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Join a nursing group that disseminates information and promotes communication between national and international organisations related to the field of developmental intellectual disability.

The Professional Association of Nurses in Developmental Disability Australia Inc. (PANDDA) represents the professional interests of nurses who support people who have an intellectual developmental disability.

Join and pay online or download the application form at www.pandda.net

Life Members

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Nathan Wilson



Convenor's Welcome

It is with the greatest of pleasure that the PANDDA conference committee welcome you to Sydney and Parramatta for the 34th Annual National PANDDA Conference and Annual General Meeting. We meet on the lands of the Dharug people.

The theme for this year's Conference is Embracing Partnerships in Health Care: Access and Inclusion. Our Specialities – Our Nurses – Our Future.

You will see that the PANDDA conference committee has assembled an inspired and passionate group of presenters and you will discover the work of the keynote, invited and program speakers to be both inspiring and extraordinary. You will hear from people with lived experience, families, nurses and medical specialists in the areas of clinical, management, research and education. Experts who are leading with passion and purpose including advocating the abilities of people with intellectual developmental disabilities to live their best life. We are pleased to announce that The Hon. Ged Kearney Assistant Minister for Health and Aged Care will Open the Conference.

As always, you will have the opportunity to debate, contribute and discuss the topics being presented and there will be ample opportunities to catch up with familiar faces and make new connections during the conference, networking is and will remain an important forum within the Annual PANDDA Conference. The PANDDA Annual General Meeting will be held during the conference this is your opportunity as a member to join and consider taking on a committee position and contribute to the profession of nursing in developmental intellectual disabilities.

So come and celebrate bring your stories your passion and your commitment to people, their families and

PANDDA; change is but an opportunity and nurses are involved in embracing and developing new and exciting health partnership's much is happening and there are many stories to be told and heard.

Thank you for your attendance at the PANDDA Conference and thanks also go to your employers who have continued to value and support nurses, and care workers to attend the Annual National PANDDA Conference.

My sincere thanks go to the PANDDA Conference Committee and the PANDDA Committee who have been working toward this conference for the past 15 months my congratulations to you all in delivering what is set to be a truly extraordinary PANDDA conference.

Our sponsors have once again been generous and willing partners. My thanks to Insiya and the Events Team and the Management here at the Novotel Sydney Parramatta for their continued helpfulness in organising the venue and to the Team at Encore Technical who have continued to work with the committee to provide the best technical coverage at a reasonable rate for PANDDA.

PANDDA looks forward to meeting with you all during the conference on the 25 and 26 September 2023 at the Novotel Hotel Parramatta.

I trust you will you leave the 34th Annual National PANDDA Conference feeling enthused and you will be able to use knowledge learned to develop and embrace new healthcare partnerships in your roles as nurses supporting and caring for people with intellectual developmental disability.

Warm Regards,
Bob Weaver OAM
on behalf of the PANDDA Conference Committee



President's Welcome

Welcome everyone to the Professional Association of Nurses in Developmental Disability 34th Annual Conference.

Once again, the PANDDA Conference Committee has created a great and inspiring program for everyone to enjoy and learn from. As always, a highlight of every PANDDA conference is the opportunity to meet, interact, laugh and talk about nursing together under the one roof. It will be great to hear from Professor Julian Trollor about the newly funded Centre of Excellence and also from Drs Peter Lewis and Kath Weston about the PANDDA-funded oral history project. We also have some new nurse presenters this year and it will be wonderful to hear about the diverse work that nurses do to help people with intellectual and developmental disability lead the best life possible.

A big thankyou to Bob Weaver and the PANDDA Conference Committee for all of the hard work that goes on behind the scenes. As always, the conference is not possible without the support of our sponsors, and we thank our sponsors for their support this year.

The PANDDA annual general meeting will be held during the conference. This is an important meeting where a new committee will be elected and I urge all PANDDA members to consider becoming a part of the PANDDA committee. New ideas and diverse impetus are always needed and welcome.

On behalf of the PANDDA executive, we hope that you will not only enjoy this conference and the time to connect with like-minded peers, but also to embrace the continuing professional development opportunities our wonderful speakers offer. Once again, a sincere acknowledgement to you all for the work that you do supporting and caring for people with intellectual and developmental disabilities, their families and their key supporters.

Professor Nathan Wilson, PANDDA President

Major Sponsors





Other Sponsors







34TH PANDDA CONFERENCE 2023



Day 1. Monday 25 September 2023

8.15am	ARRIVAL		
	Registration, Coffee and Tea in the PANDDA Club Lounge		
	Photographers will be present throughout the Conference.		
	If you do not wish to have your photo taken, please inform the photographers.		
8.50am	ACKNOWLEDGEMENT TO COUNTRY		
	Denise Robinson, PANDDA Committee		
9.00am	WELCOME		
	Bob Weaver OAM, PANDDA Conference Convenor		
9.10am	WELCOME MESSAGE		
	The Hon. Ged Kearney, Assistant Minister Health & Aged Care (Video Presentation)		
9.15am	KEYNOTE SPEAKER		
	Professor Julian Trollor 3DN UNSW		
	Chair: Gail Tomsic, Vice President PANDDA		
10.00am	SPONSORSHIP ACKNOWLEDGEMENT		
	Dr Laurel Mimmo, PANDDA Conference Committee		
10.15am	MORNING TEA		
	Visit Trade Displays and Network in the PANDDA Club Lounge		
11.00am	INVITED SPEAKER		
	Frank Marzo, Director Healthcare Consulting (NDIS made simple)		
	Chair: Jennifer Bur, PANDDA Committee		
11.35am	SELF EMPLOYMENT FORUM		
	"Nurses – doing it for themselves"		
	Cristina Blanch and Carla Watson, Tasmania; Jayne Lehmann, South Australia; Sharon Paley, Queensland; Jodie Thompson, New South Wales; Louise Hedges, New South Wales; and Sharon Baillie, New South Wales		
	Chair: Jennifer Bur, PANDDA Committee. Facilitator: Frank Marzo, Healthcare Consulting.		
12.35pm	LUNCH		
	Visit Trade Displays and Network in the PANDDA Club Lounge		



