results or parts of the result at the next International EAUN Meeting.

All details regarding participation and criteria for submission can be found at the Milan website: www.eaumilan2013.org/14th-eaun-meeting/

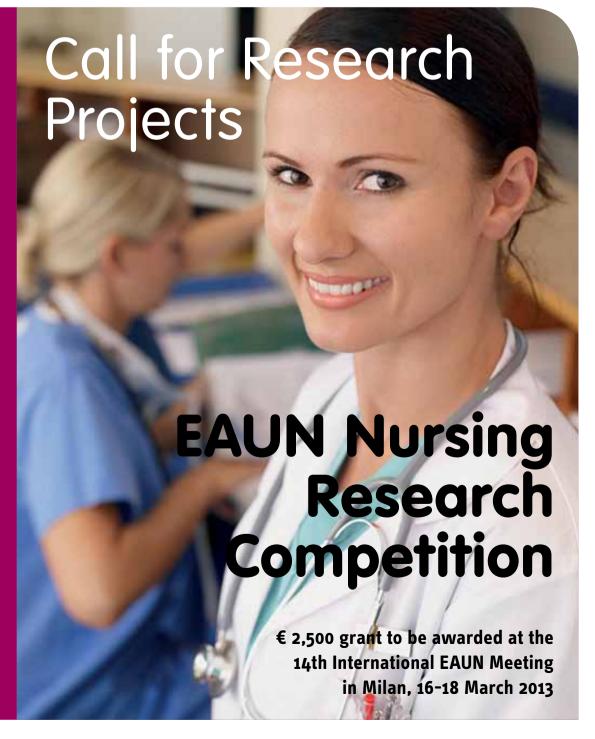
For more information you can contact the EAUN Office at eaun@uroweb.org

Submission deadline: 1 December 2012

We hope that you will not miss this opportunity. Remember, nursing research small or large can still change the urological world!



of Urology Nurses



European Urology Today August/September 2012