

Clinical Nurse Specialist Association of Canada CNS-C

Association des infirmières et infirmiers cliniciens spécialisés du Canada ICS-C

Welcome to the CNS-C's *Newsletter*. March 2023 CNSs' Challenges



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Nursing What does my association do for me?

What does my association do for me? I asked when I was a young nurse, and it is a question I hear others asking now. In our modern society, it is not unusual to think of others doing something for us or serving us in some way. It is a natural consequence of living in a capitalist world.

Professional associations are not in the strict sense, providers of services and commodities. To associate means to connect or bring into relation; to unite; to bring onto company (Webster's Encyclopedic Unabridged Dictionary, 1989). The 'service' is the provision of the opportunity for CNSs to come together in community to support themselves and each other and to support the growth of CNSs as essential members of the health care team. We are nurses who have graduate education in nursing with a focus on specialized knowledge and skill in a defined area of nursing practice.

Membership in voluntary professional associations is a characteristic of members of a profession and a defining feature of being a professional. Such associations serve as a locus for members, promoting their interests such as maintaining standards, protection of identity, determining characteristics of membership as well as protecting the interests of members among other functions (Church, 1990). The resources available to do this consist of the pooled finances through the collection of fees and the time and energy made available by the voluntary members of the group. When the financial resources are sufficient, staff may be hired to do the work on behalf of members.

Professional associations consist of people with a common professional identity sharing their resources to promote the interests of the members. They have a history and a purpose that they work toward on behalf of the group. In short, CNSs in relationship to promote CNSs and their contributions to society, sharing resources to reach common goals that emerge out of the history and identity of the group are the CNS Association of Canada.

As an organization the history is short. Originally the Canadian Clinical Nurse Specialist Interest Group (CCNSIG) that became the Canadian Association of Advanced Practice Nurses (CAAPN) existed as our national association. Leaders at that time thought it would be a good idea to bring in nurse practitioners when they were recognized in the country. When this led to a shift in priorities, CNSs were no longer able to have their voice heard or their issues acted on. We lost our association. In time, the challenging work of Marcia Carr and Paul-André Gauthier resulted in a gathering on Ottawa of CNSs from across the country, supported by the Canadian Nurses Association, to help us formed our own association. The Clinical Nurse Specialist Association of Canada was the organization that was incorporated as a result. We are still young, still small but becoming mightier in voice.

We come together to support our professional interests and to promote the CNS and our contributions to health care. Internal support has been there in the form of the Colleague- to-Colleague Zoom session, originally to support members through the COVID pandemic. These will continue and will evolve. We will soon let you know of an educational opportunity using that medium. The Canadian Nurses Association is increasingly involving us in CNS and specialty practice issues across nursing in this country.

Being a member provides community, the opportunity to be the voice of CNSs in Canada, networking, support, and education. We are currently looking forward to our second national CNS conference in Kelowna BC in May. This will be an excellent opportunity to consider how we, as a CNS community, participate in the Truth and Reconciliation work that is underway in Canada. I will be there, and I hope to see many of you there as well.

Wherever you are, take care and stay safe.

Sincerely,

Elsabeth Jensen. RN, BA, PhD (nursing) President, CNS-C / ICS-C

References:

Church, O. M. (1990). Nursing's history: What it was and what it was not. (pp. 3-8) IN: N. L. Chaska, *The Nursing Profession: Turning Points*. Toronto: The C. V. Mosby Co.

Webster's Encyclopedic Unabridged Dictionary, (1989). Webster's Encyclopedic Unabridged Dictionary of the English Language. New York: Gramercy Books.

Here are some of the benefits for members: - free -

- Promoting the CNS role.
- Representing CNS at various levels local, provincially, and nationally. For example, at CNA meetings.
- CNS conferences, workshops, or webinars (in Canada, Provinces and NACNS) or reduced fee for members.
- Colleague to colleague meetings (sponsored by CNS-ON in partnership with CNS-C).
- Information shared with members, ex. Newsletters, a Member's only section, emails, postings on our website, posting son our Facebook.
- CNS Financial Awards.
- Members' awards in recognition to their work (new).
- Speaking and collaborating with the Canadian Nurses' Association and CNS provincial associations.

- Annual Reports shared with the members and posted on our website.
- The ability to connect with other CNS across Canada.
- Members networking at national and international levels.
- Etc.

Canadian CNS Conference in collaboration with CNS-C and CNS-ABC

--> Check here for details

"Changing Healthcare Systems to Embed Cultural Safety & Humility: Acting to Decolonize Healthcare Systems."

(Thursday & Friday) May 11th & 12th, 2023.

