

INFO NURSING

VOLUME 48 ISSUE 1 SPRING 2017



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MAY 31, 2017

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COMPASSION FATIGUE



**Nurses Association
OF NEW BRUNSWICK**



NANB 2017

Awards Banquet

An evening of celebration, recognizing nursing excellence at NANB's Awards Banquet will follow the AGM, May 31, 2017. Limited tickets are available for \$60 (taxes in), which includes a four-course meal and entertainment. Tickets can be purchased online at www.nanb.nb.ca.



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Nurses Association of New Brunswick

Nurses shaping nursing for healthy New Brunswickers. In pursuit of this vision, the Nurses Association of New Brunswick is a professional regulatory organization that exists to protect the public and to support nurses by promoting and maintaining standards for nursing education and practice and by promoting healthy public policy.

..... The NANB Board of Directors



Brenda Kinney
President



Karen Frenette
President-Elect



**Joanne
LeBlanc-Chiasson**
Director, Region 1



Jillian Ring
Director, Region 2



Amy McLeod
Director, Region 3



France Marquis
Director, Region 4



Thérèse Thompson
Director, Region 5



Annie Boudreau
Director, Region 6



**Lisa Keirstead
Johnson**
Director, Region 7



Rebecca Butler
Public Director



Joanne Sonier
Public Director



Edward Dubé
Public Director

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Submissions

Articles submitted for publication should be sent electronically to jwhitehead@nanb.nb.ca approximately two months prior to publication (April, October) and not exceed 1,000 words. The author's name, credentials, contact information and a photo for the contributors' page should accompany submissions. Logos, visuals and photos of adequate resolution for print are appreciated. The Editor will review and approve articles, and is not committed to publish all submissions.

Change of address

Notice should be given six weeks in advance stating old and new addresses as well as registration number.

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Building the Foundation for the Next 100 Years

As your President, I was honoured to experience a truly remarkable Centennial year, celebrating 100 years of nursing practice in New Brunswick. The accomplishments and recognition by our stakeholders and peers, reflected in the Centennial Memory Book, certainly reminds me how proud I am to be a registered nurse.

With months remaining of my mandate, I am confident NANB is building a strong foundation to lead us through the next 100 years. The recently approved three-year Strategic Plan, informed by members, staff and Board will guide the operations, as well as communications plan, with immediate action and implementation. With momentum building, I am excited to witness such strength and interest in this year's Board election (see candidate profiles on page 15). I ask all members, to take two minutes and vote online or by phone during the two-week election in mid-April. This is your chance to influence who champions the Association's voice over the coming years.

Thank you for entrusting me as your president, providing an opportunity to represent registered nurses and nurse practitioners, strengthening regulation in the public's interest.

BRENDA KINNEY
President
president@nanb.nb.ca



The 'Cost of Caring'

As a nurse, we are all too familiar with symptoms of difficulty concentrating, and feelings of discouragement, exhaustion, and irritability; which can be described as compassion fatigue, or the 'cost of caring.' (Figley, 1982) Recognizing this as a condition most nurses face daily, NANB has partnered with NBNU to deliver two educational workshops in September, led by experts in this field. Launching this discussion, NANB's AGM keynote speaker will address this topic. I encourage all members to save-the-date: Wednesday May 31st and register online via NANB's website (www.nanb.nb.ca).

In addition to addressing this important theme, the Board of Directors recently approved a Strategic Plan that lays the foundation for change, and will determine the next three-year operations and communications plans. Elements of the Plan, and initiatives moving forward will be shared at the AGM.

Thank you, to those members who responded to the Strategic Plan Survey circulated last Fall. We look forward to embarking on this new journey with all members.

LAURIE JANES
Executive Director
ljanes@nanb.nb.ca

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.....

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Nursing Practice Consultant, NANB



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.....

VIRGIL GUITARD, RN
Nursing Practice Consultant, NANB



Call For Entries

Do you have a story idea or article you'd like to see in *Info Nursing*? Do you have someone you'd like to see profiled or an aspect of nursing you'd like to read more about?

Please submit your ideas and suggestions to Jennifer Whitehead, Manager of Communications and Government Relations:

jwhitehead@nanb.nb.ca
165 Regent St,
Fredericton, NB
E3B 7B4



THE BOARD OF DIRECTORS MET ON OCTOBER 17–19, 2016 AT THE NANB HEADQUARTERS IN FREDERICTON.

The meeting began with a full-day strategic planning session facilitated by Elaine Leclerc, HCS Training and Consulting.

Review and Monitoring of Board Policies

The Board approved a new process to review and monitor Board policies on a monthly basis thereby increasing direct contact between meetings providing more time for project initiatives and departmental reports, environmental scans, and Board development.

Committee Appointments Resolutions Committee

The Board approved three nurse members from the Bathurst region to the Resolutions Committee for a

two-year mandate beginning November 1, 2016 through August 31, 2018. Members are: Susan LeBlanc, Chair; Caroline Hachey; and Rachel Boudreau St-Éloy.

Nominating Committee

The Nominating Committee assists the Board in fulfilling its responsibility to obtain nominations for election to the Association's Board of Directors and is composed of the President-elect as Chair and two nurse directors.

The Board approved Joanne LeBlanc-Chiasson (Region 1) and Lisa Keirstead Johnson (Region 7) to support Karen Frenette (President-elect), Chair, for a one-year term beginning October 2016.

Nurse Practitioner Therapeutics Committee (NPTC)

The NPTC is an advisory committee with a mandate to develop recommendations to the NANB Board of Directors.

The Board approved the appointment of pharmacist Katrina Mulherin to the NPTC from October 18, 2016 to August 31, 2018.

Complaints, Discipline and Review

The Board received an activity report containing hearing and committee statistics for the period of January 1–September 30, 2016.

Internationally Educated Nurses (IENs)

The Board received a report indicating statistics respecting the number of applications of initial registration received from internationally educated nurses since the year 2006.

The report indicated increasing applicants between 2008–2011 with a peak of 161 applicants in 2010. Applicants have continued to decline over the recent years with 10 applicants in 2016.

Centennial Update

The Board received a calendar of activities and events planned for the remainder of the 2016 calendar year including packaging and preparing a keepsake for all members to receive with the Spring issue of *Info Nursing* 2017.

Presentation

Kelly Ebbett, Registrar of the Midwifery Council of New Brunswick gave a presentation to the NANB Board of Directors on the role of the Midwifery.

NANB Document Review/Approval

The Board approved the following:

Revised Document(s)

- *Entry-Level Competencies for Nurse Practitioners*
- *Guidelines for the Recognition and Management of Problematic Substance Use in the Nursing Profession*

All NANB documents and position statements are available on the website or call toll-free 1-800-442-4417.

