

CONNECTIONS SUMMER 2019



2019 Annual General Meeting, Iqaluit
Board and Staff

CONNECTIONS

RNANT/NU Board of Directors

President:

Rommel Silverio

President-Elect:

Jennifer Pearce

NT Vice President:

Vivian-Lei Silverio-Chua

NU Vice President:

Aboubacar Kadogo

NT Public Representative:

Vacant

NU Public Representative:

Vacant

NT North:

Vacant

NU West:

Monique Skinner

NU East:

Omanola Djalogue

Secretary:

Melissa Holzer

Treasurer:

Kathlyn Tan

RNANT/NU Staff

Executive Director:

Denise Bowen

Director of Regulatory Services and Policy:

Shawna Tohm

Director of Professional Conduct:

Jan Inman

Registration Coordinator:

Emily Richardson

Executive Assistant:

Kyla Ricks

Table of Contents:

Executive Directors Report.....	3
Meet your new NT Vice President.....	5
New Standards and Scope of Practice.....	6
Renewal.....	7
Nurse to know.....	9
Preceptor of the Year.....	10
Professional Conduct.....	11
Find a Nurse.....	12
Annual General Meeting.....	16
MOU.....	20
Volunteers Needed.....	23
Nursing. Power & Advocacy.....	24
Nursing Week 2019.....	25
Nursing Now.....	26
CADTH: Sensory Room.....	28
Article– Stanton Territorial Hospital Move Day.....	30
Continuing Your Education.....	34

The Registered Nurses Association of the Northwest Territories and Nunavut (RNANT/NU) is both a regulatory body and a professional association. Our mission is to promote and ensure competent nursing for the people of the Northwest Territories and Nunavut.

CONNECTIONS

Executive Directors Report

In May, our AGM was held in Iqaluit. The weather was lovely and warm, as was the reception we received from the nurses we met. Education day highlights included two presentations by CNPS, one on documentation, and the second on remote nursing, working with reduced resources. Jan Inman, Director of Professional Conduct, presented on the myths and facts of professional conduct review. The sessions were well attended, and anecdotal feedback indicated that the information from all sessions was relevant to our working environment. Tim Guest, President-Elect CNA presented on some of the new and upcoming initiatives of CNA including:



The launch of the new online Canadian Nurse magazine canadian-nurse.com which offers practical information supporting professional nursing practice. New content is added weekly, so visit the website often.

As we move into both a territorial and federal election, I found the following information from CNA useful, and I hope you do too. CNA has released four evidence-based election platform recommendations.

1. Support caregivers financially by amending federal tax laws:

- Make the existing Canada caregiver credit fully refundable
- Extend the federal compassionate care benefits to include a two-week period for bereavement

2. Adopt and implement a universal, single-payer pharmacare program that is sustainable and evidence-based

3. Invest in technology-enabled virtual care beyond hospital walls, including the scale-up and spread of existing technologies in homes and communities

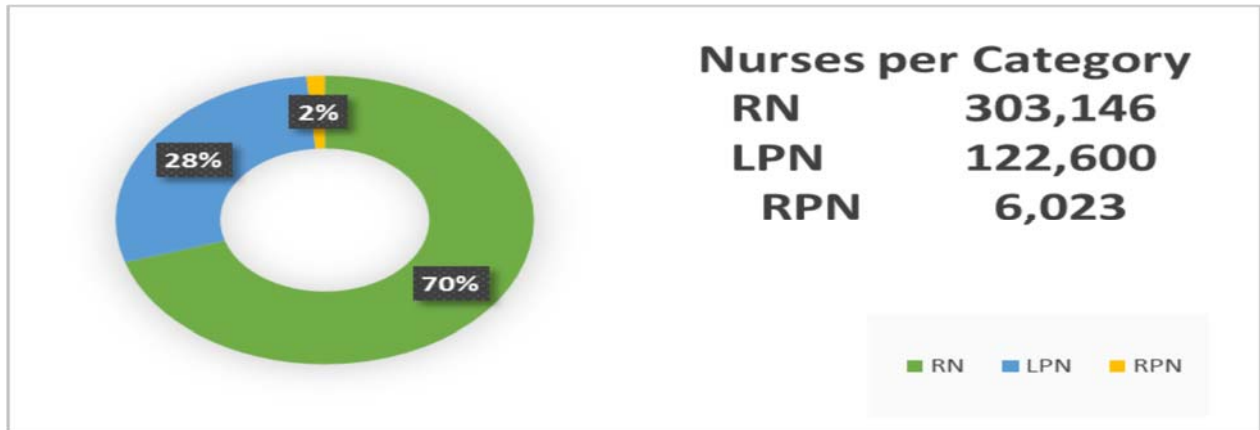
4. Implement climate change and health strategies that:

- Prevent and reduce the negative health effects of climate change
- Increase health research and public education
- Provide stable long-term funding to the health sector that addresses the effects of climate

Included in the election platform package is a toolkit to assist nurses to have their voice heard whether it be in local, territorial or federal elections. Write a letter, start a conversation. Use CNA's toolkit to get involved. <https://elections.cna-aiic.ca/en/get-involved>

CONNECTIONS

The Canadian Institute for Health Information (CIHI) has released its Nursing Workforce Report. There were 431,769 regulated nurses in 2018, the categories show:



- The nursing workforce grew by 1.0% between 2017 and 2018. The annual workforce growth rate has decreased over the last 5 years, down from 2.2% in 2014.
- The LPN workforce saw the highest annual growth rate between 2017 and 2018, which was more than 4 times that of the RN workforce.
- Overall, the nursing supply is younger compared with 5 years ago. In 2018, LPNs had the lowest average age (41).
- The supply of male regulated nurses grew by 18% over the last 5 years — more than 3 times that of female nurses (5%).

For more information visit: <https://www.cihi.ca/en/nursing-in-canada-2018>

We are moving to a new database, and very excited about the expanded capability to pull data to compare and contrast our registration statistics within the territories, and with the rest of Canada.

Whether it is just the summer season of moving in and out of the north, or perhaps I'm just more aware of it, but the northern nursing workforce seems to be in some transition. There is movement towards increasing staffing mixes, more questions from the press on nursing shortages, and the general movement of nurses in and out of register. However, this is not supported by our verification and registrations numbers, which have remained relatively stable over the past five years. It is interesting that CIHI is showing a minor increase in the numbers of regulated nurses for 2018, after four years of declining numbers. At the most recent Canadian Federation of Nurses Union Biennium announced the commission of a national nurse staffing survey to examine an anticipated nursing staffing crisis. Nurses (RNs, NPs, LPNs, and RPNs) in all sectors will be surveyed to collect data on current staffing levels, workload, working conditions, staff burnout and education. The survey results are expected to be released in 2020, and I'm looking forward to seeing the results and comparing them to what we know about nursing in the north.

I hope that in the coming days and months you find time to relax and refresh.

CONNECTIONS

Get to Know Your Board!

I am Vivian-Lei C. Silverio-Chua, a resident of Yellowknife, NT for 22 years, originally from the Philippines. I am a wife and a mother of 2. My parents are Ruben and Priscilla and my siblings are Rommel and Eric who are both nurses at Stanton Hospital. I am a registered nurse in Canada and the Philippines. I am a senior nurse at the Pediatric Unit at Stanton Hospital for more than 9 years now and 1 year of float pool nursing between 2011-2012. I also worked at Diagnostic Imaging, Laboratory and Driver & Vehicle Licensing Office. I have been with the Government of the Northwest Territories for 18 years now. I first volunteered with RNANT/NU as one of the Board of Directors and Treasurer from September 2016-April 2018 and took a year off and was nominated back as the Vice President NT May 2019.