Four Seasons by Sheraton, 5505 Airport Way, Kelowna, BC. Ticket Prices:

- Regular ticket \$269 + fees & taxes.
- Early Bird Member \$199 + fees & taxes.
- Early bird **deadline** is April 4th, 2023, and both CNSABC and CNS-C are eligible for the **early bird** discount.
- Registration Link: <u>https://www.eventbrite.ca/e/420807034167</u>
 For more information: <u>https://www.cnsabc.ca/general-1</u>

Please note that the Brochure is updated on a regular basis. https://cns-c-canada.ca/wp-content/uploads/2023/02/CNS-Pic-1.jpg

Pre-conference Event:

"Co-Creating Indigenous Wellness Support Networks by and for Indigenous Healthcare Professionals in Interior BC."

Wednesday, May 10th, 2023.

Location: Four Seasons by Sheraton, 5505 Airport Way, Kelowna, BC.

Ticket information:

- Regular ticket \$75 + fees & taxes.
- **Early Bird** \$50 + fees & taxes.
- Early bird **deadline** is April 4th, 2023.
- Registration: https://www.eventbrite.ca/e/520699585477

For more information:

- <u>https://www.eventbrite.ca/e/preconference-symposium-tickets-520699585477?aff=ebdssbcitybrowse&keep_tld=1</u>
- https://static1.squarespace.com/static/629140b7fee27076b0432aa1/t/63d317dd449a0872 3d780a3c/1674778612241/PREConference+V4-Jan25.pdf
- Please note that the Brochure is updated on a regular basis.
- <u>https://cns-c-canada.ca/wp-content/uploads/2023/02/CNS-Pic-2.jpg</u>





Membership in Professional Nursing Organizations Matter

It is easy to dismiss the benefits of being part of a professional group when our lives are busy with work and other personal responsibilities. The truth is that professional groups like the Clinical Nurse Specialist Association of Canada (CNS-C) provide a community of support for its members. As a Clinical Nurse Specialist (CNS) value of joining a professional should not be overlooked.

As a member of CNS-C, I have received invaluable mentorship through discussions about issues encountered in practice. The support received from the group can benefit your professional growth. A non-exhaustive list of the group members' diverse specializations includes education, mental health, research, adult medicine, critical care, maternal-newborn health, and oncology.

The CNS-C provides access to nursing colleagues from coast to coast, which has kept me engaged in nursing through the pandemic. Through interactions within the professional organization, I gained insight into the incredible effort and struggles of nurses and the general healthcare system across Canada. Members are interested in improving Canadians' health and building the nursing profession. Members use their knowledge and expertise to help each other alleviate issues in practice and learn new ways of approaching nursing.

The executive CNS-C members are a dedicated team working to grow CNSs in healthcare by influencing policy and furthering the nursing profession. We are exposed to new and emerging trends in nursing practices, networking opportunities, conferences, and healthcare initiatives. Being a CNS-C member makes sense from a personal and professional perspective.

Sincerely.

Kadeen Briscoe. RN, B.Sc,N., M.Sc.N CNS-C, Secretary

CNS involved in political action, and meeting with politicians.

Over the past 20 years, I have been involved with my professional nursing associations in Ontario in meeting politicians (MPPs) of the Legislative Assembly in Toronto to discuss healthcare concerns, determinants of health, and make suggestions about how to improve our healthcare system.

It is always enlightening to discover that many of them, do not know much about the challenges that we are encountering in healthcare, especially during crisis times. Mostly, they know as "outsiders" of the system. As registered nurses and clinical nurse specialists, we can inform them about our concerns, and provide examples to help them understand what we are faced with in every day work that we do as nurses.

There are basic principles that we must follow such as, be prepared, do our research, identify examples in our clinical practice that we will be sharing, be short, and to the point when discussing with MPPs that we will bring up. Always be respectful, while providing information, considering that in some situations, the MPPs and ministers may disagree with us; we are providing facts and information to help them "do their job," and to represent us in improving healthcare services for example. I have been fortunate to have an MPP who is the healthcare critic of the main opposition party, and she understands well healthcare, she is a healthcare professional by trade.

Over the years, after we meet them in Toronto, I keep an open communication with the two MMPs of my region, and feed them with the information they can use to help them in their work.

Have they heard over the years about clinical nurse specialists? Yes, in many occasions. In my case, I always identify myself as a representative of the professional Association CNS-Ontario. Since the year 2000, I had the opportunity to meet with every minister of health and often chat with previous Premiers. Meeting politicians, and making them aware that clinical nurse specialists are practicing in Ontario, helps to explain our role within the health care system and to increase the profile of our CNS association and our members. Lately, I have been promoting the importance of having clinical nurse specialists to support all nurses at the bedside. Considering that institutions are so short of staff, and many of them new to nursing with less than five years of practice, we need to be there for them. Mentorship is key in nursing retention.