Next Meeting

The next Board of Directors meeting is scheduled for March 16, 2017 at the NANB Headquarters, Fredericton.

Observers are welcome at all Board of Director's meetings. Please contact Paulette Poirier, Executive Assistant-Corporate Secretary: ppoirier@nanb.nb.ca
506-459-2858 / 1-800-442-4417

2016–2017 NANB Board of Directors

President	Brenda Kinney, RN
President-elect	Karen Frenette, RN
Director, Region 1	Joanne LeBlanc-Chiasson, RN
Director, Region 2	Jillian Ring, NP
Director, Region 3	Amy McLeod, RN
Director, Region 4	France Marquis, RN
Director, Region 5	Thérèse Thompson, NP
Director, Region 6	Annie Boudreau, RN
Director, Region 7	Lisa Keirstead Johnston, RN
Public Director	Rebecca Butler
Public Director	Joanne Sonier
Public Director	Edward Dubé



NANB Webinars and E-learning



WEBINARS

- RNs and LPNs Working Together: Bringing the Best of Both Professions to Patient Care.
- Advancing RNs' Scope of Practice: Who decides?
- Problematic Substance Use In Nursing—Still an Important Issue
- Frequently Asked Questions from RNs Working in Nursing Homes
- When Meeting Standards Becomes a Challenge-Working with Limited Resources and Resolving Professional Practice Problems
- Collaboration: Shared Goals, Different Roles
- MISSION POSSIBLE: Strategies for Embracing Civility
- Safety First! Managing Registered Nurses with Significant Practice Problems
- Documentation: Why all this paper work?
- Leadership: Every Registered Nurse's Responsibility



E-LEARNING

- Cultural Awareness for Preceptors and Mentors of Internationally Educated Nurses (IENs)
- It's All About the Nurse-Client Relationship
- Problematic Substance Use in Nursing
- Committed to Professionalism, Committed to Care

AVAILABLE AT WWW.NANB.NB.CA

NB Retired Nurse Receives Governor General’s Sovereign Medal for Volunteers

One of the Canadian Cancer Society New Brunswick’s long-time volunteers has been presented with a Governor General’s Sovereign Medal for Volunteers.

Adélaïde LaPlante, of Moncton, was honoured along with 60 other Canadians at a ceremony on October 5, 2016, at the residence of the Governor General at The Citadelle of Québec.

Ms. LaPlante, awarded with the Sovereign Medal for Volunteers, served on the Canadian Cancer Society New Brunswick’s Board of Directors from 1998 to 2013, in various leadership roles including Vice-President, President-Elect and Board Chair. In addition, she represented New Brunswick on the National Board of Directors from 2006 to 2008, and as an effective advocate and spokesperson on critical cancer control issues she helped ensure the Society’s services met the needs of New Brunswickers.

A Centennial worth celebrating!
Retired Nurse Marks 104th Birthday (12/05/1913)



Corinne Pichette was a 2003 recipient of the Order of New Brunswick and a source of inspiration for several generations of public health nurses throughout New Brunswick. Having recognized a 42-year career in nursing and notably the first public health nurse in the Madawaska-Victoria region, a position which Ms. Pichette enthusiastically held for 32 years. Just imagine the stories she could tell of the evolution of nursing practice and the delivery of health care over the past several decades!

On behalf of the Nurses Association of New Brunswick, we extend belated birthday wishes and continued health for years to come.

Notice of Annual Meeting



In accordance with Article XIII of the bylaws, notice is given of an annual meeting to be held May 31st, 2017 at the Delta Fredericton, Fredericton, NB. The purpose of the meeting is to conduct the affairs of the Nurses Association of New Brunswick (NANB).

Practising and non-practising members of NANB are eligible to attend the annual meeting. Only practising members may vote. Confirmation of membership will be required for admission. Nursing students are welcome as observers.

Voting
Pursuant to Article XII, each practising nurse member may vote on resolutions and motions at the annual meeting either in person or by proxy.

Laurie Janes,
Executive Director, NANB

Hours & Dates

The NANB Office is open Monday to Friday, from 08:30 to 16:30

NANB WILL BE CLOSED		DATES TO REMEMBER	
April 14	Good Friday	May 8–14	National Nursing Week
April 17	Easter Monday	May 29 & 30	NANB Board of Director’s Meeting
May 22	Victoria Day	May 31	NANB Annual General Meeting
July 3	Canada Day		
August 7	New Brunswick Day		



2015-2016 NANB Nursing Award Recipient Megan Williams (Huckins)

I am a Registered Nurse working with the Horizon Health Network in New Brunswick providing nursing care to surgical patients, as well as individuals living with mental illness. I am entering my final year of studies within the Nurse Practitioner program at the University of New Brunswick. Upon completion of my program, I will provide primary health care services to individuals living within New Brunswick who lack access to primary care providers.

In addition to clinical interest, I have always been passionate about Oncology research. I studied Biology at the University of Lethbridge in Alberta, undertaking research projects investigating molecular genetics related to carcinogenic processes in animal models. As part of my current Masters education, I am nearing

completion of my research study examining sexuality among young women with breast cancer following contralateral prophylactic mastectomy. I continually strive to advance research skills in the areas of nursing and oncology. As such, I am a cancer research trainee with the Beatrice Hunter Cancer Research Institute, where I participate in research activities and network with cancer researchers around Atlantic Canada.

I believe that advancing clinical skills, research, and education, are key to advancing the nursing profession. As such, my goal following completion of my Masters of Nursing degree is to obtain a doctorate in nursing to combine clinical and research competencies to improve health and quality of life of the New Brunswick population.

2015-2016 NANB CNA Centennial Award Recipient Isabelle Wallace

I grew up in the Madawaska Maliseet First Nation in New Brunswick and I always had an interest in healthcare. While I was pursuing an undergraduate degree in psychology at the University of Moncton, I did research work that gave me the opportunity to witness nurses at work. I readily fell in love with this profession and I redirected my studies toward nursing.

I completed my BScN in May 2016 and was recently registered last June. I decided to move on to graduate studies right away. I am entering the Masters of Nursing program at the University of Ottawa in September.

My indigenous roots are a constant source of inspiration, which led me to do my preceptorship within a remote community in Northern Manitoba. As I am highly

aware of the healthcare needs of Canada's indigenous peoples, it is very important for me to orient my Masters research toward this population.

For the past few years, I have been involved within my community and with various associations such as the Nurses Association of New Brunswick (NANB), the Canadian Indigenous Nurses Association (CINA) and the Canadian Nurses Association (CNA). I was also privileged to take part in the "One Million in One Year for Indigenous Nursing Education & Research" fundraising campaign of the Canadian Nurses Foundation (CNF).

