



Edition 4

Summer 2022



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NEWS & NORTH

A message from RNANT/NU and YRNA

Welcome all to summer 2022 and the fourth edition of our joint RNANT/NU and YRNA newsletter. Over the last three editions we have had opportunity to connect nurses in the north with one another and highlight shared issues and areas of focus not only in nursing, but in health care in general. Nurses comprise the largest health care workforce in the world and ensuring that nursing professionals remain connected enhances the collective strength of the nursing 'voice'. We do hope you're enjoying this new format and always invite feedback and commentary.

As we reflect on the first half of 2022 we remain focused on key issues that are impacting the profession across this country. COVID-19 remains a concern as many parts of the world are grappling with an increase in cases due to the BA4 and 5 Omicron subvariants. Parts of our own country are seeing a rise in cases and BA5 is on track to become the dominant variant within the next several weeks. Nurses will remain vigilant and at the forefront of immunization and management of COVID-19 as we watch with caution what the late summer and fall of 2022 bring us.

Additionally, around the world and in Canada we are dealing with a nursing shortage. Issues of a nursing shortage and problems with recruitment and retention have been exacerbated by the COVID-19 pandemic. However, this is not a new challenge and nursing has been raising the alarm on these issues for decades. In 2009, the Canadian Nurses Association wrote a report warning of a shortfall of about 60,000 nurses by 2022. While this was estimated in 2009 and was based on a number of factors such as retirement age it did not account for the COVID-19 pandemic, which has accelerated this. Moreover, the International Council of Nurses in its 2020 'State of the World's Nursing' report warned of global nursing shortages and outlined strategies to mitigate this. Educating more nurses is of course important but the other key issue is retaining those we have in practice and one way to do is to enhance opportunities for nursing leadership.

The call to advance nursing leadership has been growing over the past decade. The World Health Organization recently named leadership as one of four strategic directions and policy priorities for 2021 to 2025. Areas of particular focus include increasing the number of nurses in senior health positions, strengthening nursing input into policy, and investing in leadership skills development for nurses. Nurses must also be empowered to work to top of scope. Additionally, increasing minimum staffing requirements, providing additional mental health and wellness support services, implementing peer mentorship programs, and promoting stress management are all methods to employ to better conditions for nurses and to help ease and prevent further stress and anxiety affiliated with the pandemic.

Understanding the important role of nurses in health care system leadership, and the ways in which nursing as a profession and a discipline can lead health care system transformation in a time of increasing demand and complexity are essential as we navigate these challenges. There is also opportunity to develop nursing leadership at all levels and stages including with health care organizations, professional associations, and government.

We look forward to continuing our work in collaboration with our registrants to bring about nursing-led, systemic change.

Denise Bowen, MN, RN, Executive Director/Registrar, RNANT/NU

Jerome Marburg, LL.B. MBA, CEO, YRNA



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Canadian Nurses Association- Annual General Meeting

On June 16, 2022, the Canadian Nurses Association (CNA) held its Annual General Meeting. CNA's governance changes were finalized and a new President-Elect, Vice-President and four new board directors were installed in what has been an historic year for CNA.

Congratulations to:

- President-Elect, Kimberly LeBlanc
- Vice-President, Tracie Risling
- Incoming board directors:
 - o Leila Gillis
 - o Megan Hudson
 - o Farah Khan
 - o Bukola Salami

Read their annual report.

Read their bylaws.

Covifenz: Medicago's COVID-19 Vaccine

Background

On February 24, 2022, following a thorough review of clinical trial results to ensure safety and efficacy, Health Canada approved the Medicago 'Covifenz' COVID-19 vaccine for use in adults aged 18 to 64. The Covifenz vaccine is a plant-based recombinant adjuvanted vaccine with virus-like particles, the first of its type to be approved for use against COVID-19 in Canada.

The Covifenz vaccine is:

- Offered as a two-dose primary immunization series
- 71% effective at preventing COVID-19 in clinical trials
- Safe when stored at standard refrigerator temperature (2-8 degrees Celsius)
- Viable at room temperature for up to six hours after being reconstituted

As with other vaccines, due to the length of time required for production and procurement, the timing of the roll out of the Medicago Covifenz vaccine is unspecified.

ii Health Canada. 'Medicago Covifenz COVID-19 vaccine.' Mar 31, 2022. https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/vaccines/medicago.html.





i Health Canada. 'Health Canada authorizes Medicago COVID-19 vaccine for adults 18 to 64 years of age.' Feb 24, 2022. https://www.canada.ca/en/health-canada/news/2022/02/health-canada-authorizes-medicago-covid-19-vaccine-for-adults-18-to-64-years-of-age.html.