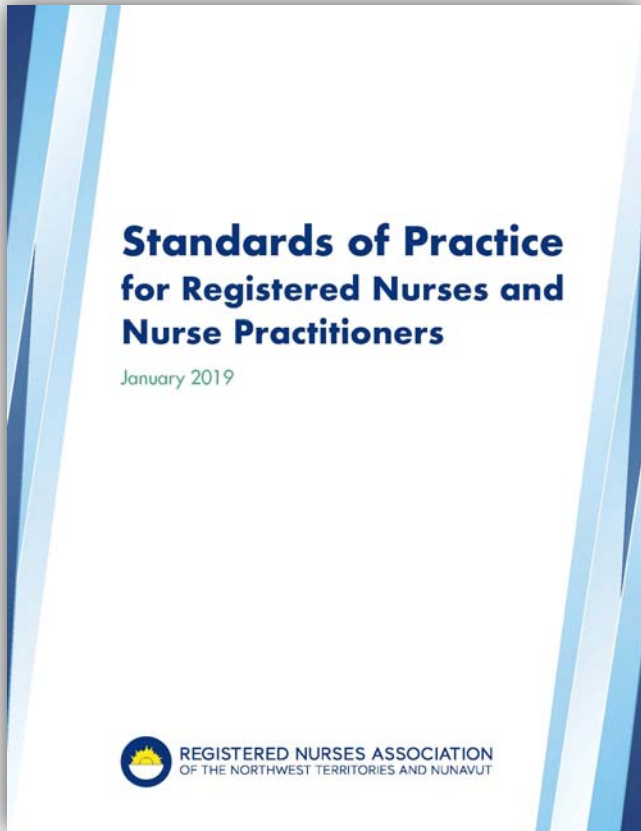
Looking back at my journey, nursing was not my first choice but my father was my big influencer that is why I end up taking nursing in the Philippines. Once I arrived in Canada with my family, I was not able to upgrade right away due to other commitments. My nursing career was put on hold for years, until both my brothers decided to go back to school and studied nursing. Rommel and Eric never stop encouraging me to be a nurse in Canada as well as my parents, and I ended up taking the nursing refresher program but was unable to finish the practicum part since I did not have the English proficiency part completed. A few years passed and I decided to go back but I was required to retake the refresher program again so I did! I wrote exams after exams, 1 day of lab, 13 shifts and wrote the board exam failed the first one and passed the second one. I Landed a peds position after and the rest is history.

I am sharing my failures and success because I would like to inspire foreign nurses, nurse graduates and, nursing students that are struggling or having difficulties in attaining their dreams and goals in nursing. Always remember “ IT IS POSSIBLE!”, just have faith in yourself, focus on your goal, surround yourself with people that believe in you and always looked back and be grateful to the people that helped you paved the way in becoming successful in your career. In this note, I would like to thank: Denise Bowen for never stop believing in me when she was my instructor during my refresher program year; to Sherry Connors who took me under her wing as my mentor when I started my nursing career in Pediatrics; and to Karen Pardy and Maggie Jacobs for giving me the opportunity 9 years ago, and also to my Peds family. Thank you for everything! Lastly, I would like to thank the people who nominated and voted for me, it is my honor to be part of the Registered Nurses Association of the Northwest Territories & Nunavut.

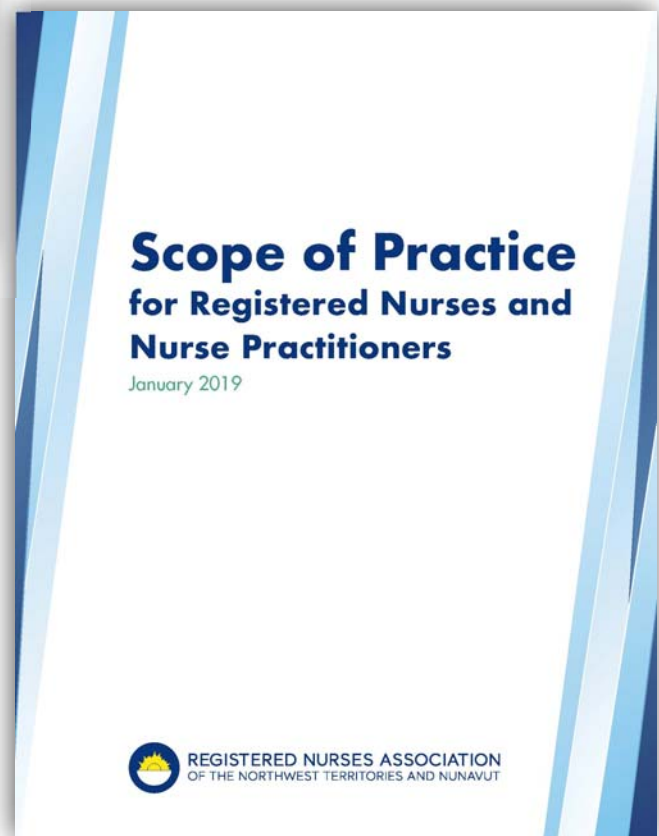


CONNECTIONS

RNANT/NU's New (Revised) Scope of Practice & Standards of Practice



View the Standard of Practice [here](#)



View the Scope of Practice [here](#)

CONNECTIONS

RENEWAL PERIOD:

OCTOBER 15– NOVEMBER 30, 2019

What you need to know about the 2020 Renewal Process:

- Renewal applications will be available on our website starting October 15, 2019
- Each nurse is responsible for submitting their own documents
- You can check the status of your registration number at “Find a Nurse” on our website
- Renewal applications received between December 1st – December 31st, 2019 will have a late fee of \$100.00 plus GST added.

Renewal FAQ's

When does my registration expire? And what is the effective date of my 2020 registration?

All registrations are in effect from January 1st-December 31st of each year. Registrations expire December 31st.

How long is the processing time?

Renewals will be processed within 15 business days once all documents are received. If there is missing information or inaccuracies with your renewal this may delay the process.

Can my employer or co-worker send my renewal documents on my behalf?

No. All documents must be submitted by the applicant.

What happens if I don't renew during the renewal period from October 15th – November 30th each year?

Renewals processed between December 1st – December 31st will be subject to a \$100.00 + GST late fee. Applications received after December 31st will be subject to the reinstatement process.

What is the total fee for renewal? What is included in the fee?

RN: \$946.52

NP: \$1121.35

Fee's include GST, CNPS & CNA fees

Continued....

CONNECTIONS

Can my employer provide a credit card to pay my fees on my behalf?

Yes, your employer can fill out the payment authorization form and submit this to RNANT/NU for processing.

Can you send a copy of my receipt and registration directly to the employer?

The Registration Coordinator will send you a copy of the receipt and the registration. You can then forward this directly to your employer if they request a copy.

Will I be notified when my renewal has been completed?

The Registration Coordinator will send you an email with a copy of your receipt and registration card.

What if I still have questions?

We would be happy to assist you!