Day 1. Monday 25 September 2023

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Macey Barratt RN, PhD Candidate	with disability
	2. Dr Natasha Jojo RN
description of the Australian disability nursing	
	Exploring the Uncompromised Impact: A Sexual
orkforce using census data from Ahpra 2022	Abuse Prevention Program with No Negative Effects"
Gemma Ridley RN and Jennifer Brennen RN	3. Elisha Deegan RN, PhD Candidate
ostering collaboration between Primary Care and	Preventing and responding to sexual violence against
e Disability Sector to improve preventative health	people with disability
utcomes for people with intellectual disability	
	4. Sharon Baillie RN
	Empowering ability through Continence Care:
	A Private Practice Nursing Perspective
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Day 2. Tuesday 26 September 2023

8.20am	ARRIVAL Registration, Coffee and Tea in the PANDDA Club Lo	ounge
8.50am	ACKNOWLEDGEMENT TO COUNTRY Denise Robinson, PANDDA Committee	
9.00am	WELCOME Bob Weaver OAM, PANDDA Conference Convenor	
9.10am	KEYNOTE SPEAKER Professor Alison McMillan PSM, Chief Nursing and M Chair: Gail Tomsic, Vice President PANDDA	Midwifery Officer Australia
10.00am	MORNING TEA Visit Trade Displays and Network in the PANDDA Cl	ub Lounge
10.45am	INVITED SPEAKER Tracy White, Specialist Support Coordinator and Mu Chair: Virginia Howie, PANDDA Committee	um of Harry
11.30am	PROGRAM SPEAKERS (Concurrent Sessions)	
11.30am	CONCURRENT 1: LENNOX	CONCURRENT 2: MADISON
	Chair: Dr Natasha Jojo PANDDA Conference Committee	Chair: Denise Robinson PANDDA Committee
	1. Dr Gillean Hilton OT	1. Janet McLeod RN
	Service improvements to address barriers to accessing healthcare at Austin Health, for people who are Neurodivergent	The nurse role within an NDIS Service provider using an understanding of social model of health to build a web of support enabling people with a disability to have improved health outcomes
	2. Michelle Templeton RN	2. Laura Cooney RN
	Disability Health Access Service – a tiered model of care enabling access to preventative healthcare for people with intellectual disabilities	Collaborating care in rare genetic disorders – A case study
	3. Dr Gillean Hilton OT	3. Jennifer Bur RN, PhD Candidate
	Developing targeted staff education and training by understanding disability awareness at Austin Health	The exploration of the perioperative care experiences and reasonable adjustments for people with intellectual disability within Australia



Day 2. Tuesday 26 September 2023

12.40pm	LUNCH
	Visit Trade Displays and Network in the PANDDA Club Lounge
1.20pm	PANDDA ANNUAL GENERAL MEETING
	Chair: Gail Tomsic, Vice President
2.00pm	Barriers and opportunities for improved hospital admission and discharge for people with disabilities
	focussing on partnership solution opportunities across health, disability and NDIA
	Heather McMinn RN and Janet McLeod RN
	Chair: Sharon Paley, PANDDA Committee. Presentation and interactive discussion.
3.10pm	AFTERNOON TEA
	Network in the PANDDA Club Lounge
3.25pm	INVITED SPEAKER
	Jayne Lehmann RN, EdHealth
	Chair: Maree McCulloch, PANDDA Conference Committee
4.10pm	PANDDA AWARDS
	Chair: Virginia Howie and Julie Gibson, PANDDA Committee
4.30pm	REFLECTIONS AND CONFERENCE CLOSE
	Invitation to Farewell Reception in the PANDDA Club Lounge
	Bob Weaver, PANDDA Conference Convenor
	Bob Weaver, 17 WBB/Conference Convertor



INVITATION TO THE 35TH PANDDA CONFERENCE

Monday 14 and Tuesday 15 October 2024, Novotel Parramatta "Through the Looking Glass... Wisdom, Reflection, Experience

"Through the Looking Glass... Wisdom, Reflection, Experience 10 years on!"

Conference Co-Convenors: Sharon Paley and Bob Weaver



Conference Opening

We are pleased to announce that the **Hon Ged Kearney MP**, Assistant Minister for Health and Aged Care will open the conference and welcome conference attendees.



Hon Ged Kearney MP

Ged Kearney is the Federal Member for Cooper and the Assistant Minister for Health and Aged Care. Ged has served in the parliament since March 2018, when she was elected in a by-election. She is the first woman to hold the seat.

Ged started her working life as a nurse and rose to become Federal Secretary of the Australian Nursing Federation. From 2010, Ged served as the president of the ACTU – the peak body of Australia's union movement – where she fought for better conditions for Australian workers.

Ged's working life – from nurse to President of the ACTU to parliamentarian – has been about fighting for the rights of others.

She is a strong voice for social justice, workers' rights and universal healthcare inside Labor and the Parliament. Ged is a passionate advocate for the environment and throughout her career she has supported a humane response to refugees.

Ged was born and raised in Melbourne and lived in Cooper for over 25 years. Ged has four children, two stepdaughters and five much loved grandchildren.



Keynote Speakers



Professor (Practice) Alison J. McMillan PSM

As the Commonwealth Chief Nursing and Midwifery Officer Alison provides high-level strategic policy advice to the Australian Government and the Executive and staff within the Department of Health and Aged care on nursing, midwifery, health system reform, health workforce, regulation and education.

Alison has been a Registered Nurse for more than 40 years, she has a Critical Care Nursing Certificate, a Bachelor Degree in Education, and a Master of Business Administration. Alison has held senior executive roles in government and health services within Victoria including the Chief Nursing and Midwifery Officer, Director of Quality, Safety and Patient Experience and Director of Health Emergency Management.

She has received a number of awards including a Public Service Medal in June 2021 for outstanding public service to driving the Government's national health response priorities during the COVID-19 pandemic, particularly to infection prevention measures, a National Emergency Medal in recognition of service following the 2009 Victorian Bushfires and, in 2021, a Humanitarian Overseas Medal.



Professor Julian Trollor

Chair, Intellectual Disability Mental Health & Head, Department of Developmental Disability Neuropsychiatry; Professor and NHMRC Leadership Fellow, Discipline of Psychiatry and Mental Health, UNSW Medicine & Health

Julian and his 3DN team work to improve health policy, practice and supports for people with an intellectual or developmental disability. The team is involved in teaching, training, health promotion, and the development of educational resources. 3DN conducts research with high translational benefit to the disability and health sectors and provides consultancy of the highest standard, including clinical consultations, advocacy and contributions to policy and legislative reviews.