I want to thank NANB and CNF for supporting me during my graduate studies and empowering me to follow my calling!





NANB PARTICIPATES IN CNA'S ANNUAL

PARLIAMENT HILL LOBBY DAY



The Canadian Nurses Association (CNA) kicked-off Hill Day 2016 with an interactive breakfast reception in the Parliamentary Dining Room on Parliament Hill. The event gave parliamentarians an overview of home care services and programs across Canada and discussed innovative approaches to improve them.

CNA Board and staff met with 46 members of Parliament, senators and political staff to promote our three federal recommendations in advance of the 2017 federal budget and new Health Accord.

- More transparency and accountability for federal health transfers;

- Better access to home- and community-based care ; and
- A stronger economy through improved support for caregivers.

NANB President Brenda Kinney and Josette Roussel, Senior Nurse Advisor, CNA had a joint meeting with the following parliamentarians and representatives from New Brunswick: Alaina Lockhart, MP, Fundy Royal; Pat Finnigan, MP, Miramichi-Grand Lake; and Mark O'Halloran, Special Assistant for Dominic LeBlanc, Minister of Fisheries, Oceans, MP, Beauséjour.



ALL MEMBERS VOTE!

VOTING PERIOD BEGINS TUESDAY APRIL 18 AT 9:00AM AND ENDS SUNDAY APRIL 30 AT 5:00PM.

To vote: call 1-888-357-3057 or visit www.nanb-aiinb.isivote.com

Help shape the next 100 years by casting your vote to determine NANB's President-elect 2017–19.

Director elections are also occurring in Region 2 (Sussex, Saint John to St. Stephen) and Region 6 (Bathurst and the Acadian Peninsula). Region 4 Director has been elected by acclamation. Candidate profiles can be found on page 15.

Voting takes 2 minutes and is completely confidential! All you need to vote is:

1. Be a registered member of the Association;
2. Access *My Profile* through NANB's website for your 8-digit personal PIN# (this is not your NANB registration number); and

3. Follow the link for online voting or call 1-888-357-3057 to vote by phone.

If you do not have access to the internet, you will need to contact NANB's Communications Department via 1-800-442-4417 and authorize staff to provide you your PIN#.

NANB assistance is available during business hours Monday through Friday, 8:30am to 4:30pm.

NANB 2017 ELECTION

Meet Your Candidates



Maureen Wallace
President-Elect



Amy McLeod
President-Elect



Marise Auffrey
President-Elect



Angela March
Region 2



Rosanne Thorne
Region 2



Ann Marie Webber
Region 2



Vicky Doiron
Region 4



Tina Breckenridge
Region 6



Anne Marie Lavigne
Region 6



Marise Auffrey

CANDIDATE FOR
President-Elect

Education

1985: Bachelor of Science in Nursing,
Université de Moncton

Additional Education

1991: Certificate in Care Unit
Management, Canadian Hospital
Association

Present Position

Director, Professional Practice, Vitalité
Health Network

Professional Activities

2009–2013: Chair, NANB Complaints
Committee

2007–2013: Member, New Brunswick
Nursing Informatics Interest Group

2006–2007: Chair, New Brunswick
Nursing Informatics Interest Group

2005–2007: Member, Canadian
Association of Nephrology Nurses
and Technologists

2003–2005: Member, NANB Discipline
Committee

2001–2003: Chair, NANB Complaints
Committee

1994–2000: Member, Heart & Stroke
Foundation

1998: Excellence of Care Award
recognizing excellence as a change
expert

1997: Excellence of Care Award
recognizing excellence in nursing
care management

Nominated by

Monique Cormier-Daigle and Joanne
LeBlanc-Chiasson

Reason for Accepting Nomination:

I humbly submit my candidacy for the position of President-elect. Being passionate about my profession, I truly believe that nurses must demonstrate leadership to guide our constantly evolving health system. This position provides opportunities to create links with leaders and therefore influence the advancement of our great profession. We live in very exciting times with our health system, and I would be very grateful to be provided with the opportunity to put my knowledge and experience to work representing the nurses of New Brunswick.



Amy McLeod

CANDIDATE FOR
President-Elect

Education

2017: Currently enrolled in Masters
Health Studies, Athabasca University

2010: Bachelors of Nursing, University
of New Brunswick, Fredericton

1986: Nursing Program, A.J. MacMaster
School of Nursing, Moncton

Additional Education

2016: Leadership in Health Care seminar
by Dorothy Wiley Nursing and Health
Leaders Institute, CNA preconference

Certified in BCLS, ACLS, TNCC and
ENPC

2012, 2015: RNTTDC–Regional Nursing
Trauma Team Development Course

2012: Recertification CNA Certification
in ER Nursing

2008: SANE–Sexual Assault Nurse
Examiner

2007: CNA Certification in ER Nursing

2007–2008: Certificate from NB Critical
Care Nursing Program, emergency
stream

Present Position

Director of Nursing for a 40-bed nursing
home, River View Manor, Bath, NB

Professional Activities

2013–2017: NANB, Board of Directors,
Region 3 Representative

2013–2016: Horizon Standards and
Policy Committee



Maureen Wallace

CANDIDATE FOR
President-Elect

2010: Patient Flow Committee

2008–2016: Horizon Nursing Council

2005: Nursing Excellence Award for Advancing the Profession from Region 3 Corp.

2004–2010: Professional Practice Committee

2002–2014: Critical Incident Stress Management

2000–2002: Nursing Retention Steering Committee

Nominated by

Karen Allison and Catherine Davies

Reason for Accepting Nomination

I am honored to accept the nomination of President-elect for NANB. I've been privileged to represent Region 3 on the Board of Directors at NANB for the past four years. During this time, I have had the opportunity to become knowledgeable about NANB's responsibilities and the challenges facing nursing in NB. As a registered nurse with 30 years of direct care nursing experience, I have witnessed many issues facing our workplace. I have a strong belief that nurses need to use our collective voices to play an active role in shaping healthcare in NB.

Education

1978: Bachelor of Nursing, University of New Brunswick, Fredericton

Additional Education

2010–present: Association of Workers Compensation Boards of Canada Learning Symposiums annually in board governance and related topics

1996–present: Canadian Pension Benefits Institute, ongoing education in pension fundamentals, investment fund management, pension plan governance, pension legislation

1998–2012: French Language Training, Athene Memramcook Institute

1981: Certificate in Critical Care, The Moncton Hospital

Present Position

Discharge Planning Coordinator, Horizon Health Network

Professional Activities

2010–present: WorkSafeNB Board of Directors

2010–present: Institute of Corporate Directors

2010–present: Canadian Pension Benefits Institute

2010–present: International Foundation of Employee Benefit Plans

1996–present: Chairperson, Pension Committee for Part-Time and Seasonal Employees of Province of New Brunswick

1978–present: New Brunswick Nurses Union

Fatality Review Committee, WorkSafeNB

WorkSafe Services Evaluation Committee, WorkSafeNB

Dalhousie Medical School Dean's Advisory Committee on Occupational Medicine

Nominated by

Joan Peddle and Darline Cogswell

Reason for Accepting Nomination

With much enthusiasm, I accept this nomination. I have had the good fortune to work in a variety of positions and participate in many roles throughout my career. They have prepared me well to offer for this next step along the continuum of nursing leadership.