As a representative of CNS-ON, I had the opportunity to present four elements to the Minister of Health of Ontario, Hon. Sylvia Jones, that are part of our health care concerns:

- 1- that we need **parity** (higher salaries), in order to achieve equity and meet equal pay for RNs working in the community **with** RNs working in hospitals.
- 2- we need "**late career initiatives**" for nurses with experience to **mentor** young nurses coming into health care.
- 3- we need **more funding** and more OR time in **public hospitals** and not use private-forprofit institutions for surgeries.
- 4- we need **more NPs clinics** to improve **access** to primary care in Ontario, and to decrease the burden on ER hospitals.

Speaking up as leaders while meeting politicians does help to support newcomers to meet with them and be able to show examples of concerns that we are facing, and solutions that we are proposing and learn overtime, not to be too shy. We need to mentor more nursing colleagues to do the same, to speak up about nursing and speak up about heath care.

Sincerely,

Paul-André Gauthier, Inf./RN, CNS ; B.Sc.N., TCC, MDD, M.Sc.N., PhD (nursing) Treasurer and Membership Coordinator, CNS-C / ICS-C

My journey in becoming a CNS

I reflect on the last 25 years of my career in nursing, I cannot help but to be amazed at all the opportunities I have had that have gotten me where I am today. And the steppingstone, if you will, was the respect and awe I had as a young new grad, towards an amazing CNS on my surgical unit. She was someone that I looked up to, a role model for me, and for many others. She was one of the few CNSs we had in our hospital. I just loved her approach to problemsolving, to teaching, to patient interactions, to nurse interactions, to instituting a change in practice that I said to myself I want to be like her one day. I witnessed firsthand how she was able to make a difference in nursing beyond the bedside.

After obtaining my Masters' degree, she continued to be my mentor, but she also became my colleague. As a young CNS, I continued to learn from her, and share with her ideas from starting a surgical orientation program in partnering with her in ministerial projects. And towards the end of her nursing career, I was proud to be able to present with her at a conference. To me, she epitomized the core values of not only being a nurse but also as a CNS. We both trained new CNSs, and we hope that we have been able to instill these values to this new generation that have taken or will take over from us. She leaves behind a legacy that will forever be instilled in the new generation.

Sincèrement,

Sonia Boccardi. M.Sc.N., CNCC (C) Représentante du Québec, ICS-C.

Psychological Resilience Entry to Practice Awareness and Readiness Education (PREPARE) – An Alberta Critical Care Nursing Initiative

Nurses encounter psychological injuries when working in critical care units. While these injuries leading to moral distress and burnout are documented extensively in the literature, in Alberta, injury-preventative education and structured peer support for nurses is rare.

Critical care nurses have repeated exposures to traumatic events putting them at risk for personal psychological injury; however, they have had no preparation for the psychological demands of the critical care environment. The COVID-19 pandemic resulted in an increase in nurses suffering from moral distress, PTSD, compassion fatigue, anhedonia, burnout, guilt, and decreased resiliency. This experience has not only affected their psychological safety, but also affected their families, workplaces, interpersonal relationships, patient care and the entire organization.

It is possible to train people to recognize changes in their own mental health and become more resilient. Nurses can identify when they need to seek help if they are trained to recognize the risk factors for burnout, PTSD, etc. If detected and treated early, mental illness can be temporary and reversible. Nurses who understand normal reactions to stress and how to manage these effects are more resilient. With education, nurses can recover from stress, traumatic events, and adverse situations.

Our quality improvement initiative, Psychological Resilience Entry to Practice Awareness and Readiness Education (PREPARE), strives to improve mental health in critical care by integrating resilience training and mental health awareness for critical care nurses and measuring success using pre, and post-intervention surveys.

Our PREPARE pilot is focused on psychological well-being and will equip critical care nurses with practical tools to assess and manage the psychological demands of the critical care environment and learn to seek help early, creating a more resilient workforce. PREPARE aims to reduce vacancy rates, sick time, overtime, and medical leaves and ultimately retain highly specialized critical care staff.

PREPARE is largely based on The Working Mind (TWM). TWM is managed by the Mental Health Commission of Canada (MHCC). Launched by MHCC in 2013, TWM was developed by clinicians and peers and based on scientific research and best practices and provides a certificate of completion to each healthcare provider. The PREPARE team has completed TWM Facilitator Certification Training course.

PREPARE goals are:

- To assist critical care nurses in understanding and mentally preparing for the stresses in the critical care environment.
- To normalize and encourage reflection and discussions of self and team resiliency.
- To equip critical care nurses to incorporate self-checks of their own wellness to identify potential issues early.
- To enable the full productivity of employees.
- To ensure the workplace is respectful and inclusive of all employees, including those with mental health problems and mental illness.
- To encourage nurses to seek help for mental health problems and mental illness.