Further details and resources are available at https://3dn.unsw.edu.au. Follow 3DN on twitter @3DN_UNSW.





Peter Lewis

Dr Peter Lewis joined the School of Nursing and Midwifery at Hawkesbury Campus in 2015 and has held the position of Director of Academic Workforce (Hawkesbury) since 2017. His professional career was based in paediatrics where he accumulated a wide variety of experience in respiratory care, adolescent health, and research and practice development. He is a member of the School of Nursing and Midwifery Disability Research Stream and has collaborated on multiple projects studying workforce composition, roles, and responsibilities of registered nurses working with people with intellectual disability. He is a friend of PANDDA who has collaborated with Professor Nathan Wilson on the generation of evidence that led to the recent publication of the current PANDDA Standards. He is currently leading a research project investigating the history of nursing in intellectual disability in Australia, 1960–2016.



Associate Professor Kath Weston

Associate Professor Kath Weston comes from a strong research background in immunology and cell biology, having worked in universities in the USA and Australia. She has also been employed as a senior infectious diseases public health officer with NSW Health in western Sydney, with experience in disaster management, epidemiology, and health protection. Her academic career at the University of Wollongong saw her gain a national and international reputation in medical education and building research capacity of health professional students. Now retired, Kath is an Honorary Associate Professor, and an international public health consultant. Her continuing research interests include the history of public health and infectious diseases and the history of prison medical service in New South Wales. She is a member of the Australian Medical Council's population health and ethics writing group.



Invited Speakers



Frank Marzo
Director Healthcare Consulting (NDIS made simple)

Frank Marzo is the driving force behind Healthcare Consulting, an organisation with a clear mission: to support NDIS (National Disability Insurance Scheme) providers and newcomers in the disability sector. His goal is to equip NDIS providers with the knowledge and tools necessary to deliver top-quality services and outcomes. This includes guiding clients through the registration process, assisting with policy and procedure development, conducting gap analyses, and ensuring compliance with NDIS quality standards.

The guidance provided by Frank and Healthcare Consulting is invaluable as it empowers providers to offer the best possible care, ultimately safeguarding the well-being of NDIS participants. Their approach is firmly grounded in upholding the highest standards of integrity and compliance. Frank also places a strong emphasis on personalisation and delivering high-quality service, dedicated to helping clients achieve their goals and, most importantly, making a meaningful difference in the lives of individuals living with disabilities.



Tracy White

Specialist Support Coordinator and Mum of Harry

Focus of Discussion: Transition of health services paediatric to adult with a child who has complex disability and health conditions

Tracy is a qualified primary teacher that has transitioned from education into the disability sector as a NDIS Specialist Support Coordinator with Harry's Help Disability Support following her lived experience as a parent of a child with a complex disability. Drawing on her professional knowledge and lived experience, Tracy adopts a dignified and authentic, person-centred approach to the implementation of NDIS supports within an interagency model of care.

Tracy's areas of focus are the support of people with complex disability in the community; in particular, children and young people with intellectual disability and complex health issues who live at home with family or alternatively in the Out of Home Care environment. In her role, Tracy help's to establish processes that enable communication, cooperation, and collaboration within a person's network of funded and non-funded supports – mainstream and NDIS.

Harry's Background: Harry (17 years), the namesake of Harry's Help Disability Support is the son of Tracy. Harry suffered a complex Acquired Brain Injury due to Meningoencephalitis in early childhood and was later diagnosed in adolescence with a rare genetic condition further impacting his development and subsequent disability.

Harry was one of the first paediatric participants in Sydney transitioned from the Ageing Disability and Home Care (ADHC) scheme to the National Disability Insurance Scheme (NDIS). The transitional journey was not an easy one to navigate; leading to multiple reviews, appeals and finally the Administrative Appeals Tribunal (AAT). Harry is now actively transitioning from the paediatric to adult services in healthcare.





Jayne Lehmann
BN(Ed) DipAppSc(Nsg) FADEA RN CDE, Director, EdHealth Australia
Jayne is also a business owner panellist.

Jayne Lehmann is a registered nurse, Credentialled Diabetes Educator and human rights activist, improving diabetes health outcomes of people with intellectual disability across Australia. Jayne's business, EdHealth Australia, delivers quality and safe Diabetes 4 Disability care, education and support solutions to NDIS participants with diabetes, and their circle of support.

Spanning forty years, Jayne's nursing career has been acknowledged with many state and national awards; thirty nine of those years focused on diabetes care, education and support, with the last 10 years specialising on the needs of people with diabetes and intellectual disability. She is a key advocate, advising the Department of Health and Ageing, National Disability Insurance Agency, NDIS Quality and Safety Commission and Department of Social Services on the health and diabetes support needs of people with intellectual disability, informed by her lived experience, caring and advocating for her middle daughter's health and support needs. Sarah lived with Dravet Syndrome, causing severe intellectual disability, unstable epilepsy, a crouch gait, limited verbal communication and challenging behaviours. Sarah died unexpectedly in 2019, two days before her 26 th birthday, providing a stark reminder of the 20–32 year shorter lifespan of people with intellectual disability across Australia.

Presenting two witness statements to the Royal Commission into Violence, Abuse and Neglect and Exploitation of People with Intellectual Disability, Jayne challenges the systems and people funding, designing and delivering health services in this country to do better for people with intellectual disability. To this end, Jayne is making diabetes care, education and support accessible to people with a disability; a passion Jayne pursues with determination.



Program Speaker Biographies

Ms Macey Barratt

Macey Barratt is a lecturer in nursing at the University of Canberra and a PhD Candidate. Her PhD research looks at the unique relationship between nursing staff and families of children with long-term conditions. Her other areas of research include psychoptropic medication use and disability.

Ms Sharon Baillie

Sharon is a business owner panellist.

Sharon Baillie's journey as a nurse began over 30 years ago, in disability. It was there that she discovered her passion for helping children and young people with disabilities. As she worked with them, she found herself advocating for their rights and their needs. Sharon is thrilled to take on my new role as a businesswoman, combining her extensive nursing experience with her desire to share her knowledge with others.