I would welcome this opportunity to serve NANB and the nurses of New Brunswick with pride and dignity as we work together to influence public policy, ensure our profession is well-regulated, promote nursing, advance quality health care, and provide resources for nurses in their daily practice.

I would be most appreciative of your support in the upcoming election.

Region 2 Candidates



Angela March

CANDIDATE FOR
Director, Region 2

Education

September 2016- present: PhD Student, Interdisciplinary Studies, UNB Fredericton

2013: MN (Nurse Educator), University of New Brunswick

2005: BN, University of New Brunswick, Saint John

Additional Education

April 2016: Diploma in University Teaching, UNB Saint John

August 2016: Duty to Accommodate Course, Developed by the UNB Student Accessibility Centre and the Human Rights Office, University of New Brunswick, Saint John

September 2016 (yearly): Basic Life Support (BLS) Certification

October 2012: Horizon Supervisory Program Modules I & 2

October 2012: Canadian Triage Acuity Scale (CTAS) Certification

May 2012: Advanced Cardiac Life Support (ACLS) Certification

Present Position

Instructor, UNB, Saint John

Professional Activities

Department Licensure Committee

Nursing Student Admission, Transfer and Progression Committee

Departmental Assessment Committee

Inter-campus NCLEX Committee

Curriculum Committee

Department Committee

Department Nursing Licensure Committee

Nominated by

Loretta Waycott and Kathleen Mawhinney

Reason for Accepting Nomination

I am honored to accept the nomination for NANB Director, Region 2. In my nursing practice, I strive to develop my leadership capacity and continuously engage in professional development. With my diverse background in critical/ acute care and nursing education, I would be an asset to the NANB Board of Directors. If elected, I will bring my passion for nursing's future. I look forward to the opportunity to learn about NANB process and influence policy development.



Rosanne Thorne

CANDIDATE FOR
Director, Region 2

Education

2008: Bachelor of Nursing, University of New Brunswick, Saint John

1986: Three-year Diploma of Nursing, Registered Nurse Program, Northern College, Timmins, Ontario

Additional Education

2015: Completed LEADS Program

2007: Supervisory Development Program for Frontline Managers

2007: Certificate in Primary Health Care Collaboration, Dalhousie University

2000: CNA Certification- Critical Care Nursing

Present Position

Nurse Manager, Internal Medicine, Saint John Regional Hospital Horizon Health Network

Professional Activities

2015-2017: NANB Saint John Chapter President

2004-2008: NANB Saint John Chapter Treasurer

2005-2013: Member of AHSC Ethics Committee

1993-1996: Member, NANB Practice committee

1994: Member of NANB Baccalaureate Graduate Nurse Standards of Practice Review

Nominated by

Meghan Fitzgerald and Lori Burke

Reason for Accepting Nomination

It is with pleasure that I accept this nomination to represent Region 2 on the Board of Directors with the Nurses Association of New Brunswick. As a registered nurse in New Brunswick for the past 30 years in both direct care and management, I have gained valuable knowledge and experience which will contribute to the discussions and decisions concerning regulation and the support of professional practice. As nurses prepare to meet the challenges ahead in healthcare it is essential we continue to fulfil our responsibility as a self-regulated profession to ensure public safety.



Ann Marie Webber

CANDIDATE FOR
Director, Region 2

Education

2009: Primary Health Care Nurse Practitioner Certificate, McMaster University, Hamilton, Ontario

2003: Bachelor of Nursing, Memorial University of Newfoundland, St. John's, Newfoundland

Additional Education

2016: Sexual Assault Nurse Examiner Training

2015: Advanced Cardiac Life Support, Trauma Nursing Core Course, Pediatric Advanced Life Support

2014: Level 1 Breastfeeding Course

2013: National Institute of Health Stroke Scale Certification

Present Position

Nurse Practitioner, Emergency Department, Horizon Health Network, Saint John Regional Hospital

Professional Activities

University of New Brunswick Medical Education Program—Various teaching sessions for medical students

Involved with mentoring Nurse Practitioner students

Nominated by

Mary Anne Hogan and Catherine Little

Reason for Accepting Nomination

Nurses perform a vital public role, and maintaining a rigorous standard of practice through self-regulation is fundamental to providing exceptional care. My over 10 years' experience serving the public as both an RN and NP

in different care settings and in multiple provinces has given me a unique perspective which I can leverage to aid NANB in its continued mandate. I would be a strong advocate for the profession, emphasizing its integral importance in caring for New Brunswickers.

Region 4 Candidate



Vicky Doiron

ACCLAIMED
Director, Region 4

Education

2015 (ongoing): Doctoral Degree in Nursing (PhD), Université Laval, Quebec

2011: Master of Nursing (nurse practitioner stream) Université de Moncton, Moncton

2007: Bachelor of Science in Nursing, Université de Moncton, Edmundston Campus

Additional Education

2016: Basic Life Support for Healthcare Professionals, Edmundston Regional Hospital

2016: ACLS/SARC (Advanced Cardiac Life Support) Edmundston Regional Hospital

2014: Trauma Nursing Core Course, NB Trauma Program

Present Position

Coordinator, Access to Primary Care, Zone 4, Vitalité Health Network

Professional Activities

2016: Member, NANB local chapter, Edmundston

2016: Speaker at the CNA Biennial Convention, Saint John, NB

2013–2016: Preceptor for BN and paramedic students

2012–2016: Speaker, Education and Evolution of Alzheimer's disease

2012–2016: Participation and contribution to the nursing sector's Open House Day, Université de Moncton, Edmundston Campus

2012–2014: Organized the Prescription: Action Nursing Care Stand

2011: Organized the nursing care area at the Jeux de l'Acadie

2006: International placement in nursing care (Estonia)

Nominated by

Jenny Toussaint and Jean-Louis Francoeur

Reason for Accepting Nomination

It is with enthusiasm and interest that I accept the nomination for the position of director in Region 4 on NANB's Board. As an experienced professional, I find that having the opportunity to contribute to and act on different aspects of the profession in these times of constant reform will allow me to put my theoretical and clinical experience to good use. My goal is to support and collaborate on the development of innovative strategies and various issues concerning our profession, while ensuring quality of care and that the nurse's role is maintained.