Manufacturer

Medicago, the company that developed the Covifenz vaccine, is a Canadian-based biotechnology company. Federally funded construction is currently underway to expand their Quebec-based research and development centre into a large-scale manufacturing facility, and upon completion, is projected to be able to produce approximately one billion vaccine doses per year. It is expected that the centre will be fully operational by early 2024. Federal funding for vaccine development, including funding to Medicago for the development of the Covifenz vaccine, was an integral part of Canada's Plan to Mobilize Science to Fight COVID-19. Launched during the first wave of the pandemic, this significant response included \$192 million in new funding through the Strategic Innovation Fund COVID-19 stream. The intention was to rapidly enable domestic researchers and manufacturers to help tackle COVID-19 transmission, morbidity, and mortality. The decision for publicly funding development of the Covifenz vaccine must be considered within this first wave pandemic context.

Medicago announced Health Canada approval for the Covifenz vaccine in February 2022. However, while the Medicago Covifenz vaccine is authorized for use in Canada, the vaccine was rejected by the World Health Organization (WHO) in March 2022 due to Medicago's ties to the tobacco industry. Phillip Morris International, a multinational tobacco manufacturing company, owns a one-third equity stake in Medicago.

The WHO Framework Convention on Tobacco Control (FCTC) treaty directs signatories to not endorse or participate in partnerships with the tobacco industry or organizations working with the industry. The WHO has been clear that it is unlikely that the Medicago Covifenz vaccine will ever receive approval for global use due to such approval violating the FCTC. Canada is a signatory to this treaty. Health Canada has argued that vaccine production does not relate to tobacco control and therefore investment and approval of the Covifenz vaccines does not constitute a violation of Canada's commitment to the FCTC treaty. Global partners including the WHO disagree with this position. As a result, Canada will not be able to contribute doses of Covifenz to COVAX for global distribution, as COVAX requires that vaccines must be listed with the WHO. WHO vaccine is approved by Health Canada, it will still be available domestically, and sale of the vaccine may take place privately to countries with regulatory approval in place.

Conflicting Positions: Nursing and Public Health Protection

Nursing has a long history of professional and patient advocacy in tobacco control and advancing cessation of tobacco use. Indeed, nursing researchers have contributed substantially to the literature on not only the harms of tobacco but also to therapeutic approaches to supporting tobacco reduction and cessation. Nursing has also actively engaged in equity-driven advocacy regarding tobacco use, noting that tobacco use disproportionately impacts equity seeking groups, resulting in preventable health disparities and deaths directly attributable to the use of tobacco products. Nurses acknowledge that they are uniquely positioned in their daily practices to intervene to reduce to harms of tobacco on patients and communities.

viii Dyer, Owen. *BMJ*. 'Covid-19: WHO set to reject Canadian plant based vaccine because of links with tobacco industry.' Mar 28, 2022. https://doi.org/10.1136/bmj.0811.





iii Arthur, Rachel. *BioPharma Reporter*. 'Plant-based COVID-19 vaccine approved in Canada.' Feb 28, 2022. https://www.biopharma-reporter.com/Article/2022/02/28/Plant-based-COVID-19-vaccine-approved-in-Canada.

iv Palmer, Eric. FiercePharma. 'Medicago building \$200M plant to manufacture vaccines from plants.' May 20, 2015. https://www.fiercepharma.com/supply-chain/medicago-building-200m-plant-to-manufacture-vaccines-from-plants.

V Government of Canada. Prime Minister of Canada. 'Canada's plan to mobilize science to fight COVID-19.' Mar 23, 2020. https://pm.gc.ca/en/news/news-releases/2020/03/23/canadas-plan-mobilize-science-fight-covid-19.

vi Medicago. Medicago: News releases. 'Medicago and GSK announce the approval by Health Canada of COVIFENZ®, an Adjuvanted Plant-Based COVID-19 Vaccine.' Feb 24, 2022. https://medicago.com/en/press-release/covifenz/.

vii Khan, Ahmar. *Global News*. 'WHO rejects Medicago's COVID-19 vaccine due to ties to tobacco giant.' Mar 25, 2022. https://globalnews.ca/news/8709277/who-rejects-medicago-covid-vaccine-tobacco-industry/.