Phone (867) 873-2745 ext. 21

Email info@rnanntnu.ca

Renewal 2020

Don't forget, renewal starts October 15 to November 30, 2019

Late fees: December 1 - 31, 2019

OCTOBER	NOVEMBER	DECEMBER
m t w t f s s	m t w t f s s	m t w t f s s
1 2 3 4 5 6	1 2 3	1
7 8 9 10 11 12 13	4 5 6 7 8 9 10	2 3 4 5 6 7 8
14 15 16 17 18 19 20	11 12 13 14 15 16 17	9 10 11 12 13 14 15
21 22 23 24 25 26 27	18 19 20 21 22 23 24	16 17 18 19 20 21 22
28 29 30 31	25 26 27 28 29 30	30 31



CONNECTIONS

A Message from the editor-in-chief of the Canadian Nurse.

Barb Shellian, RN, MN

“I have recently taken on the responsibility in a volunteer role as Editor in Chief for the new digital Canadian Nurse – an innovative website and digital resource for Canadian nurses. www.canadian-nurse.com. I am pleased to announce that the website has been launched and I invite you to have a look and see some of the great articles and features that are on the page. This will be updated frequently and will be the new “go to” for Canadian nurses! It will be important to get feedback from you about what your impressions are about the website and what things you would like to see in future updates!”

To view the Canadian Nurse website, click [here](#)

Nurse to Know



Julie Jones is a RN working at Stanton Territorial Hospital. In her role as Clinical Coordinator, Julie acts as the key nursing resource for best practice in chemotherapy and dialysis. She utilizes evidence informed best practice research and integrates this knowledge into the clinical setting. Julie provides support, constructive feedback and encouragement to the staff, and coordinates regular teleconferences for continuing education sessions. Julie is a role model, supporting a positive workplace culture and support systems for colleagues.

CONNECTIONS

Aurora College's Preceptor of the Year

The Aurora College Bachelor of Science in Nursing program would like to celebrate Mr. Michael Bishop, the BSN 2019 Preceptor of the Year!

Mike graduated from the Aurora College BSN program in 2015 and has been working since this time at Stanton Territorial Hospital in Yellowknife, in a variety of roles and settings. Mike was nominated by two of this year's graduating students, Ms. Jody Prince and Ms. Jordan Erickson.

The Preceptor of the Year award is presented annually by the Aurora College BSN program to a preceptor who goes above and beyond expectations in promoting student learning and achievement; serves as an outstanding role model for registered nursing practice; promotes the preceptor role among colleagues in practice, and demonstrates excellence in teaching and learning. Graduating students are invited to submit a nomination letter for a preceptor they feel meets these qualifications.

Mike was described as being kind, caring and compassionate. Mike allowed the students to increasingly gain autonomy but was always there to support them when they needed help. The faculty commented how Mike assists the students to transition from BSN student to RN practice and builds questions of the day into their practice, so as to always encourage inquiry and learning.

Mike emulates the Canadian Nurses Association (2017) Code of Ethics when he continues to put himself forward as a preceptor, knowing that it is the ethical responsibility of all registered nurses to mentor and provide guidance to nursing students. Mike even took the time to attend the graduation to congratulate the students in May!

The BSN program faculty and students would like to congratulate Mike on this award. Thank you Mike, for sharing your skills and knowledge and for showing our future colleagues that they are valued and supported.

Deepest appreciation is extended to all Registered Nurses who have preceptored students from the Aurora College BSN program in the 2018-2019 academic year. Your support and guidance is critical to the confidence and success of our entry-level nurses.

Kerry-Lynn Durnford, RN



Jordan Erickson, Michael Bishop, Jody Prince

CONNECTIONS

Professional Conduct Committee

RNANT/NU Member # 4456

On April 25, 2019 the Chairperson of the Professional Conduct Committee approved a settlement agreement between RNANT/NU and the Member. The Member conducted research, on more than one occasion in Nunavut, without approval and a license from the Nunavut Research Institute. The Member failed to correctly and independently administer immunizations, failed to correctly and independently calculate basic medication dosages and failed to correctly and independently carry out tuberculosis contact tracing. The Member entered Alternate Dispute Resolution. As part of the settlement agreement the Member will complete the 8 module Tri – Council Policy Statement 2: CORE – Tutorial focused on ethical research. The Member will not practice nursing in an acute care setting or in a position requiring active nursing practice.

RNANT/NU Member # 5257

On May 17, 2019 the Chairperson of the Professional Conduct Committee approved a settlement agreement between RNANT/NU and the Member. The Member failed to comply with the Code of Ethics for Registered Nurses and the Standards of Practice when the member mocked and mimicked a patient who was dry heaving and vomiting and then made inappropriate, unprofessional and derogatory comments about the patient during morning report. The Member entered Alternate Dispute Resolution. As part of the settlement agreement the Member will complete the Interpersonal Aspects of Nursing self – study course at McEwan University.

RNANT/NU Member # 4394

On May 29, 2019 the Chairperson of the Professional Conduct Committee approved a settlement agreement between RNANT/NU and the Member. The Member failed to comply with the Code of Ethics for Registered Nurses and the Standards of Practice when the member logged into the electronic medical record of a patient the member was not caring for and had previously been directed not to care for this patient and not to review the electronic medical record. The Member entered Alternate Dispute Resolution. The Member will take the Responsible Nursing course at McEwan University.

RNANT/NU Member # 6367

On April 12, 2019 the Chairperson of the Professional Conduct Committee approved a settlement agreement between RNANT/NU and the Member. The Member failed to complete thorough head to toe assessments for the patients being seen. The Member failed to objectively, accurately and fully document assessments, plans of treatment and care provided for clients at the community health centre. The Member entered Alternate Dispute Resolution. The Member will complete the Documentation in Nursing course and the Health Assessment course at McEwan University.

Find a Nurse?

(Registration Verification Tool)

Find a Nurse is an on-line register that provides information for the public, employers and RNANT/NU members about the registration status of registered nurses in the Northwest Territories and Nunavut. When you visit our website at www.rnantnu.ca you will see in the top right corner a button entitled *Find a Nurse*. Click on this button to take you to the registration verification.

What is a registration verification tool?

The registration verification tool provides the name and registration number of members who currently hold active-practicing registration and are entitled to practice (RNs, NPs, courtesy registrations and temporary certificate holders). The expiry date of registration and registration status with RNANT/NU is displayed in Find a Nurse. If a nurse is not currently registered with RNANT/NU, they will not be listed in the search results. If your name is not displaying on the Find a Nurse tool please contact the office.

What kind of information is displayed about the member?

First and last name, registration status and registration number.

As a member can I find my registration number and status?

Yes, just type in your name and click apply. If you are currently registered you will see your registration number and status, if you are not listed please contact the office.

As an employer can I verify a nurse is licensed?

Yes, any employer or member of the public can check the registration status of our members. Enter the employees name and click apply. The next screen will be the employee's information. If the member is not listed, the member is not are not registered. If it says contact office under status please call our office at 867-873-2745.

CONNECTIONS

2019 Northern Nursing Graduates



Left to right: Back –Colin Morris, Stephanie Karhut, Jenipher Nakyanzi, Geraldine Whiteford, Jasmine Gordon, Jordan Erickson

Front- Kyle MacPhee, Lucinda Kanapetradu, Jody Prince, Hosai Ayoubi, Shania Clark, Danielle Wendehorst



Jody Prince recipient of RNANT/NU's Graduate Nurse Award for academic and clinical excellence with President Rommel Silverio at the Aurora Campus Convocation.