Mrs Jennifer Brennen

Jennifer Brennan is a Registered Nurse working with people with intellectual disabilities to improve health outcomes in various settings. Jennifers background is in training and project work and currently work with the CESPHN project GROW team to enhance the role of the primary care providers supporting complex health needs of people with intellectual disability.

Jennifer Bur

Jennifer Bur is a PhD (Candidate) with Western Sydney University. She has a clinical nurse background in surgical, medical, and emergency. Completed a Bachelor of Nuring (Hons) and worked as Research Assistant, Federation University (Victoria). As a researcher, she is interested in enhancing the health, wellbeing and inclusion of people with intellectual disability in acute healthcare.

Dr Sarah Burston

Dr Sarah Burton is a Registered Nurse and has worked extensively in community, sub-acute and acute settings. With a strong background in clinical governance, Sarah is currently focused on the safety and quality of care and support for people with disability as General Manager Safety and Quality at Multicap Limited.

Laura Cooney

Laura Cooney has worked in the NSW Refugee Health Service for four years, three of those in Disability Support Team- NSW Refugee Health Service. Laura previously worked in the UK in Refugee Health for three years.

The Disability Support Team accepts referrals for people of a refugee or asylum-seeking background aged under 65 years old, who are living with physical, psychosocial, and intellectual impairment or developmental delay.

Laura is passionate about healthcare equity and access, and she is motivated to learn more about different cultures and how she can effectively guide them towards living fulfilled lives in Australia.

Dr Gillean Hilton

Dr Gillean Hilton is an Occupational Therapist, clinical researcher and currently Sector Coordinator Lead for the Disability Liaison Officer Program in Victoria. She has 30 years experience across the field of SCI rehabilitation and disability as a clinician, researcher and project manager. She draws on extensive partnerships with people with lived experience of disability and established organisational networks to influence systems change and improved outcomes for people with disability.

Dr Natasha Jojo

Dr Natasha Jojo is an Assistant Professor and an early career researcher under the Faculty of Health at the University of Canberra. With a deep passion for healthcare and education, she has dedicated her



career to nursing practice and academic advancement. Dr Natasha holds a PhD in Mental Health Nursing from the National Institute of Mental Health and Neurosciences (NIMHANS), India. Throughout their academic tenure, Dr Natasha has been actively involved in research initiatives focusing on developing and evaluating programs for children with intellectual disabilities, their parents, teachers, and carers.

Heather McMinn

Heather McMinn has a key focus on health within National Disability Services Australia. Her leadership spans health, disability and government roles all focused on improving outcomes for diverse communities experiencing inequity. Heather's passion is informed by experience as a carer of a child (dec) with a degenerative health condition and brother living with intellectual disability.

Janet McLeod

Janet McLeod has been working for Melba Support Services in Victoria since 2021. Her background includes senior clinical leadership in acute hospital settings and working on health promotion programs to improve access to quality health information and support. She is passionate about people living fabulous lives.

Mrs Gemma Ridley

Gemma Ridley is a UK trained Learning Disability Nurse, who emigrated to Australia in 2019 and am currently working with a disability provider in NSW. Gemma's career spans work within forensic services, CAMHS and the disability sector and my current job role is as a Health Educator and Coordinator.

Mrs Michelle Templeton

Michelle Templeton is a senior nurse with experience in different healthcare settings across Australia. Passionate about the right to access healthcare for all, Michelle led innovation around healthcare access, at the Centre for Developmental Disability Health, under the COVID-19 Pandemic. This included establishing the vaccination under sedation model at Monash Health, which has

expanded to include the development of a tiered model of care, enabling people with intellectual disabilities to access the preventative healthcare they require.

Carla Watson

Carla is a business owner panellist.

Co-founder of Watson & Blanch Disability & Aged Care Consultants, NDIS Provider, Registered Nurse, Trainer & Assessor (Certificate IV TAE), Member of PANDDA.

Carla is a Hobart local with over 20 years of nursing experience, providing compassionate care to people in the disability healthcare settings. After completing her Bachelor of Nursing at the University of Tasmania she has worked as a Registered Nurse in Tasmania in a diverse range of nursing specialties including Acute Care, Disability and Aged Care, Community Education and Vocational Training & Assessing.

Cristina Blanch

Cristina is a business owner panellist.

Co-founder of Watson & Blanch Disability & Aged Care Consultants, NDIS Provider, Registered Nurse, Trainer & Assessor (Certificate IV TAE), Member of PANDDA.

Cristina completed her Bachelor of Nursing at Sydney University and has over 20 years of experience working in NSW and Tasmania. She has a diverse experience in nursing including acute care, aged care and mental health. Cristina actively participates in a constructive manner to meet desired outcomes for individuals, families, and disability service providers.

Jodie Thompson

Jodie is a business owner panellist.

Jodie's nursing career has spanned Aged Care, Adult Rehabilitation (Brain and Spinal Cord Injury) and Paediatrics with the with the majority of her time spent in Inpatient and Outpatient Clinical Nurse Consultant roles within Kids Rehab at The Children's Hospital at Westmead. She was also the Project Manager for the development of the Paediatric Outreach Service in 2003.

Jodie is a member of the ACI Transition Executive and has a particular interest in supporting young people



as they make the transition from paediatric to adult services. She is also a member numerous specialty agencies. Jodie is now working fulltime in her private nursing service, Kids Collaborative that offers a variety of paediatric nursing services in the community.

Louise Hedges

Louise is a business owner panellist.

Louise is a Registered Nurse with over 40-years experience working in the disability sector. She worked for Government services as well as NGO's and has been working with NDIS since its trial in 2013 in the Hunter.

Louise started her own business as a Sole Trader in 2015 in response to the fact that there were limited nursing services to fill the gap when Government were no longer providing Disability Services in NSW.

Sharon Paley

Sharon is a business owner panelist.

Sharon trained as a specialist disability nurse in the UK, she has lived and worked in Australia since 2012. Sharon has wide experience and roles have included independent nurse consultant, manager of residential services, specialist nurse practitioner forensic disability and Director of Clinical Governance. She is the Head of Quality, Risk and Compliance for a small disability provider in Queensland and runs her own consultancy. Sharon's area of professional interest is reducing and eliminating restrictive practices, she has spoken at international events, published papers, and acted as an expert witness on the topic. Sharon is now working as an independent consultant.