Nurses are also the cornerstone of public health intervention, serving as the largest group of immunizers in Canada and the leading experts on public health practices including vaccination. Throughout the COVID-19 pandemic, nurses have led population level interventions including mass immunization campaigns, vaccine education, and have worked one-on-one with the vaccine hesitant to achieve Canada's high rate of vaccine uptake. Nurses understand that in addition to following all public health measures, vaccines and booster doses with an approved vaccine are fundamental to protecting against illness and death. As experts in vaccine delivery and as leaders in public health, nurses know that the approval of additional vaccines to fight COVID-19 is beneficial in providing options, opportunities for dialogue and, as a result, increase vaccine uptake to prevent disease and death.

Given the dual history of nursing's leadership and advancement of both addressing harm related to tobacco and public health protection through vaccination, the Medicago Covifenz vaccine presents a unique challenge to nurses and to nursing as a profession. Weighing the benefits of immunization against the harm of tobacco is not simple, nor is it a clear moral line. Nurses have a responsibility to seek out evidence to inform their practices and to ensure that recommendations made to patients, families, and communities are evidence informed and supportive of health and wellbeing. While nursing as a profession may be committed to political advocacy on a multitude of public health interventions, nurses have a responsibility to focus on patient autonomy and support informed decision making in all health and wellness choices. It is therefore important for nurses to understand the issues surrounding a therapeutic intervention such as the Covifenz vaccine so they can both advocate for appropriate use of public funding for the public good as professionals and enable informed consent and patient-centred decision making when offering patients this vaccine as practitioners.

Nurses in Patient Care

- Provide accurate and evidence-informed information on the full range of Health Canada approved immunizations available to protect against COVID-19.
- Be prepared to answer questions regarding the history and development of the Covifenz vaccine, centring patient autonomy and informed decision making and consent at all times.
- Engage nurse-led nursing teams in dialogue about the difference between patient-led decision making and political advocacy, reinforcing that nursing engages in both and identifying the ways in which nurses can thoughtfully hold the resultant tension in practice.







Nurses in Education and Research

- Use the Medicago example as a case study in nursing ethics and advocacy to advance dialogue and knowledge on holding ethical tension and advancing conflicting political advocacy agendas from a nursing perspective.
- Grow nursing ethics research to include knowledge regarding ethical decision making in the context of political advocacy for the public good.
- Engage student nurses of all designations in dialogue about the differences between nursing's professional advocacy and the role of the nurse in supporting patient autonomy and decision making.

Nurses in Policy and Leadership

- Be vocal about nursing's history in both tobacco reform and immunization, centring our disciplinary and professional contributions.
- Provide feedback to elected leaders and public servants regarding the challenges introduced into nursing practice by public funding decisions.
- Ensure nursing's unique perspective and voice are present and active at every table where health decisions are being made; advocate for nursing presence and voice at tables where nurses are currently absent, including in federal funding and pandemic response.

Conclusion

Nurses are self-regulating, autonomous professionals whose practice includes public health advocacy and political action in the public interest. Our history in tobacco reform is a history of political advocacy because the harms of tobacco are self-evident and the scientific evidence unequivocal. Our history also includes advocacy in support of public health safety, including a significant history of advancing immunization as the most effective public health intervention. Nursing's unique disciplinary and professional contributions to both tobacco reform and immunization introduce complexity when advising patients and communities on the use of the Covifenz vaccine. Nursing as a discipline has held these complexities before, balancing individual patient care with population health advocacy. The Medicago Covifenz vaccine is an opportunity for nurses to recognize and explore the full breadth of nursing practice and to hold political and practice tensions. Nursing knows that health care is complex and that we have what it takes to meet patient care needs while advancing population health.

Excerpted and revised permission from Nurses and Nurse Practitioners of BC.

Roe v. Wade

It is important for Canadian nurses and the patients, families, and communities to pay attention to legal changes that impact health care, regardless of whether those changes occur here in Canada or in other countries. That noted, it is equally important for nursing to understand how changes in other countries have the potential to mirror the legal and regulatory frameworks for health care in Canada.