CONNECTIONS

Arctic College 2019 Nursing Graduates



2019 Arctic College Graduates Oopik Agulkark and Melynda Ehaloak



Melynda Ehaloak recipient of RNANT/NU's graduate nurse award for academic and clinical excellence with President-Elect Jennifer Pearce at the Arctic College Convocation.

CONNECTIONS

RNANT/NU History



NWT's First Class of Northern Nurses 1997!

Front Row: Kim Qilluniq: Cambridge Bay • Deana Kobasiuk: Yellowknife • Karin Binder: Inuvik • Lisa Bossert: Yellowknife •

Back Row: • Jennifer Tweed: Yellowknife • Jennifer Menzies: Yellowknife • Lester Maw: Yellowknife • Jean Furtan: Iqaluit • Maggie Jacobs: Yellowknife • Dawn Lappin: Fort Smith • Catherine Lauzon: Iqaluit •

CONNECTIONS

2019 Annual General Meeting

Iqaluit, Nunavut



Photos from our 2019 Annual General Meeting



Tim Guest, President– Elect CNA



CONNECTIONS



Congratulations!

Yellowknife nursing student to receive funds to create Indigenous health research

Allison Forbes, a third-year Bachelor of Nursing Student at Aurora College is set to receive a \$20,000 award. This award is funded by Hotiì ts'eeda, the Northwest Territories' health research support unit which is hosted by the Tłchq Government and funded by the Canadian Institutes of Health Research. Hotiì ts'eeda said Forbes will work with the Aurora Research Institute's Dr Pertice Moffitt "on several projects to broaden her perspective on Indigenous and northern health and research."

To view the full article on Cabin Radio, click [here](#)

Antimicrobial Stewardship in Primary Care

University of Waterloo's School of Pharmacy, with financial support from the Public Health Agency of Canada, has developed a new online self-paced course – *Antimicrobial Stewardship in Primary Care* – directed at community-based practitioners.

The course provides current information about the consequences of use of antimicrobial agents, general principles for antimicrobial stewardship in primary care, as well as strategies to optimize antimicrobial use in a variety of common clinical scenarios.

Those interested can learn more from the University of Waterloo website. The course summary, including pricing and accreditation details, as well as a short video trailer and registration instructions can be accessed here: uwaterloo.ca/pharmacy/ams

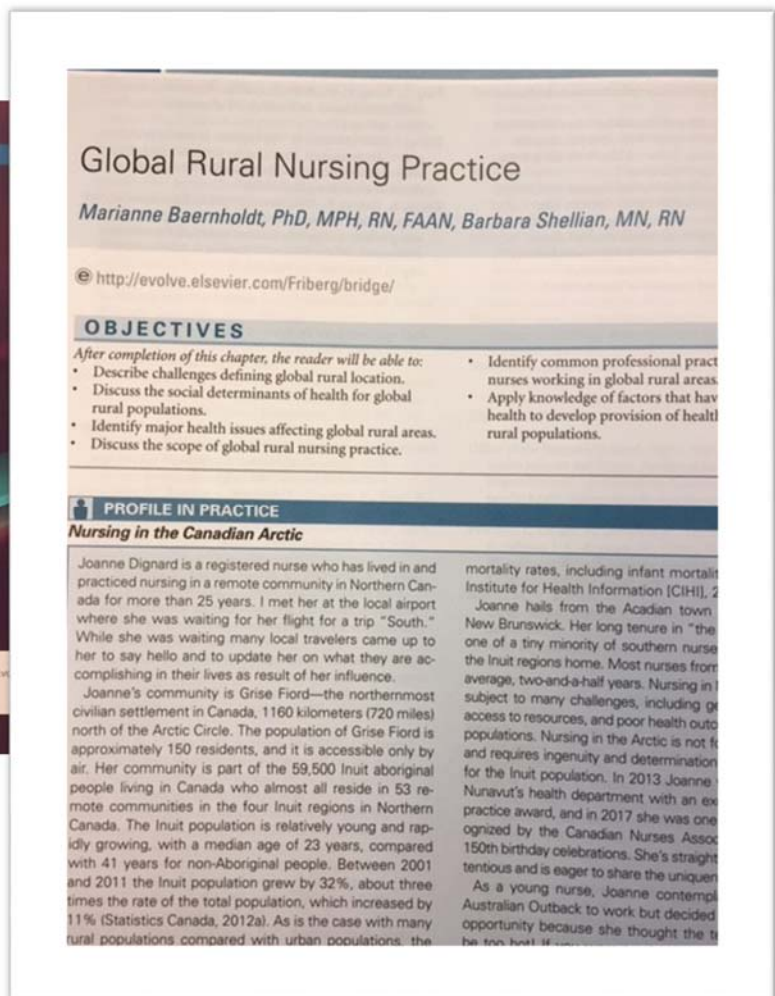
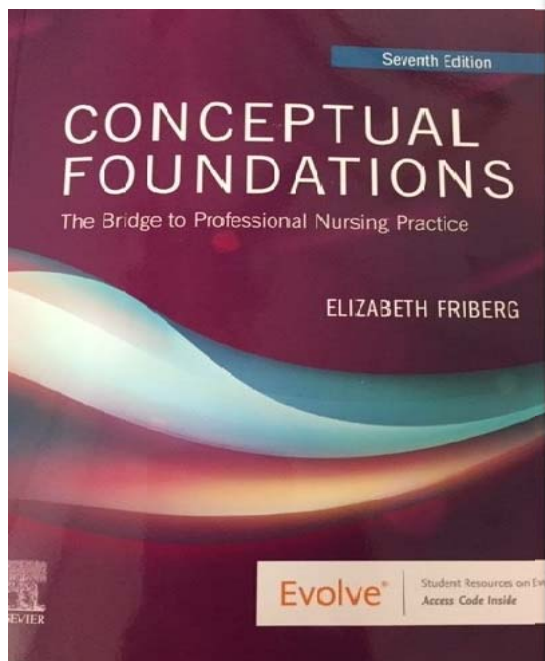
**ANTIMICROBIAL
STEWARDSHIP
IN PRIMARY CARE**

CONNECTIONS

Conceptual Foundations: Global Rural Nursing Practice

Written By: Marianne Baernholdt, PhD, MPH, FAAN

And Barbara Shellian, MN, RN



One of RNANT/NU's members has had the opportunity to share her experience of working in the Canadian Arctic. Joanne Dignard has been a nurse in the North for more than 25 years. To quote Barbara Shellian, "Joanne Dignard. Super Nurse of Nunavut." Marianne Baernholdt and Barbara Shellian have spent the past year creating a chapter for the Conceptual Foundations textbook on Global Rural Nursing Practice

You can read about Joanne's experience in Chapter 17: Global Rural Nursing Practice.

CONNECTIONS

Memorandum of Understanding between the Government of the Northwest Territories and RNANT/NU



On May 6th, 2019 the Minister of Health and Social Services, Glen Abernethy and RNANT/NU's President Rommel Silverio signed a Memorandum of Understanding to explore one regulatory body framework for all nurses in the Northwest Territories. RNANT/NU will work towards expanding the register to include Licensed Practical Nurses (LPN's) and Registered Psychiatric Nurses (RPN's). LPNs are currently regulated through the Professional Licensing Registrar of the Department of Health and Social Services. With the MOU both will be able to register with RNANT/NU.