Region 6 Candidates



Tina Breckenridge

CANDIDATE FOR
Director, Region 6

Education

2016: Master of Nursing, Advanced Practice in Leadership, University of Victoria, Victoria, BC

2007: Bachelor of Nursing, University of New Brunswick, Bathurst

Additional Education

Current: Basic Life Support (BLS)

Current: Advanced Cardiac Life Support (ACLS)

Current: Trauma Nurse Core Course & Instructor (TNCC)

Current: Pediatric Advanced Life Support (PALS)

2012–current: CNA Certification–Critical Care Nursing

2012: Fundamentals of Critical Care Support (FCCS)

2012: Emergency Nurse Pediatric Course (ENPC)

2010: Wound Care Management, Principles of Wound Assessment and Management, MacEwan University, Edmonton, AB

2007: Critical Care Course, Chaleur Regional Hospital, Bathurst, NB

Present Position

ICU Resource Nurse, Chaleur Regional Hospital, Bathurst

Nominated by

Adam Gagnon and Kayla Chamberlain

Reason for Accepting Nomination

Thank you; I am honored to accept this nomination. It will be a privilege to represent Region 6 on NANB's Board of Directors. With 10 years' experience in critical care nursing, including five years in leadership positions, I know that I can make a significant contribution to the nursing profession. This exceptional opportunity will allow me to pursue my professional development goals as I face new challenges and gain new knowledge.



Anne Marie Lavigne

CANDIDATE FOR
Director, Region 6

Education

2014: Masters of Nursing, Athabasca University

2001: Bachelor of Nursing, University of New Brunswick, Bathurst

Additional Education

Central Line Therapy Certification, Management and Care, Vitalité Health Network, Bathurst

Epidural Infusion Certification, Management and Care, Vitalité Health Network, Bathurst

Grasp -Workload Measurement System Certification, Vitalité Health Network, Bathurst

IV Therapy Certification, Fluid balance and replacement; initiating IV therapy, Vitalité Health Network, Bathurst

Oxygen Therapy Certification, Vitalité Health Network- Bathurst

Standard First Aid Certification, Level C, The Canadian Red Cross

Transfer Techniques, Vitalité Health Network, Bathurst

Present Position

Access Manager-Vitalité Health Network-Zone 6

Professional Activities

September 2008–2010: International Studies Committee

December 2008–2011: Monique Begin Committee, Chair- hosted competition March 2010

December 2008: Curriculum-Subcommittee, Critical Thinking

September 2009–2011: Nominating Committee, Chair 2010–2011

2008–2009: Pediatric Subcommittee

2009–2011: Cultural Awareness Committee

2010–2011: Clinical Coordinators Committee

2010–2011: Nurse Central, Subcommittee

2012–2013: Unsafe Clinical Practice, Subcommittee

Nominated by

Chantal Pelletier and Susan LeBlanc

Reason for Accepting Nomination

I am at a point in my career where I feel an obligation to be part of the vision for nursing and help facilitate the molding of our profession into what it needs to become to meet the needs of the population of NB. I believe becoming a part of NANB would broaden my current practice in a meaningful way while building on the foundation of knowledge that I currently possess.

Get Involved!

Play an Active Role in Your Association



The *Nurses Act* mandates NB nurses' professional association to maintain a number of standing committees, which includes the Complaints Committee; the Discipline / Review Committee; and the Nursing Education Advisory Committee. These committees allow members to be a part of a process that ensures the public is protected through provision of safe, competent and ethical nursing care. If you would be able to contribute to NANB's standing committees, please forward your Curriculum Vitae to Jennifer Whitehead:

- Email: jwhitehead@nanb.nb.ca
- Fax: 506-459-2838

For additional information, you may contact the Association at 1-800-442-4417.

Committee Members

Do you promote your profession? Will you share your expertise?

The Nurses Association of New Brunswick (NANB) is presently looking for members interested in becoming involved in various standing committees.

The following factors are considered when selecting committee members to ensure a fair and equitable representation on the committee.

- geographic area,
- language,
- gender,
- years of nursing experience (at least five years), and
- area of nursing experience.

Public Members

NANB is currently seeking interested members of the public to serve as voluntary members on the Complaints Committee and the Discipline and Review Committee.

Public members are individuals who are not now, and have never been registered nurses. Public members should have:

- An interest in health and welfare matters;
- Previous committee or board experience;
- Time to devote to the role and have some knowledge about the nursing profession;
- Volunteer or work experience that demonstrates acting in the interest of the public.

See over for submission form. ➔

Name _____

Address _____

Registration number _____

Current area of practice _____

Telephone _____

Cell phone _____

Email _____

Language Proficiency _____

Areas of interest (please check)

☐ Nursing Education Advisory Committee (currently recruiting a nurse from UdeM – Edmundston or Shippagan (Bathurst site) and a nurse responsible for continuing education in a practice setting)

☐ Complaints Committee (This committee conducts the first step in the Professional Conduct Review (PCR) process and determines if further action is required. Meetings occur by teleconference.)

☐ Discipline / Review Committee (This committee conducts the second step in the PCR two-step process. Committee members examine evidence, hold hearings and make decisions.)

☐ Nurse Practitioner Therapeutics Committee

Do you qualify? Take a look!

- You must be a registered nurse
- You must be knowledgeable of the current scope of practice of nursing, including entry-level practice
- You must be employed as an RN for at least five years
- Item writers must be masters prepared and responsible for teaching and supervising undergraduate students in the clinical area
- Item reviewers must be currently employed in clinical nursing practice, working directly with nurses who have entered practice within the last 12 months, specifically supervising, mentoring or preceptorship.

Other Opportunities to Volunteer

- Workplace Rep Network
- Get involved in your local Chapter
- Participate in surveys, focus groups, member feedback, special consultation
- Entry-to-practice exam – RN Exam Item Development Program.

Applications to volunteer for the Entry-to practice exam are completed online at: www.ncsbn.org/exam-volunteer-opportunities.htm

Get Involved! Play an Active Role in Your Association



CCP Audit Results

By DAWN TORPE



For More Information

Members who have questions related to CCP should visit the Nursing Practice section of the NANB website for information about the CCP or contact a Nursing Practice Consultant at 1-800-442-4417.