PREPARE objectives are:

- To examine the effects of mental health problems and mental illness in the workplace.
- To help nurses identify indicators of declining and poor mental health in themselves and others.
- To introduce the concept of the Mental Health Continuum Model.
- To review employees', managers', and employers' mental health rights and responsibilities.

- To provide strategies to maintain good mental health.
- To reduce vacancy rates, sick time, overtime, and medical leaves.

Monitoring and Evaluation:

Data is collected using Connor-Davidson Resilience Scale (CD-RISC - 25) and the Health Professional Quality of Life Scale for Healthcare Workers (ProQOL-HEALTH) and qualitative feedback on the impact of the quality improvement initiative. These validated scales are provided before, immediately after, and 3-6 months after the PREPARE education.

PREPARE Phase 1 – OPACCA Learners

The first phase of PREPARE was implemented in August 2022, adding resiliency education into the Orientation Program for Critical Care in Alberta (OPACCA). OPACCA is the standard entry to practice orientation program for all adult critical care nurses in Alberta and is attended by up to 353 registered nurses annually. During OPACCA, all critical care nurses are introduced to the concepts of psychological resilience: recognition of the mental health continuum and prevention and interventions for mental illness. Tools for behavior-based assessment of mental health help individuals and teams recognize those at risk. Communication prompts and scripts, as well as scenario practice, are utilized to remove the stigma in when discussing mental health, psychological injury, risk recognition, and supporting recovery.

PREPARE Initiative Phase 2 – Pilot sites

For Phase 2, the PREPARE team will provide TWM education to leadership and nurses in three critical care pilot sites. These pilot sites are the Chinook Regional Hospital in Lethbridge (AB), the Sturgeon Community Hospital in St. Albert (AB), and a third pilot site in Calgary (AB) (to be determined). The pilot sites are scheduled to begin the PREPARE education summer 2023 with an estimated three to four months to complete.

The PREPARE team is looking forward to making this information outside of Critical Care so it is available throughout all nursing specialties in the future. With the support of our colleagues, we hope to prevent psychological injury and increase the resilience of nurses who encounter traumatic events in the workplace.

Sincerely,

Samantha Taylor. RN, BScN, MPH, CNCC(C) Alberta and NWT Representative, CNS-C

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A CNS Canadian article

You can read an article just published by four (4) Canadian CNSs form BC.

Kensall, S., Carr, M., LeComte, K., & Bains, V. (2023). Advance practice nursing: A Canadian perspective. *International Journal for Advancing Practice*. 1(0), 11-12. <u>https://doi.org/10.12968/ijap.2023.1.0.11</u> <u>https://www.magonlinelibrary.com/doi/epub/10.12968/ijap.2023.1.0.11</u> (PDF) <u>https://www.magonlinelibrary.com/doi/full/10.12968/ijap.2023.1.0.11</u>

FYI: The Editors are indicating:

"As we launch the *International Journal for Advancing Practice* and publish the inaugural issue, we welcome readers to mark this important occasion with us. The International Journal for Advancing Practice is written by advanced practitioners and aims to ensure that the services other advanced practitioners provide are safe, effective and responsive to the needs in their local area, from a national and global perspective. We hope you enjoy the journal." https://www.magonlinelibrary.com/toc/ijap/1/0

Sincerely.

Sherri Kensall. RN, MSN, C Neph (c), CDE, GNC (c) President-Elect, CNS-C. Renal Clinical Nurse Specialist & C Neph (c), GNC (c), Certified Diabetes Educator

Keep an eye on our next membership meeting April 18.

International Results on the Specialty Certification of Advanced Practice Nurses: Implications for Canadian Clinical Nurse Specialists

Tuesday, April 18, 2023 at 8 pm. (ET)

Denise Bryant-Lukosius, RN, CON(C), PhD Co-Chair Canadian Centre for Advanced Practice Nursing Research. Professor, School of Nursing and Dept of Oncology. Alba DiCenso Chair in Advanced Practice Nursing.

We are inviting our colleague (below) to present the results of her research at our *Colleague-to-Colleague* meeting in April. She just completed an **international study** on the specialty certification of **advanced practice nurses**, the results of which are very relevant to CNSs in Canada. The study was funded by ICN and CCRNR. The recommendations from this study are having considerable traction nationally, and it would be very important for the CNS-C to be engaged in these efforts.

CNS-C members... We invite you to share any of your stories, resources, publications, and Clinical Nurse Specialist experiences. Please send it to <u>infoCNScanada1@gmail.com</u>. Information and resources will be included in future newsletters or uploaded to the CNS-C website <u>http://cns-c-canada.ca/</u>

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