Principles of Developmental and Intellectual Disability Nursing

In 2021 PANDDA began working with the Australian College of Nursing to develop a specialist study subject in Intellectual and Developmental Disability Nursing.

In 2023 a single unit of study titled "Principles of Intellectual and Developmental Disability Nursing" was finalised and is now available as an elective subject within The Graduate Certificate in Aged Care Nursing and The Graduate Certificate in Community and Primary Health Care Nursing at the Australian College of Nursing.

This unit of study is designed for nurses who work with people with intellectual and development disability across their lifespan in a variety of settings from the home to hospital. The content covers the integral role of the nurse in building therapeutic relationships with the person and their support network. Students learn about the aetiology and epidemiology of various intellectual and development disabilities and how to support people living with them from diagnosis and as they transition to adulthood and older age.

The unit was written by specialist nurses, including some PANDDA members, for nurses. Students will be supported by a team of clinical experts, working within the specialty. This is a fantastic opportunity to build skills in this specialist area of nursing.

For further information please visit:

https://www.acn.edu.au/education/single-unit-of-study/principles-of-intellectual-and-developmental-disability-nursing.



Abstracts

Facilitated discussion of barriers and opportunities for improved hospital admission and discharge for people with disabilities focussing on partnership solution opportunities across health, disability and NDIA

Presented by Heather McMinn, B Ed, MPH and Janet McLeod, B Nurs, B AppSc (Health Prom), RN

Overview

Transitions of care are a known risk for people with a disability. This session seeks to gather conference participants' insight into barriers in hospital admission and discharge process and identifying partnership solutions focused across the relevant sectors.

Content of presentation

The session will begin with a brief presentation highlighting key issues and concerns nurses, disability and other key stakeholder representatives have shared with NDS regarding hospital admission and discharge barriers. Following on,participants will engage in an interactive discussion to identify barriers and prioritise two or three areas for a focus on potential solutions and sharing of effective relevant approaches.

Disability setting nurses and workers with a health focus bring a unique perspective and understanding of the service delivery context, including a workforce with low health literacy and limited scope of practice. Through this lens solutions can be identified to meet the needs of people with complex health and disability needs with consideration for the medical models of the health system, NDIA and support models in the disability sector.

NDS will collate and share session input with conference attendees and use the themes to inform improvement recommendations with health, disability and key stakeholder groups including government.

Fostering collaboration between Primary Care and the Disability Sector to improve preventative health outcomes for people with intellectual disability

Presented by Mrs Gemma Ridley, BSC Professional Practice in Nursing, Health Educator and Coordinator and Mrs Jennifer Brennen, Diploma of Applied Science, BA, Intellectual disability Service Navigator

Overview

Fostering collaboration between Primary Care and the Disability Sector to improve preventative health outcomes for people with an intellectual disability.

Background

Disability Service Providers do not receive adequate health care training yet are responsible for supporting complex health needs of clients.

Improving health outcomes for people with intellectual disability requires a preventative approach and collaboration between primary care and the disability sector.

Goal

This project sought to bridge the divide between primary care and disability sectors.

To build the capacity of disability staff, empower them as advocates and improve access to primary health care and preventative health interventions for their clients.

Method

The co-design process involved nurses, GPs, researchers, disability service providers and subject matter experts.

Resources and training were developed to address barriers and knowledge gaps in both sectors.

GP led training focused on empowering disability staff to build strong relationships with GP practices and embed effective processes to support annual health assessments and preventative health interventions.



Findings

The training and resources have the potential to support collaborative coordination between individuals, their support services and primary care.

Increase in the disability providers knowledge of preventative health, Medicare, and primary care system.

A newly developed process for supporting annual health assessments eliminates duplication of health information and streamlines access to effective preventative health care for people with intellectual disabilities.

Implications

The training and resources have the potential to support collaborative coordination between individuals, their support services and primary care.

Increase in the disability providers knowledge of preventative health, Medicare, and primary care system.

A newly developed process for supporting annual health assessments eliminates duplication of health information and streamlines access to effective preventative health care for people with intellectual disabilities.

The nurse role within an NDIS Service provider using an understanding of social model of health to build a web of support enabling people with a disability to have improved health outcomes

Presented by Janet McLeod, B Nurs, B AppSc (Health Prom), RN

Overview

The presentation explores the role aspects, relationships and resources used as a nurse working from a social model of health within an NDIS Service provider.

Content of presentation

Best health is understood to be more than absence of disease. Using the framework of a social model of health nurses within Melba's Complex Health team have focused on building a responsive, consistent practice framework that maximises the interdependent partnership between the person, the direct staff team, the Complex Health Team, and the broader health sector. Melba's approach puts the person at the centre of a web of supports that can help to ensure optimal health outcomes. Each part of the web becomes a

partner to the individual participant, supporting them to achieve the best level of support possible to sustain health and comfort. This presentation will outline the elements of the web and highlight how the nurses are involved in embracing and facilitating these partnerships in healthcare.

Embedding a human rights approach across the Quality Management System

Presented by Dr Sarah Burston BSc (Hons), MSc, PhD

Overview

As Australia is a signatory to both the UNCRPD and the optional protocol, Multicap has taken the view that the UNCRPD represents substantive feedback from people with disability and chosen to operationalise our focus on Human Rights.

Content of presentatation

Multicap has developed a process to assess the impact of the quality management system on the human rights for people with disability. This reflects our deliberate effort to develop new services, programs and products that improve safeguards and outcomes for people with disabilities. An integrated approach empowers Multicap to not only maintain quality control over the final document but also ensures strict adherence to the French et al (2010) analysis methodology which recognises the UNCRPD (United Nations Convention on the Rights of Persons with Disabilities). By applying the workflow to all polices and procedures, the risk of human rights limitations by oversight, is greatly reduced. Whilst Restrictive Practice or Safeguarding Procedures are obvious targets for analysis, seemingly innocuous documents are also scrutinised. By way of example, the use of service contractors at operational sites prompted consideration against article 22 (Respect for privacy) and COVID procedures reviewed against article 23 (Respect for home and family).