In Canada, abortion was legalized in 1969 under the condition that continuing the pregnancy was likely to endanger the life or health of the woman. In 1988 the Supreme Court of Canada ruled in R v Morgentaler, [1988] 1 SCR 30 that the existing 1969 law violated a woman's right to life, liberty and security guaranteed under Section 7 of the Canadian Charter of Rights and Freedoms (est. 1982). Abortion in Canada is therefore a legal medical procedure available at all stages of pregnancy and is





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publicly funded under the Canada Health Act and provincial health care systems. It is important to note that access to abortion services may vary depending on region, and that barriers do exist in some regions.

As organizations, we support the current Canadian legislation on abortion and believes strongly that the ability to access reproductive health care including safe, legal abortion is a fundamental human right. As we know, laws banning abortion do not end the need for reproductive health care and choice; rather legislative bans only serve to make access to safe abortions more difficult. Lack of access to safe abortion services puts the lives of pregnant people at risk. The risk is also disproportionate, more significantly impacting those without access to private health care and funds for travel to jurisdictions with full spectrum reproductive health choices.

We will continue to monitor the threats to access reproductive health care in the US. Our organizations remain unequivocal in our support of access for all people to safe, legal reproductive health care as part of publicly funded health care services.





HIGHLIGHTS E YUKON



Highlights from the Yukon

Continuing Competency Program

Continuing Nurse Education Fund

• YRNA is pleased to provide registrants access to the Telus Health MyCare™ service. A subscription fee for all practicing Nurse Practitioners and Registered Nurses to access the service has been paid through October 2022. YRNA hopes and expects that the service will continue beyond that date and will update registrants as soon as more information is available.

Telus Health MyCare™ is

- o Free to use for YRNA registrants
- Unlimited (access services as often as needed)
- A real-time virtual connection with mental health providers, physicians, licensed counsellors, and life coaches to enhance your physical and mental health.
- Secure (all data is safely stored on Canadian servers)

Telus Health MyCare™ provides services in mental health, physical health and with nutrition. Simply download the app, enter a special code, and start using the service from the privacy of your own home.

To learn more and to obtain the code, please email us admin@yrna.ca.

- On May 2022 the YRNA Board passed a unanimous resolution adopting a *Cultural Safety Practice Standard* for Nurse Practitioners and Registered Nurses practicing in the Yukon. <u>Learn more</u>.
- In case you missed it, review the 2021/22 YRNA Annual Report.
- Mandatory Education Requirement for Continued Registration Yukon First Nations 101 Beginning April 1, 2022, YRNA will begin phasing in Yukon University's "Yukon First Nations 101" course as a mandatory requirement for continued registration. This course aims to educate on the history of Yukon First Nations, provide a greater understanding of cultural values, and offer tools for respectful communication.
 - o Courses are offered either <u>in person, over Zoom</u> or via <u>self-paced online training</u>. Questions can be directed to <u>registrations@yukonu.ca</u> or by phone at 867-668-8710.
 - All current YRNA registrants must provide proof of completion by March 1, 2023 by emailing a copy of your completion certificate to admin@yrna.ca.
 - Self-identified registrants are exempt. Please contact us at <u>admin@yrna.ca</u> for questions about this.
 - o Note, as of April 1, 2022, all new YRNA registrants must have the course completed prior to registration.
- Quality Assurance Education Fund- Registrants can apply through YRNA for funding for continuing education through
 the Quality Assurance Education Fund provided by Yukon Health & Social services. These funds support eligible Yukon
 RNs/NPs who wish to pursue continuing education. Learn more and apply today!





HIGHLIGHTS 臺 NWT/NUNAVUT

Highlights from the NWT/Nunavut

Professional Practice

AGM 2022

- <u>Save the date!</u> The 2022 virtual AGM which will be held on *October 22, 2022*. Information about this event will posted on our website and on Facebook shortly.
- Call for Resolutions: RNANT/NU members are invited to submit resolution proposals by **12:00pm, Friday October 14, 2022.**
 - Resolution forms are available from Iris Kehler at <u>execast@rnantnu.ca</u>,
 - If you have questions regarding the resolutions process, contact Denise Bowen, Executive Director at (867) 873-2745 ext. 23 or by email at ed@rnantnu.ca.



General information

- RNANT/NU is hiring! We are currently seeking a Director of Professional Conduct & Complaints Officer. Review the job description and learn how to submit your resume.
- DYK? RNANT/NU is pleased to provide registrants with a variety of resources for cultural humility in health care. Check out our website for more information.
- Interested in professional development opportunities? Check out <u>professional development opportunities</u> in conferences, webinars, and educational sessions.