CONNECTIONS



“Together we can strengthen the nursing voice across the Territories and make a positive impact on public safety and healthcare. The Registered Nurses Association of the Northwest Territories and Nunavut is looking forward to working with licensed practical nurses and registered psychiatric nurses to develop relevant and supportive standards of practice, scopes of practice, entry-level competencies, and a continuing competence program.”

Rommel Silverio, President, RNANT/NU

Emergency Care + Announcement

What is Emergency Care +? Emergency Care PLUS is sponsored by the Emergency Strategic Clinical Network at the University of Alberta partnering with the University of Alberta Department of Emergency Medicine and the University of Calgary and powered by the Health Information Research Unit, McMaster University, building on the McMaster Premium Literature Service, McMasterPLUS™. Emergency Care+ is a free subscription based service that will provide you with peer-reviewed, pre-appraised evidence to support your clinical practice.

To subscribe or to red more on Emergency Care+ [click here](#)

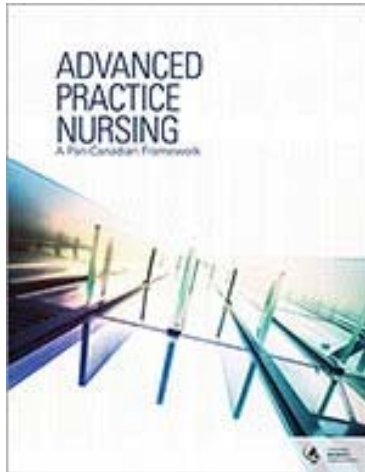
**EMERGENCY
CARE+**

PREMIUM
LITERATURE
SERVICES

 Alberta Health
Services
Emergency Strategic
Clinical Network™

McMaster
PLUS

CONNECTIONS



NEW from Canadian Nurses Association

Advanced Practice Nursing: A Pan-Canadian Framework

This document promotes a common understanding among nurses, other health-care providers, employers, policy-makers and the public of advanced practice nursing in Canada and its contribution to health systems and the health of Canadians. - See more at: <https://www.cna-aiic.ca/en/nursing-practice/the-practice-of-nursing/advanced-nursing-practice#sthash.UuWeGPJi.dpuf>

Global Network for Rural and Remote Nurses launched

CRANA GRIN (Global Rural and Isolated Nurses) - a Global Network for Rural, Remote & Isolated Nurses with the simple purpose of:

- Linking together our passionate and eager rural, remote and isolated nurses from all countries across the world.
- Generating opportunities to connect, collaborate, share, educate and support each other by our united caring profession.
- Levering affordable, accessible, high quality nursing practice to address the health and wellbeing of individuals, families and communities in rural and remote areas;

The first step in this connection with rural nurses across the globe is the launch of social media platforms – **no charge to join or participate!** Our plan is to have nurses share best practice and information - and who knows where it will go from there!”

Barb Shellian, RN, MN



WINTER IS COMING!!!

How will you spend your time?



VOLUNTEERS NEEDED!

PUBLIC REPRESENTATIVE BOARD OF DIRECTORS (NT)
PUBLIC REPRESENTATION BOARD OF DIRECTORS (NU)
NT NORTH BOARD OF DIRECTORS
EDUCATION ADVISORY COMMITTEE (RN)
REGISTRATION COMMITTEE (3 RNs & ONE NP)
NP COMMITTEE (3 NPs)
RN COMMITTEE (3 RNs)

Volunteer hours count towards your Nursing Hours.

Find the Passion, make a difference in your career and explore the possibilities today!
Committees meet monthly and/or every other month. Meetings start in September.

This is your opportunity to make a difference!

Email: info@rnanntnu.ca for more information, or stop by our office or contact:

Shawna Tohm, Director of Regulatory Services and Policy (867) 873-2745 ext. 22

CONNECTIONS

Canadian Nurses Association and the International Council of Nurses co-host “Nursing, Power, Advocacy – Helping Nurses Deliver”

Geneva, Switzerland; Vancouver, Canada; 3 June 2019 –International experts and key stakeholders gathered 1-2 June 2019 at a special Policy Event geared towards identifying solutions to helping nurses mobilise and deliver the best results for patients and the health system as a whole. The Canadian Nurses Association (CNA) and International Council of Nurses (ICN) hosted this event at the Simon Fraser University, in Vancouver, B.C., Canada.

With the Women Deliver Conference, the world’s largest conference on gender and equality, being held in Vancouver from 3-6 June 2019, CNA and ICN took the opportunity to hold an international colloquium to focus on the links among power, nursing and advocacy. The nursing profession is dominated by women and, as such, nurses experience gender inequality at individual, organisational and structural levels.

Annette Kennedy, ICN’s President, who gave the welcoming remarks said:

Gender inequality is a scourge that blights the lives of women and girls and diminishes the potential of everyone – women and men – to live the best, most productive, happiest and healthiest lives they can. We know that if we empower nurses, we will address gender inequality more generally.’

Claire Betker, CNA’s president, said: ‘CNA is grateful to have had the opportunity to co-host this event with ICN. It is very important to have these conversations and identify strategies within and outside the nursing profession that help address power imbalances. I believe all nurses are leaders and we need help empower nurses to be leaders in their communities.’

The event kicked off Saturday evening with a welcome from Katja Iversen, President and CEO of Women Deliver, followed by an inspiring conversation with Autumn Peltier about youth, the voices of young women and the challenges of mustering personal courage and power. Autumn is a 14-year-old girl who was nominated for the 2017 International Children’s Peace Prize for her inspiring advocacy for clean and reliable drinking water. The conversations continued into Sunday where participants heard from and had the chance to engage with numerous inspiring leaders on the impacts and challenges of nursing. Nurses are leaders! The profession has tremendous power to influence health economics and population health.

To read the full article please go to ICN website <https://www.icn.ch/news/canadian-nurses-association-and-international-council-nurses-co-host-nursing-power-advocacy>



CONNECTIONS

2019 Nursing Week

Yellowknife nurses meet for dinner to celebrate
Nursing Week



Photo's Submitted by Sheila Humphrey

CONNECTIONS

Canada joins the Nursing Now Campaign!

Nursing Now is a global movement that aims to improve health by raising the profile and status of nursing and midwifery.

Nursing Now Canada is based on a strong three-point action plan with a nursing leadership pillar, a CNO pillar, and an Indigenous pillar. The goal of the nursing leadership pillar is to establish a comprehensive Canadian hub of leadership development. The Chief Nursing Officer (CNO) pillar, will focus on establishing federal, provincial and territorial CNO's who are in positions of leadership. Finally, the goal of the Indigenous pillar is to enable and support the current and future nursing and midwifery workforce to provide culturally safe care across Canada.