To support this approach, Multicap has invested in training and upskilling of its employees to enhance the capability to complete a Human Rights analysis. This approach ensures that the organisation is equipped to embrace and capitalize on the transformative benefits of the initiative and through supporting the rights of for people with disability.



Empowering ability through Continence Care: A Private Practice Nursing Perspective

Presented by Sharon Baillie Registered Nurse MN (Adv Prac) UON Continence Cert IV Counselling and Communication, and business owner.

Sharon is also a member of the business owner panel.

Overview

Present the significance of the NDIS on nurse consultants in private practice to provide person-centred care for participants with continence issues and disability. These strategies are founded on the consultant's skills and extensive knowledge and experience.

Content of presentation

Overall, this paper aims to showcase the essential role of a highly skilled nurse consultant in continence and disability, particularly as a solo practitioner. Through personal experiences and case studies, it highlights how they can empower and support individuals with incontinence and disability and help them achieve a better quality of life.

The author will demonstrate how a nurse consultant in private practice can utilise their skills to develop an individualised care plan tailored to the specific needs of the patient, including addressing social, psychological, and practical aspects of their condition and concludes that people with IDD and incontinence problems can be empowered to achieve a better quality of life.

Content of presentation

Overall, this paper aims to showcase the essential role of a highly skilled nurse consultant in continence and disability, particularly as a solo practitioner. Through personal experiences and case studies, it highlights how they can empower and support individuals with incontinence and disability and help them achieve a better quality of life.

The author will demonstrate how a nurse consultant in private practice can utilise their skills to develop an individualised care plan tailored to the specific needs of the patient, including addressing social, psychological, and practical aspects of their condition.

Developing targeted staff education and training by understanding disability awareness at Austin Health

Presented by Dr Gillean Hilton BOT MPH PhD, Sector Coordinator Lead Disability Liaison Officer Program

Aims

Austin Health is a provider of several state-wide specialist programs for people with disability and complex care needs. However, even in general medical wards, the prevalence of patients with disability (PWD) has been as high as 22%. Low disability awareness, negative attitudes, and lack of reasonable adjustments to communication and the clinical environment are contributing factors to poorer health outcomes for PWD1. The Disability Liaison Officer (DLO) program works to reduce barriers to accessing healthcare. To inform the development of targeted education, DLO are aiming to explore the extent of knowledge and awareness held by staff regarding PWD receiving healthcare at Austin Health.

Methods

An online survey was disseminated to a convenience sample across the staff population, including acute, subacute and outpatient work areas.

Results

One hundred and seventeen staff have completed the survey to date, with majority of respondents from allied health and 23% from nursing. Seventy-one percent of respondents agreed that it is within their normal role to engage with PWD. Varying confidence levels were recorded for providing care to and engaging in conversations with people about their disability. When asked about familiarity with key initiatives and resources, 66% hadn't heard of the Austin Health Autism Care Plan, while 40% were not familiar with the local Disability Action Plan. All respondents indicated they would like to know more about disability related initiatives/resources. Data collection is ongoing and results from a larger sample will be presented.



Conclusion

Results of this study will inform the development and roll out of targeted disability awareness education, that ultimately seeks to improve the end-user healthcare experience by enhancing access to and quality of care delivered to people with disability. Findings may offer relevance to other organisations.

Service improvements to address barriers to accessing healthcare at Austin Health, for people who are Neurodivergent

Presented by Dr Gillean Hilton BOT MPH PhD, Sector Coordinator Lead Disability Liaison Officer Program

Overview

The Statewide Disability Liaison Officer Program is a Victorian Department of Health initiative to support inclusive, equitable and safe access to healthcare for people with disability. Austin Health is a large tertiary hospital in the North East of metropolitan Melbourne. Members of our DLO team come from a diverse range of backgrounds including nursing, public policy, rehabilitation engineering and occupational therapy.

Content of Presentation

Need for improvement:

The Disability Royal Commission heard about systemic neglect and mistreatment of Autistic people by Australia's healthcare systems. The sensory environment can affect the behaviour and emotional state of Autistic people. Negative perceptions and a lack of autism understanding across health systems, can create barriers to person centred care and choice and control, and leads to the use of restrictive practices.

Initiatives implemented:

Austin DLO team has undertaken a number of service improvement activities to address barriers to accessing healthcare. Initiatives related to the challenges described in the Disability Royal Commission hearings, will be discussed in this presentation.

Sensory boxes and Low Sensory Vaccination Clinic: Remediation strategies such as the provision of visualaid tools for orientation or sensory toys for distraction are recognised as an effective non-pharmacological intervention in hospital settings¹. Autism Care Plan and Patient Care Preferences:

Documentation of preferences in the electronic medical record, alongside an established Autism Care Plan help

record, alongside an established Autism Care Plan help communicate individual needs and assist in the provision of reasonable adjustments.

Detail on implementation of initiatives will be covered as well as sharing of patient stories to demonstrate impact.

¹ Sadatsafavi, H., Vanable, L., DeGuzman, P., & Sochor, M. (2022). Sensory-Friendly Emergency Department Visit for Patients with Autism Spectrum Disorder – A Scoping Review. Review Journal of Autism and Developmental Disorders, 1–15.

The exploration of the perioperative care experiences and reasonable adjustments for people with intellectual disability within Australia

Presented by Jennifer A. Bur, PhD Candidate, BN(Hons), BNP, RN

Overview

This session will provide an overview of a research exploring the perioperative care experiences of people with intellectual disability, with an aim to enhance recruitment.

Content of presentation

The quality of care provided to people with intellectual disability accessing the Australia healthcare system are reportedly lower compared to patients who do not have an intellectual disability in relation to factors such as abuse, neglect and discrimination When compared to the general population, people with intellectual disability are reported to access the healthcare system at rates 8.7 times greater, experience higher rates of premature preventable death, and a have a 20year shorter life expectancy. These issues combined underscores significant health inequalities experienced by this cohort and research attention is now being focused on countering this disadvantage. Although there is a growing body of international research about people with intellectual disability accessing the acute hospital system, primary care, and specialist services, there is a paucity of research specific to the perioperative context. This represents a major research gap as people with intellectual disability undergo perioperative



procedures at a greater rate than the general population. It is important to uncover policy and practice problems to better understand how perioperative procedures can be enhanced to achieve better, more equitable outcomes for people with intellectual disability. This session will call for the recruitment of people with intellectual disability to explore their experience when having planned inpatient surgery under a general anaesthetic within the last five years.