394 Members Audited

383 RNs and 11 NPs

TABLE 1 *Language*

	RN	NP
English	251	6
French	132	5

TABLE 2 *Areas of practice*

	RN	NP
Direct care	309	11
Administration	52	0
Education	20	0
Research	1	0
Other	1	0

TABLE 3 *Employment setting*

	RN	NP
Hospital	243	1
Community	75	9
Nursing Home	37	0
Educational Institution	12	1
Other	16	0

Audit Results

The audit revealed that members actively engaged in the type of reflective practice expected of the CCP and developed learning goals on such varied topics as wound care, palliation, transgender health issues, intra-professional collaboration and autoimmune disorders.

NANB Consultants contacted 17 members in follow-up to their submissions. These calls provided an opportunity to obtain clarification of information provided and to review the program with members.

NANB’s CCP is based on the following principles:

- Continuing competence is a necessary component of practice and the public interest is best served when nurses enhance their knowledge, skill and judgement on an ongoing basis; and
- A process of continually assessing one’s practice to identify learning needs and opportunities for growth, is the key to continuing competence.

The NANB Continuing Competence Program requires registered nurses and nurse practitioners to reflect on their nursing practice through self-assessment, develop and implement a

learning plan, and evaluate the impact of the learning activities on their nursing practice. It is a required approach through which each registered nurse and nurse practitioner reflects in a formalized manner on their practice at least once annually. NANB has developed paper based and online tools that nurses can use to complete each of the steps of the CCP.

Compliance with the CCP is monitored through an audit process. Each year 5% of registered nurses and 10% of nurse practitioners are randomly selected to answer a series of questions on an audit questionnaire to illustrate what learning activities they have implemented during the past year, how they relate to their self-assessment, and how the learning activities informed

CCP is a mandatory registration requirement. CCP requirements must be met annually by all RNs and NPs to renew registration.

- Recent graduates are exempt when they renew their registration the **first** time
- Members on extended leave **may** be exempt

and influenced their professional practice.

This past fall 394 members (383 RNs and 11 NPs) participated in the audit process. ■



Canadian Nurses
Protective Society

Five Legislative Changes in New Brunswick for Nurses

Every year, the Legislative Assembly of New Brunswick adopts new laws and makes legislative changes to existing laws that have an impact on registered nurses and nurse practitioners in the province. There were a few noteworthy changes in 2016. The following five legislative changes are by no means exhaustive, but they will likely be of interest to most, and in certain circumstances, directly impact the practice of some nurses.

1

Advance Health Care Directives Act

Commonly referred to as a living will, an Advance Health Care Directive (AHCD) is a document that allows individuals to make decisions in advance regarding their own health care in the event that they cease to have the capacity to make or to communicate their wishes respecting treatment. They can also designate a proxy to make health-related decisions on their behalf once they lose capacity. A decision expressed in an AHCD or by a proxy is as effective as if made by the patient. Under this law nurses, and nurse practitioners in particular, have specific responsibilities. They should consider the following:

- The term “health care professional” includes nurse practitioners;
- If two health-care professionals determine that a patient ceases to have capacity to make decisions and has an AHCD, one of them must inform the patient that they will rely on the AHCD;
- Health-care professionals must retain a copy of an AHCD in the patient’s file if one is supplied;
- Health-care professionals do not need to carry out a decision in an AHCD or a direction from a proxy if it is unethical or unconscionable;
- A health-care professional can revoke the appointment of a proxy, if the proxy fails to make timely decisions, which may have a negative impact on the health of the patient. A revocation of appointment, no matter the grounds, must be documented;
- Health-care professionals are not responsible for failing to abide by an AHCD if they acted in good faith relating to the AHCD or if they did not know of the existence of the AHCD.

2

Volunteer Emergency Aid Act

This is a new law that clarifies the legal responsibility of bystanders when providing (or failing to provide) emergency assistance. While this law applies to everyone, nurses often provide emergency assistance off-duty because of their expertise and knowledge. Even if the assistance they provide is negligent and causes harm or damage to another person they will not be found responsible at law, unless their actions (or inactions) are “grossly negligent.” The threshold for gross

negligence is stricter than usual negligence in that the person has to have had reckless disregard or willful indifference for the harm that might come to a person.

It is also notable that the *Nurses Act* already states that when a nurse provides first aid or emergency treatment, without compensation and outside a hospital or doctor's office, they have the same level of legal responsibility as an ordinary person. Therefore, the "gross negligence" exception under the *Volunteer Emergency Act* applies to nurses in the same way as it applies to ordinary bystanders.

This exception does not apply, however, if a person is providing emergency medical services as part of their employment. Therefore, even if a nurse were not "grossly negligent" they could still be found negligent in law for providing emergency services, if such services are normally part of their job.

3 The Practice of Midwives

Following the coming into force of the *Midwifery Act* in February 2016, the Midwifery Council of New Brunswick was established to regulate the practice of midwifery in the province. As a result, a number of regulations have been amended to clarify the roles and responsibilities of midwives in their practice. Of particular interest, the *Hospital Act* regulation has been amended to include midwives as medical staff, who may be given hospital privileges to provide health care to a patient and use diagnostic services in a hospital.

4 Health Quality and Patient Safety Act

The New Brunswick legislature has developed a reporting scheme, by which regional health authorities and Ambulance New Brunswick Inc. will have an obligation to create "quality of care and safety of patients committees" once the new law is enacted. These committees, whose composition is

not defined in the law, must review all reports of incidents where health care contributes or could contribute or result in the harm or death of the patient. It is the health authorities' obligation to report incidents to the quality of care and safety of patients committee for review. The committee must then present recommendations to the board of directors of the health authority based on its review of the incident.

The Act also creates an obligation on health authorities to inform patients involved in patient safety incidents of the recommendations of the committee and the steps taken to improve the quality of care and safety of patients.

It is noteworthy that this law provides protection to those who flag patient safety incidents to the health authority or the quality of care and safety of patients committee. Specifically, if a person makes a report, they cannot be dismissed, suspended, demoted, disciplined, harassed or otherwise disadvantaged because of their report of an incident. Also, an employee of a health-care organization can make an apology in relation to a patient safety incident without it creating an admission of their fault or liability.

While many health authorities will already have workplace policies related to incident reporting, this law creates a dedicated committee for the review of incidents, and obligatory reporting to patients and the health authorities' board of directors. Some workplace policies may change in the coming months as a result of this law.

5 An Act Respecting Nurse Practitioners

This law comes into force on April 1, 2017, and will amend the *Vital Statistics Act*, with respect to the duties of nurse practitioners. Specifically, nurse practitioners in some circumstances may now complete and sign the medical certificate of cause of death portion of their patient's death registration. Also, nurse practitioners may have to provide information in their possession

regarding any birth, stillbirth, marriage or death to the Registrar General of Vital Statistics, on demand. This duty to provide information to the Registrar General may include the disclosure of certain records. Nurse practitioners are encouraged to contact the CNPS for guidance should this occur to ensure they are respecting their privacy obligations.