See more at : <https://www.cna-aiic.ca/en/news-room/news-releases/2019/canada-joins-the-global-nursing-now-campaign>

2020– Year of the Nurse and Midwife

On January 30, 2019, the World Health Organization (WHO) Executive Board declared the year 2020 will be known as the “Year of the Nurse and Midwife.” The year 2020 is significant for WHO in the context of nursing and midwifery strengthening for Universal Health Coverage. WHO is leading the development of the first-ever State of the World’s Nursing Report which will be launched in 2020, prior to the 73rd World Health Assembly. The report will describe the nursing workforce in WHO Member States, providing an assessment of “fitness for purpose” relative to GPW13 targets. WHO is also a partner on The State of World’s Midwifery 2020 report, which will also be launched around the same time. The NursingNow! Campaign, a three-year effort (2018-2020) to improve health globally by raising the status of nursing will culminate in 2020 by supporting country-level dissemination and policy dialogue around the State of the World’s Nursing report.

Read the full article [here](#)



CONNECTIONS

DID YOU KNOW?

We have been updating our website, visit us today at www.rnantnu.ca to see the new sections.

Registration FAQ

<http://rnantnu.ca/rn-information/registration-faq>

Here you will find the most common questions new applicants ask during the registration process.



Nurse Practitioner FAQ

<http://rnantnu.ca/np-information/faq>

Here you will find the most common questions from Nurse Practitioners.

Renewal Information

<http://rnantnu.ca/rn-information/renewal>

Education Opportunities

Please visit our redesigned educational opportunities section. Here you will find links to conferences, education opportunities and informative webinars. If you know about an event, submit it to execast@rnantnu.ca

<http://rnantnu.ca/professional-practice/professional-development>

Employers Section

Coming soon!

Celebrating our First Year at our
New Location!

4921 49th Street, 3rd Floor

X1A 2N9

CONNECTIONS

CADTH

Sensory Rooms: A treat for the senses and a treatment for dementia?

Many of us have been affected by dementia, either directly or indirectly. When a loved one is diagnosed with dementia – a general term that refers to the progressive impairment of various mental functions – it can be devastating. While the condition currently affects 46.8 million people worldwide, this number is only expected to increase as people continue to live longer, and it is projected to affect 74.7 million people by 2030.

In addition to impaired memory, patients with dementia may experience a range of other symptoms, such as difficulties with reasoning and judgment, speaking or writing coherently, recognizing familiar surroundings, planning and carrying out complex or multi-step tasks, caring for themselves, and/or managing their mood and behaviour.

Alzheimer disease is the most common cause of dementia, accounting for about 60 to 80 per cent of cases. However, other potential causes of dementia include a range of degenerative diseases and/or vascular (blood vessel) diseases. These can independently lead to dementia, or they may co-exist with Alzheimer disease as a person gets older and contribute to worsening symptoms.

Medications are available for treating dementia. However, while these have been shown to produce moderate benefits in the short term, they have also been associated with safety concerns. As a result, there has been interest in further exploring non-pharmacological options (alternatives to medications) for patients with dementia.

One potential non-pharmacological treatment option is the use of a room equipped with a variety of sensory stimulation equipment, sometimes called Snoezelen therapy. In these rooms, patients' senses of sound, sight, smell, and touch are stimulated using an array of equipment – for example, fibre optic lighting, aroma diffusers, projectors that generate changing colours and patterns, and water beds that gently vibrate and play music. Each form of sensory stimulation can be used independently, or in combination with other modalities, depending on what is most suited to each individual patient.

It has been suggested that Snoezelen therapy may be used to treat many conditions such as patients with learning disabilities, mental health challenges, autism, brain injuries, and more. Snoezelen therapy has also been explored as a potential therapeutic modality for elderly patients with dementia.

An interesting feature of Snoezelen therapy is that it can be used for different purposes depending upon a patient's needs. For example, it can be used to calm a patient who is experiencing dementia-related agitation or behavioural disturbances (it has been suggested that sensory stimulation can improve mood and reduce behavioural problems). On the flip side, a sensory room may be used to provide a greater degree of stimulation and engagement with the world to a patient who is lacking such multi-sensory stimulation in their day-to-day life.

Continued

CONNECTIONS

However, despite all of the proposed benefits of sensory rooms for patients with dementia, there remain key questions: Do they really work? Is there research out there to support their use? Are they a cost-effective use of health care dollars? Is there any guidance regarding how best to use them, and for which patients they might be most useful?

To help guide decisions about sensory rooms such as the Snoezelen environment, decision-makers and the health care community turned to CADTH – an independent agency that finds, assesses, and summarizes the research on drugs, medical devices, tests, and procedures – to find out what the evidence says.

A recent CADTH review of sensory rooms for patients with dementia in long-term care identified two systematic reviews, three randomized controlled studies, four non-randomized studies, and two evidence-based guidelines on this topic. CADTH’s review found that although sensory room therapy seems to improve symptoms of dementia, at least in the short term, it is unclear if these improvements are significantly different than those that can be achieved with other sensory therapies – including garden visits, massage, aromatherapy, individualized music therapy, animal-assisted therapy, toy therapy, and exercise therapy. Additionally, these therapies may be less expensive to implement than sensory rooms, which can cost from \$10,000 to \$30,000 or more depending on the complexity and quantity of equipment used.

CADTH also identified two evidence-based guidelines that recommend non-pharmacological treatments for dementia and include multi-sensory stimulation as a potential option. However, more research is still needed to further evaluate the benefits of sensory rooms in comparison to other similar treatment options in order to determine their most appropriate place in therapy.

View CADTH’s full report, [here](#)

And if you would like to learn more about CADTH, visit cadth.ca, follow us on Twitter @CADTH_ACMTS, or speak to your Liaison Officer for the Territories – Dawn Cervo

This article originally appeared in the March 2019 issue of Hospital News — Canada’s Health Care News and Best Practices.

CONNECTIONS

Stanton Territorial Hospital Move Day: Second year nursing students' perspective on moving the surgery unit

Nezerene Antioquia, Jill Grobbeck, Emily Hamm, Ling Lou, Pureza Tenebro,
April Wu, Rosalee Taylor, RN

On May 26, 2019 the second year nursing students from the Aurora College Bachelor of Science in Nursing program participated in the Stanton Territorial Hospital move to the new building. During the week prior to the event, the daily routine on the surgery unit was interrupted by the necessity of packing and preparing for the final stage of scheduled change. At times, the students witnessed varied heightened emotions expressed by hospital staff. Through group discussion we identified possible reasons for the change observed. We chose the central topic of coping to discuss in seminar so that we could then identify our own personal strategies for navigating times when routine is off balance, and to define our role in participating in a successful transition to the new building. Because we did not truly inquire through any scientific process the exact reasons for the signs of stress noted, our reasons could be absolutely wrong. We narrowed the causes down to added responsibilities, gap in resources, communication, change, interrupted leadership and leadership into an unknown process as our possible explanations for additional sources of stress. After organizing these concepts onto a mind map the nursing students then added strategies to improving their own performance and participation in the clinical setting during the move.

In preparation for the move, the instructor met with the surgery unit clinical coordinator (CC), to discuss the role of the six students. To minimize the chance of miscommunication and medication errors, it was decided that the second year nursing students would not administer medications the week of the move as there would be up staffing of registered nurses (RNs) and preceptored third year nursing students. The instructor would remain on the old unit until the last student transferred over with their client, and the CC and RNs would be receiving the clients and the students in the new hospital. Students were to assist their client(s) to unpack and organize their belongings and orient them to the new unit, along with expected nursing care.

From our perspective, the move from the old surgery unit to the new surgery unit went without complications and was a positive learning experience. Students were assigned their client(s) the day before as is normal procedure so they can look up medical diagnosis and anticipate necessary nursing care. Following morning report, the students focused on completing assessments and personal care for their client(s), completing all charting and finish packing client belongings.