Exploring the Uncompromised Impact: A Sexual Abuse Prevention Program with No Negative Effects"

Presented by Dr Natasha Jojo, Assistant Professor in Nursing, University of Canberra

Aims

The study aimed to investigate any adverse effects associated with participation in a sexual abuse prevention programme for children with Intellectual Disabilities

Background of the study

Children with Intellectual Disabilities are more prone to sexual abuse. But parents and teachers are concerned that sexual abuse prevention programmes would negatively affect the children (e.g., they may withdraw socially, fearing abuse). Since these concerns can be a barrier to implementing prevention programmes, investigating their adverse effects becomes necessary.

Methods

A true experimental, pre-test and post-test control group design was adopted. The study was conducted among 120 children with mild or moderate disability attending special schools (60 in experimental and control groups, respectively). Pre-assessment of subjects was done using Fear Assessment Thermometer Scale, and parents were surveyed using a Parent Perception Questionnaire before and after administering the sexual abuse prevention programme. Follow-up was done at one month, three months and six months.

Results

There was no statistically significant difference in the fear perception in the experimental group compared to the control group (p >0.05) at different time points

over a period of six months, and no increase in the frequency of problematic behaviour was reported. No parent said that the programme caused any adverse effects on the child.

Conclusion

Results revealed that sexual abuse prevention programme can be implemented effectively to prevent sexual abuse without negatively impacting children.

A description of the Australian disability nursing workforce using census data from Ahpra 2022

Presented by Ms Macey Barratt, RN, PhD Candidate, PG Cert, BN (Hons). Lecturer in Nursing University of Canberra

Aims

To describe the profile of the nursing workforce in the area of disability and to compare the disability workforce to other nursing workforce areas

Methods

Existing data were collected from the National Health Workforce Data website which, since 2021, has listed 'Disability' as a workforce category for nurses to select. Demographic data were extracted from the National Health Workforce Data website and comparisons between different workforce categories, measures of frequency and central tendency were completed.

Results

In 2021, 2337 nurses self-selected the job area of 'disability' when registering or re-registering with Ahpra, representing a total 0.65% of the Australian nursing workforce (n=357,674). The majority of nurses working in disability were female (n=1927, 82.6%) and most identified working in a community health service (n=794, 34%) or a residential health care facility (n=653, 28%). When comparing nurses working in disability to nurses in other employment categories, disability had a higher percentage of nurses aged over 55 years significantly higher rates of nurses who identified as Indigenous when comparing the disability sector to mental health or the disability sector to rehabilitation.



Conclusion

We now know more about nurses who select disability as their main job area within the Australian nursing workforce, however the number of nurses being recruited into disability is lower than the national averages in other job areas. It is important that National Health Workforce data continue to include disability as a discreet workforce category to assist in disability workforce management and planning, and to optimise care of vulnerable people with disability within Australia.

Preventing and responding to sexual violence against people with disability

Presented by Mrs Elisha Deegan, RN PhD Candidate, Project Officer, Laurel House Sexual Assault Support Service

Overview

This presentaion will deliver an understanding of the current resources avalibale for recognising and responding to sexual violence against people with disbaility

Content of the presentation

Overview of the scale of sexual assult and violence against people with disbaility.

Synopsis of the resources avalibale across Australia for recognising and responding to sexual violence against people with disability.

Work that is currently being completed by Laurel House in Tasmania to strengthen the prevention of sexual violence against people with disability.

Scoping review of literature available for supplementing and delivering CPR and BSL to people with disability

Presented by Mrs Elisha Deegan - RN PhD Candidate, Project Officer, Laurel House Sexual Assault Support Service

Aims

To discover literature that addresses how to deliver CPR and BLS to people with disability for whom the current standard guidelines are not inclusive.

Methods

Scoping review conducted through Covidence.

Results

Five papers where discovered. Common themes include the need for improved guidelines and educational materials, the fear that exisits for care givers becuase this education is not provided and the increased confidence that is gained from introducing ideas for improving CPR and BLS.

Conclusion

There is an established and real need for further educational resources to guide care givers on delivering CPR and BLS to people with disability. The research gap is well defined and there is extensive scope for improvement.

Collaborating care in rare genetic disorders – A case study

Presented by Laura Cooney, RN, PG cert Cardiac Critical Care, Disability Support Team- NSW Refugee Health Service

Overview

Clinical case presentation of a six-year-old boy of Refugee background who was diagnosed with the rare recessive genetic metabolic disorder Maple Syrup Urine Disorder (MSUD) days after birth.

The client is living with Global Developmental Delay and requires multiple specialist services and health professionals to manage his needs.

The case study will look at the challenges people of refugee background face when accessing services and support required to coordinate care.

Content of presentation

This case study will provide a clinical overview of MSUD, the associated Global Developmental Delay's secondary to the disorder, and management of the client's journey since arrival in Australia.

It will focus on the collaboration of the clinicians and services involved in coordinating his care and the experience of the family.



The case study will demonstrate the collaboration of the clinicians and services involved in coordinating care, and the importance of partnering with the family using a trauma informed approach.

Disability Health Access Service - a tiered model of care enabling access to preventative healthcare for people with intellectual disabilities

Presented by Michelle Templeton, RN, Senior Disability Nurse with the Centre for Developmental Disability Health Victoria

Content of presentation

People with developmental and intellectual disabilities experience barriers accessing health services, resulting in an average reduced life expectancy of 27 years compared with the Australian average. Research indicates that 38% of these premature deaths are potentially avoidable (Troller et al., 2017). Barriers to preventative healthcare include busy and noisy medical environments, previous negative healthcare experiences, fear, pain, anxiety, and past healthcare related trauma. The Disability Health Access Services (DHAS), run out of the Centre for Developmental Disability Health (CDDH) at Monash Health, aims to facilitate patient comfort during standard preventative health care activities. This includes accurate DHAS assessment and screening, environmental modifications, social preparation, and the considered and cautious use of procedural sedation. Overall, DHAS aims to increase health outcomes for people with disability by providing access to preventative healthcare procedures through the lowering of health access care barriers, including those related to patient pain, fear and/or anxiety.