These five changes may have some legal impacts to the practice of nurses in New Brunswick. Nurses who have questions about these legislative changes, or any legal aspects or considerations that arise from their delivery of nursing services, can contact the Canadian Nurses Protective Society (CNPS) for legal advice.

DISCLAIMER: *This article is for information purposes only. Nothing in it should be construed as legal advice from any lawyer, contributor or the CNPS. Readers should consult legal counsel for specific advice.* ■

About the CNPS

The Canadian Nurses Protective Society is a not-for-profit society that offers legal advice, risk-management services, legal assistance and professional liability protection related to nursing practice in Canada to eligible registered nurses and nurse practitioners. For more information about CNPS services and benefits, contact CNPS at 1-844-4MY-CNPS (1-844-469-2677) or visit www.cnps.ca.



PROXY VOTING

WHAT YOU NEED TO KNOW

Anyone who does not plan to attend the 2017 annual meeting can make their views known through a process called proxy voting. Simply put, it is a way of voting at annual meetings by means of a proxy or person that you have entrusted to vote on your behalf. Please read the following information carefully to make sure that your opinions are counted.



Anyone wishing clarification on proxy voting is welcome to contact the Registration Department at 1-800-442-4417 or nanbregistration@nanb.nb.ca.

What is a proxy?

A proxy is a written statement authorizing a person to vote on behalf of another person at a meeting. NANB will use proxy voting at the annual meeting, **May 31, 2017**, in Fredericton.

By signing the proxy form on this page, practising members authorize a person to vote in their place. Nurses attending the annual meeting may carry up to four proxy votes as well as their own vote.

Information for Nurses Who Give Their Vote Away

Nurses holding NANB practising memberships may give their vote to another practising member. They should, however, keep the following in mind: (a) know the person to whom they are giving their vote, (b) share their opinion on how they wish that person to vote for them, (c) realize that the person holding their proxy may hear discussions at the meeting that could shed a different light on an issue (so discuss the flexibility of your vote), (d) fill out the form on this page accurately

(the blank form may be reproduced if necessary), and (e) send the form by mail to the NANB office.

When proxy forms are received at the Association office, staff members check that both nurses named on the form hold practising membership and that the information on the form is accurate. Occasionally a form has to be considered void because the name does not coincide with the registration number on record. A form is also void if it is not signed, if it is not completely filled out or if there are more than four forms received for one proxy holder. Since one nurse may hold only four proxies, a fifth form received for that nurse is void. Also, no forms are accepted if received after **May 26, 2017 13:00 hrs.** Forms sent by fax or email will be declared void.

Information for Nurses Who Carry Proxies at the Meeting

Keep the following facts about proxy voting at the tip of your fingers:

- Practising members of NANB may carry proxies.

- The maximum number of proxies that can be held is four. There is no minimum.
- Know the persons whose votes you carry and discuss with them how they want to vote on issues.
- At the time of the meeting, pick up your proxy votes at Registration.
- Sign your name on the proxy card.
- Proxy votes are non-transferable. They cannot be given to someone else in attendance at the meeting.
- During the meeting, participate in discussions. If information is presented that could change the opinion of nurses whose vote you carry, you may either get in touch with them, vote according to your own opinion or withhold your proxy vote.
- Always carry your proxies with you. If they are lost, you may not be able to retrieve them to vote.

What the Association Bylaw Says About Proxy Voting

NANB bylaw 12.07 states:

- A. Each practising member may vote at the annual meeting either in person or by proxy;
- B. The appointed proxy must be a practising member;
- C. No person shall hold more than four (4) proxies; and
- D. The member appointing a proxy shall notify the Association in writing on a form similar to the following or any other form which the board shall approve. Proxy forms shall be mailed to members approximately one (1) month prior to the date of the annual meeting. This completed form shall be received at the Association office by the Friday immediately preceding the annual meeting.

NANB Proxy Voting Form

(please print)

I, _____, a practising nurse member of the Nurses Association of New Brunswick, hereby appoint _____, registration number _____, as my proxy to act and vote on my behalf, at the annual meeting of the Nurses Association of New Brunswick to be held **May 31, 2017** and any adjournment thereof.

Signed this day _____ of _____ 2017.
Registration number _____
Signature _____

To be received at NANB offices before May 26, 2017 at 13:00 hrs. Mail original to: NANB, 165 Regent St., Fredericton, NB, E3B 7B4. Proxies sent by fax or email will be declared null and void.