Continued....

CONNECTIONS

Student's thoughts:

“Before the moving day, every individual working in the surgery unit was busy doing their part to contribute to the preparation for the transfer from the legacy building. The move to the new Stanton hospital environment brought mixed feelings among the different members of staff. While some of the workers seemed to be excited about the changes, others were coping with the additional responsibilities. However, the move was organized because of how effective strategies were put up. To ensure smooth communication between the different members of staff and the moving team, they wore shirts with different colors, thus promoting secure identification procedures. I felt that I had adequately prepared to assist my patient in moving to the new hospital environment, mainly because of how I was able to help him in packing his items and made sure that all the assessments had been completed promptly. By 9:30 am, my patient was prepared for the transfer because I had accorded him the relevant assistance required before he was removed from his soon to be historical bedroom. One of the fascinating aspects of the transfer was that the patients were moved indoor through the transitory tunnel from the Legacy building to the new Stanton hospital. The patients were in their beds during the entire process of moving them to the new environment. Once they arrived at the entrance of the new hospital, the patients were met by the receiving team who first cleaned the bed wheels of the patients before entering into the bright and spacious lobby. The entire process became prosperous due to the excellent team effort conducted by most individuals, thus making sure that the safe transportation of patients to the new facility was successful. Even though the transfer had some minor challenges and issues noted, I believe that the entire process was outstanding and exciting. From today onwards, I wish that all the patients will continually receive the holistic health needs they deserve as they continue on their journey in this new place of recovery- Cheers to the North's huge milestone!” Pureza Tenebro

“As a student, I was lucky enough to be absolved from any real stress surrounding the logistics of the hospital move and instead was able to utilize the day as a learning experience. We began our clinical practice experience on the Surgery Unit with the impending move steadily resting at the back of our minds, and how could we not, when all of Stanton appeared to be in a frenzy. Although there were many challenges in the time leading up to the move, as a student I was ecstatic. I remember the moment I had finally been able to step into the new hospital for orientation and feeling overwhelmingly excited for my future as nurse in the North. However, it seemed as though not everyone felt the same way. I received mixed reviews from staff members and nurses alike, some people were excited, as I was, but many others were very critical of the new hospital. Of course, moving to a new building will be a drastic change, and with that comes inevitable resistance and criticism. However, I could not move past the fact that people seemed to be overlooking how lucky we are. Yellowknife continues to be the epicenter for healthcare in the NWT, people from across the territories arrive here, miles away from home, and we are able to provide them with a beautiful, new, clean space dedicated to their healing. On the day of the actual move, I was surprised by the fluidity of the patient moving process. Although there were some minor issues in communicating the student's role in the move, everybody involved knew their responsibilities and carried them out flawlessly. I am honored to have been a part of this historic change for Yellowknife, and look forward to working in new Stanton during this period of transition.” Emily Hamm

CONNECTIONS

“I had a critical care patient on the hospital move day, it was quite a success. Before move, the personnel from the moving company engaged a RT, a critical care nurse, the relative of the patient, and me (nursing student) into the patient’s transferring care with instructions and things we needed to be aware of. With instructions and information, every healthcare provider still had their own autonomy to get on their tasks. The patient arrived to her bedroom in the new hospital safely less than three minutes. Upon arrival, the RT, PT and critical care nurse did their assessments and provided patient care with the supplies they brought over from the old hospital collaboratively. They also updated patient’s condition to the unit CC. The unit CC oriented the patient and family to their room and unit. In the next day, the RT and PT also came to ensure the patient was adapting to the new environment adequately and safely. The patient and relatives both appreciated the holistic care they received.” Xinying Wu

“I felt the hospital move went quite well overall. I felt that the scheduled night shift nurses that worked the night before the move reported off to the nurses well, and had the unit quite organized, with the morning medications separated into little bags, and the patients charts in individualized bags. I felt that we were lucky with the time of our move as we were able to finish all of our assessments, vital signs, and documenting before the move happened. This allowed for a smooth transition, as well gave us the time to explore the new unit, and find out where supplies were placed. During the transition of the move I felt that there was lots of staff scheduled to help allow for a smooth and successful transition. The extra staff had specific colored t-shirts that were labelled with their specific role on the back, which I felt also helped with a smooth transition, and organization. The moving team was excellent! I understand that this is their job and they are trained to do this, but I was just very surprised at how amazing their team was, they made the move run very smoothly, and I felt they were very professional. I felt that the clinical coordinator and manager of the surgery unit communicated well with the nurses on the unit, and felt that they were consistently checking in with their staff to make sure they were doing okay throughout the move and afterwards. I think part of the success of the surgery unit is that most of the patients are quite stable, and adjusted to the move well. As well, most of the patients on the surgery unit have been there for a few weeks, so the nurses are familiar with the care that they require. I think this also allowed for a successful move.” Jill Grobbecker

“I think it was a successful move as evidenced that we were able to move all the patients safely. I observed good communication between the moving team and the nurses. The managers demonstrated good leadership qualities- they were calm, had good communication skills, and supported the staff. They prepared for the move such as packing all the patients’ supplies early. They organized well with each member of the moving team having a different color T-shirt to represent the different roles in the moving team. They did a good job in evaluation as well. As an example, the review team followed up each unit. As a nursing student, I felt we should get a better orientation to the wall equipment, meanwhile it was also not convenient that we did not have an access card.” Ling Luo

CONNECTIONS

“One of the highlights of the move for me was seeing my patient’s biggest smile when he saw his new room. The room was bigger, brighter, and the TV has everything you needed to be entertained - it has the regular channels, radio, the internet, and so much more! Also, I was able to focus on client care and orienting patients to their new surrounding rather than unpacking and getting everything in place because most of it was completed beforehand. The teamwork and communication between staff was truly exceptional and the success of the move was apparent. Overall, this once-in-a-lifetime experience made me appreciate and embrace “change” better as I already started seeing the outcome even in a very short period of time. I look forward to continuing my learning in this new hospital and facilitate success not only to as students, but to all patients and staff.” Nezerene Antioquia