Reference: Trollor J., Srasuebkul P., Xu H. and Howlett S. (2017) 'Cause of death and potentially avoidable deaths in Australian adults with intellectual disability using retrospective linked data', British Medical Journal, No. 7, doi: 10.1136/bmjopen-2016-013489.



Bob Weaver and Chris Atkins PANDDA Award

Bob Weaver (OAM) and Dr Chris Atkins are founding members of PANDDA. This award honours their contributions to PANDDA Inc in meeting the healthcare, support, and service delivery needs of people with intellectual developmental disability. The Award also recognises their enduring leadership in education, research, and professional guidance through the discipline of nursing.

Bob Weaver and Chris Atkins

In 1989, a group of nurses that included Bob Weaver (OAM) and Dr Chris Atkins recognised the need for a professional organisation to represent nurses working in the area of intellectual developmental disability. Hence, PANDDA Inc was formed. Since its inception, Bob has served as president, vice-president, executive member, and conference convenor for almost 37 years. Bob was awarded the Order of Australia Medal in 2014 for his tireless work in advocating for people with disabilities throughout his 50-year career as a nurse. Dr Chris Atkins also served as president, vice-president, and executive member since the founding of PANDDA Inc. Chris was the first nurse to attain a PhD in intellectual developmental disability in Australia. Bob and Chris are both life members of PANDDA Inc.

The Chris Atkins and Bob Weaver PANDDA Award is presented at the annual PANDDA conference to an eligible presenter(s) who attains the highest score on the presentation criteria scoring sheet.

Eligibility Criteria

To be eligible for the award, a conference presenter(s), or one member of the presenters must:

- be a Registered Nurse or Enrolled Nurse.
- present a paper of relevance to the nursing and support of people with intellectual developmental disability.
- not be an invited speaker.

Scoring

- Each eligible presentation is judged by conference delegates who are randomly selected by the Award presenters and who voluntarily agree to act as referees. There are three referees for each eligible presentation.
- The PANDDA award is presented at the end of the conference. Criteria scoring sheets will be collected and collated by the Award presenters.
- If any scores are tied, the Conference Committee will have the final decision.

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PANDDA Annual Conferences 1990-2023

2023: 34th ANNUAL PANDDA CONFERENCE

Embracing Partnerships in Health Care

2022: 33rd ANNUAL PANDDA CONFERENCE

NURSES: Engineering Health Pathways

2021: 32nd ANNUAL PANDDA CONFERENCE

Navigating The Future: Leadership you can Trust

2020: 31st ANNUAL PANDDA CONFERENCE

2020 Vision: Wellness & Health ... character, ethics and integrity in developmental/intellectual disability

2019: 30th ANNUAL PANDDA CONFERENCE

The Best is yet to come

2018: 29th ANNUAL PANDDA CONFERENCE

People, Purpose & Passion

2017: 28th ANNUAL PANDDA CONFERENCE

Waves of Change... Oceans of Opportunity...

Start With Us

2016: 27th ANNUAL PANDDA CONFERENCE

A New World: Inspiring Abilities

2015: 26th ANNUAL PANDDA CONFERENCE

Enable the Future: Change – Choice – Rights –

Wellbeing – Practice

2014: 25th ANNUAL PANDDA CONFERENCE

Through the Looking Glass... wisdom, reflection, experience

2013: 24th ANNUAL PANDDA CONFERENCE

Partnerships & Possibilities – Nursing Practice in Disability. Models for Health & Social Equity

2012: 23rd ANNUAL PANDDA CONFERENCE

Great Expectations: Take nothing on its looks; take everything on evidence. There's no better rule

2011: 22nd ANNUAL PANDDA CONFERENCE

Owning Our Practice – Learn from yesterday, live

for today, hope for tomorrow

2010: 21st ANNUAL PANDDA CONFERENCE

 ${\bf Coming\ of\ Age-A\ Celebration\ of\ Intellectual/Developmental}$

Disability Nursing

2009: 20th ANNUAL PANDDA CONFERENCE

Changing Times... Words, experiences and dreams

2008: 19th ANNUAL PANDDA CONFERENCE

Building and connecting bridges

2007: 18th ANNUAL PANDDA CONFERENCE

Passion! Imagine the possibilities

2006: 17th ANNUAL PANDDA CONFERENCE

Access and Equity: Health care for people with

a developmental disability

2005: 16th ANNUAL PANDDA CONFERENCE

Developmental Disability Nurses: Lost, or just harder

to find?

2004: 15th ANNUAL PANDDA CONFERENCE

Person Centred Support: The Challenges for Nurses working in

Developmental Disability

2003: 14th ANNUAL PANDDA CONFERENCE

Developmental Disability Nursing: Where to from Here

2002: 13th ANNUAL PANDDA CONFERENCE

Developmental Disability Nurses: Promoting Healthy Lifestyles

2001: 12th ANNUAL PANDDA CONFERENCE

Diversity in Practice

2000: 11th ANNUAL PANDDA CONFERENCE

Nurses in Developmental Disability: Who Needs Them!

1999: 10th ANNUAL PANDDA CONFERENCE

Visions for the Future 2000 & Beyond

1998: 9th ANNUAL PANDDA CONFERENCE 1998

Health Issues for People with Developmental Disabilities

1997: 8th ANNUAL PANDDA CONFERENCE

Professional Issues

1996: 7th ANNUAL PANDDA CONFERENCE

Best Practice

1995: 6th ANNUAL PANDDA CONFERENCE

Transition & Nurses

1994: 5th ANNUAL PANDDA CONFERENCE

People with Developmental Disability and their

Families – 1994 The year of the Family

1993: 4th ANNUAL PANDDA CONFERENCE

Clients with Challenging Behaviours: Aspects

of management

1992: 3rd ANNUAL PANDDA CONFERENCE

Developmental Disability Nursing: Moving On

1991: 2nd ANNUAL PANDDA CONFERENCE

Empowerment: Marketing the Professionalism of Nurses

in Developmental Disability

1990: 1st ANNUAL PANDDA CONFERENCE

Change & Diversity in Developmental Disability Nursing

34TH PANDDA CONFERENCE 2023



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