Renewal 2023

• Just a reminder renewal for the 2023 registration year opens on *October 15, 2022*. Please watch <u>our website</u> for more information. Check out our renewal FAQs below.

2023 Renewal FAQ's

- 1) How does RNANT/NU contact me about renewal?

 Information will be available on our website and social media. All members will receive a reminder by email when renewal opens.
- 2) What if I have changed my email address?
 You can update your email address in the members' portal. An email address that you check frequently is preferred as updates and information are provided by email. We do not recommend using your work email as some emails may be blocked by the employer.
- 3) When and where do I renew?
 On October 17th 2022 applications for renewal will be available in your portal (Registered Nurses of the Northwest Territories and Nunavut (thentiacloud.net)). Applications received after December 15th 2022 will be subject to a 100\$ late fee. If you require a copy of your 2021 membership card or invoice, you must download it before October 16th, 2022. It will not be available after October 16th, 2022.





HIGHLIGHTS 意 NWT/NUNAVUT

4) When will I find out if my registration has been approved?

Upon submission of your completed renewal application, you will receive an email indicating your application is under review. When the application has been approved, you will receive a second email indicating that your registration is approved for the 2023 registration year (January 1st - December 31st, 2023). To complete your registration, pay your registration fees via your portal. Once payment is received, your account will automatically update with your membership card and receipt.

5) How can I check the status of my registration after I have renewed?

Use Find a Nurse or sign into your account for status updates. Please notify us immediately if there are any issues.

6) What happens if I do not renew?

All members must renew their licenses within the renewal period. Should you not wish to hold an active RNANT/NU registration, you may choose an associate non-practicing registration. You may also choose not to renew. If you do not renew your 2023 registration before December 31, 2022 and wish to practice in 2023 you will be required to complete the RN or NP Reinstatement Application.

7) What is the process for employer paid renewals?

Employer paid renewal is from October 17 - November 21st, 2022. The payment page of the renewal application has a drop-down menu listing employers. If your employer is on the list, you may choose for your registration fees to be invoiced to your employer or make the payment yourself. If your employer is not on the list, you must complete the payment portion with a valid Visa or Mastercard.

8) I am missing hours and do not meet the RN requirements of 1125 in 5 years and for NPs 1125 in 4 years. What do I do?

Please refer to Policy Rg: Practice hours for Registered Nurses and Nurse Practitioners. If you are in a non-traditional nursing role you can complete the Assessment of Nursing Practice Hours package on our website.

9) I am a new RN or NP; do I have to complete the Continuing Competence Program (CCP)?

Yes, all members are required to complete a CCP for each registration year (January 1 - December 31). Each January a percentage of members are audited and required to submit their CCP. More information about the program is available on our website here.

10) What if I have an active registration but I'm on leave from work (maternity, disability, etc.) Do I have to complete the CCP?

Yes, all members are required to complete a CCP each year. The expectation is that you will remain current in your area of practice.

11) What are the payment options?

Payment options include Visa, Mastercard. See #7 for information on direct billing to employers.

12) How do I get a copy of my receipt and registration?

Receipts and registration cards can be printed from the members portal.





News from other agencies

- Save the Date! The first <u>Patients Experience Evidence Research</u> (PEER) North 2022 event will take place September 23-24, 2022. This inaugural event will be hosted in Yellowknife with both in person and webcast options. More details to follow so stay tuned. <u>View the poster</u>.
- The Canadian Nurses Protective Society (CNPS), not only provides comprehensive liability protection for nurses, but also offers a wealth of resources, educational opportunities and materials that benefit nurses. Check out their website for more information.
- The Canadian Nurses Association (CNA) has a wealth of resources on their website including:
 - o **Upcoming webinars and events**
 - o Policy and Advocacy Work
 - o General news and information
 - o And more!

If you have not yet joined CNA, <u>learn more about how to do so</u>.

• The Canadian Coalition for Seniors' Mental Health (CCSMH) is offering free, asynchronous, accredited eLearning modules on Cannabis and Older Adults. Click here for more information and to register.







NEWS & HORTH

Connecting with us

We want to hear from you! Please reach out at any time if you have questions, concerns or if you'd like to see us feature a specific story in our next newsletter.



Email us: execast@rnantnu.ca

Visit the website

Registered Nurses Association of the Northwest Territories and Nunavut



Email us: admin@yrna.ca

Visit the website

Yukon Registered Nurses Association