Post Move

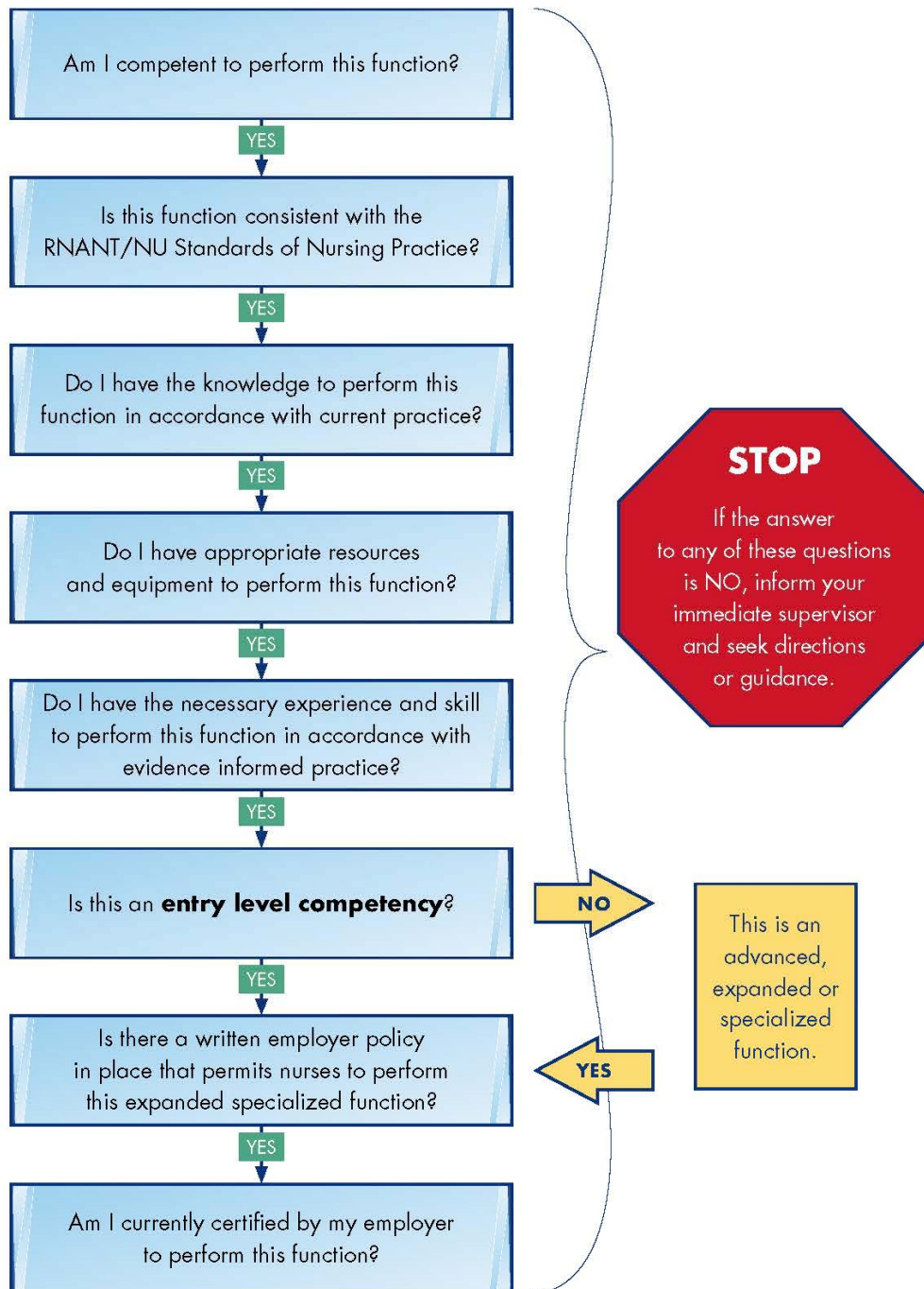
We met for seminar following three 7.5 hour shifts on the new unit and discussed what aspects were successful and not successful, and leadership qualities observed and/or demonstrated. The students’ examples were recorded. Key concepts identified throughout the discussion were communication, preparation, organization and evaluation. Overall, the students felt well prepared for the move because they were part of the process on the actual day, understood their role and planned their shift to meet specific needs before and after the transition. The students commented on “good communication” amongst members of the moving team, and between the surgery CC and the manager; and they expressed appreciation for the times the manager and CC checked in with them throughout the three shifts.

The students identified ongoing evaluation as necessary to maintain the strong team effort and establish unit routines. Continued communication with students and instructors was strongly recommended, especially as the students head into summer break and anticipate more changes within and between the units. There was a unanimous request by the students for another orientation to the location of units in the hospital, and specific equipment such as the lifts, televisions, macerators, mealtimes and the phone system, which at time of our seminar was still a grey area or not working at all. The experience was important because we were able to observe excellent role modelling in nursing staff and behavioral skills required to navigate through change while keeping client safety and wellbeing at the forefront of responsibilities. We would like to extend our appreciation and gratitude to Merrill Cooper, the CC of surgery unit and the surgery staff for their generosity and guidance and allowing us to participate in this massive experience.

Submitted by Rosalee Taylor, RN



Framework for Decision Making: Individual Scope of Practice



Continuing Education

Webinars

CNPS; Social Media and Technology

July 24, 2019

An increasing number of nurses are using mobile devices and apps as tools to assist in daily clinical care. As well, the use of social media by nurses is growing. Participate in this upcoming CNPS webinar to learn more about the legal risks Register [here](#)

CNPS: Communication with the Police

August 14, 2019

Nurses interact with the police in a number of ways. They may be asked to respond to inquiries from police, they may be required to contact the police to assist in managing unsafe patient situations, or they themselves may be the subject of a police inquiry. Communicating with the police can raise some important legal, professional and ethical issues.

Register [here](#)

University of Saskatchewan:

CEDN is offering a Suturing and Surgical Skills Workshop for RN(NP)s on September 28th. Join Dr. Henry Obamuyide for a day of hands on practice for RN(NP)s who have had previous training and experience with suturing.

September 28, 2019

University of Saskatchewan

Register click [here](#)

University of British Columbia

The 9th International Research Conference on Adolescents and Adults with FASD: Review, Respond and Relate – Integrating Research, Policy and Practice Around the World

April 22-25, 2020

The Hyatt Regency

Vancouver, BC

Find more information [here](#)

College of Registered Nurses of Manitoba:

Accountability and Responsibility (Repeat)

Explore how accountability supports excellence in your practice. Please note information shared in this presentation is based on registered nursing practice expectations.

To watch the webinar [here](#)

University of British Columbia: Healthy Mothers and Healthy Babies Conference 2020

Innovation and Equity: The Foundation to Quality Perinatal Care in 2020

February 21-22, 2020

Vancouver, BC

Register [here](#)

Speciality Conference's

International Conference on Nursing Midwifery Studies

August 7-8th, 2019

Vancouver, BC

[Click here](#) to go to their website

World Indigenous Cancer Conference

September 17-19, 2019

Calgary, AB

[Click here](#) to go to their website

Psychiatric and Mental Health Nursing

September 18-19, 2019

Vancouver, BC

[Click here](#) to go to their website

Canadian Hospice Palliative Care Nurses Group

September 19-21, 2019

Ottawa, ON

[Click here](#) to go to their website

Canadian Society of Gastroenterology Nurses & Associates

September 19-21, 2019

St. John, NL

[Click here](#) to go to their website

International Conference on Pain Management Nursing and Practice

September 24 & 25, 2019

Vancouver, BC

[Click here](#) to go to their website

Canadian Federation of Mental Health Nurses

October 9-11, 2019

Winnipeg, MB

[Click here](#) to go to their website

Canadian Association of Nurses in Oncology

October 20-23, 2019

Winnipeg, MB

[Click here](#) to view their website

Canadian Association of Nephrology Nurses and Technologists

October 23-26, 2019

Edmonton, AB

[Click here](#) to view their website

Canadian Association of Perinatal Women's Health

November 8-10, 2019

Vancouver, BC

[Click here](#) to go to their website

CONNECTIONS

SAVE-THE-DATE



BABY-FRIENDLY INITIATIVE 2019 SYMPOSIUM

Beyond the Ten Steps: Critical Connections for Transformative Change

October 1-3, 2019 . Yellowknife, Northwest Territories

REGULAR REGISTRATION DEADLINE: August 30, 2019

More Information & Registration: www.bfisymposium.ca