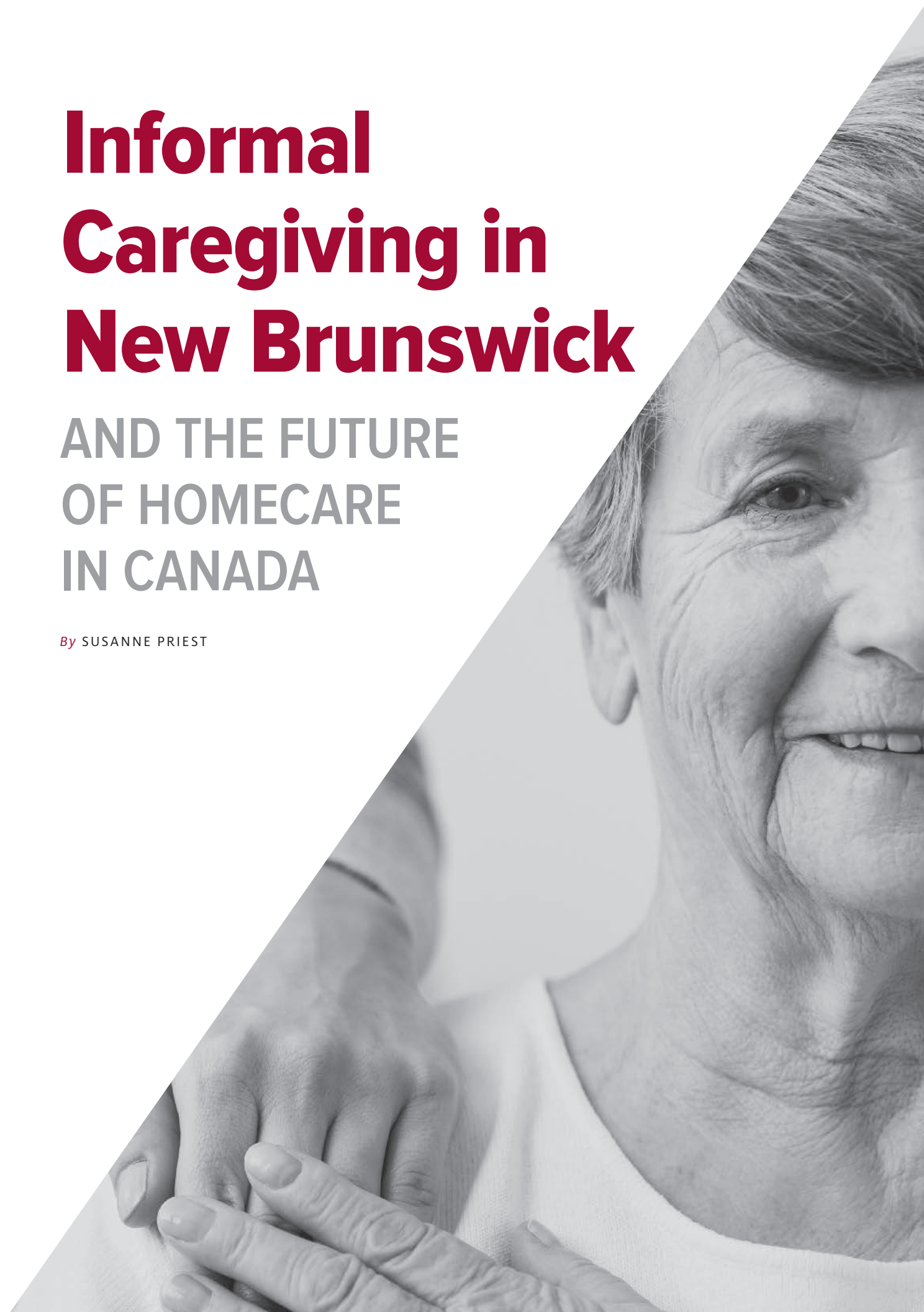


Nurses Association of New Brunswick Association des infirmières et infirmiers du Nouveau-Brunswick

Informal Caregiving in New Brunswick

AND THE FUTURE
OF HOMECARE
IN CANADA

By SUSANNE PRIEST



Aging Canadians, financial demands on the federal and provincial governments for healthcare, an increase in persons living with chronic illness, and human resource statistics predicting an insufficient number of healthcare providers, are leading decision-makers and researchers to look at the importance of 'home care' and the 'informal caregivers' who are providing services to close friends and family members.

Recently, three students who are pursuing studies in a Bachelor of Social Work program at Saint Thomas University (Morgan Downs, Erin Jackson and Carly Furlong), shared results from their research on informal caregivers. The students focused on informal caregivers who provide care to an older adult (60-plus years), within the province of New Brunswick. The objective of their research was to uncover the socio-economic costs associated with caregiving, with hopes to find out how informal caregivers may be better supported.

From 92 informal caregivers across the province (both Anglophone and Francophone participants), the following results were retrieved. As a result of their caregiving responsibilities:

- 79% of participants reported they have had to sacrifice social time;
- 69% of participants reported experiencing changes in personal relationships;
- 57% of participants reported experiencing physical health changes;
- 90% of participants reported experiencing emotional stress;
- 32% of participants reported that they do not take time off to relax when they are feeling overwhelmed; and
- participants identified that services such as *Meals on Wheels* and adult day programs would be beneficial to both the informal care provider and the care recipient.

The participants in this study reported

positive attributes to being an informal caregiver, such as better relationships with the care recipient; a sense of personal growth; feelings of satisfaction with the care they provide; and the opportunity to spend quality time with the care recipient.

Home care, obviously has to be a priority for all Canadians - both formal and informal caregivers, the receivers of care, and the governments. For the 2015 Federal Election, the Canadian Nurses Association (CNA) asked for the following in their election campaign meetings with Federal politicians:

- common standards for homecare across the country;
- more support to family caregivers; and
- improved community-and-home-based health promotion.

A national action plan was published in October 2016 with the purpose of setting out recommended actions, measurable indicators and considerations for both federal and provincial/territorial governments. This action plan can be retrieved at: <http://www.thehomecare-plan.ca/wp-content/uploads/2016/10/Better-Home-Care-Report-Oct-web.pdf> and is a collaborative document from the Canadian Home Care Association, the Canadian Nurses Association and the College of Family Physicians of Canada.

An essential theme throughout this national action plan and other related literature, is the importance of continuity of care between the acute care setting, the community health programs and the care received in the home. The collaboration and communication between formal and informal care providers, along with the care receiver, need to be detailed and continuous, with mutual respect for the contribution of everyone on the team, including the wishes of the care receiver. The overall goal should include Canadians receiving the right health care services by the most appropriate person and in the most appropriate place.

Stronger support for the informal care providers and meeting the care needs of Canadians requiring homecare, should result in patients and their informal care providers having a better quality of life, good quality care in the home regardless of where one lives, less days in acute care facilities and improved health spending by governments.

As nurses working with patients and their families within all domains of nursing and the healthcare system, we are in a pivotal position to:

- become informed on initiatives such as the *Better Home Care in Canada: A National Action Plan*;
- inform key stakeholders such as government on what we observe;
- report to key stakeholders the success stories or the effective initiatives already in place regarding home care; and
- advocate on behalf of patients and family members who are requiring home care.

Home care programs will need to complement the efforts of informal care providers and the individuals who are receiving the care assistance from family and close friends. Research demonstrates that rates of burnout and compassion fatigue* are lowered when care providers feel they are understood and supported (Mathieu, 2012). ■

References

- Accreditation Canada & Canadian Home Care Association. (May 2015). *Home Care in Canada: Advancing Quality Improvement and Integrated Care*
- Canadian Home Care Association, Canadian Nurses Association & College of Family Physicians of Canada. (October 2016). *Better Home Care in Canada: A National Action Plan*
- Mathieu, F. (2012). *The compassion fatigue workbook*. New York, NY: Routledge.

*Compassion fatigue refers to the emotional and physical depletion or exhaustion that a care provider experiences over time. Compassion fatigue may result when a person has given physically, emotionally and maybe even financially over a period of time without adequate support to replenish or rejuvenate one's self.

YOU'VE ASKED

Personal Use of Social Media

SCENARIO: Eric's profile on his Twitter account identifies him as an RN working at one of the local hospitals. In responding from home to a tweet on the weekend, Eric posts multiple derogatory comments about his workplace which are retweeted by others. A member of the public, shocked and worried about the truthfulness of these comments decides to call the Nurses Association of NB to inquire about lodging a complaint for "unprofessional online comments".

Last December, newspapers across Canada reported on a case involving a nurse practising in Saskatchewan who was found guilty of professional misconduct for having expressed her concerns about the quality of care given to a family member by using her Twitter and Facebook accounts.

More and more, communication using social media is being "followed", "retweeted", commented upon and shared sometimes beyond the intended audience. This growing appetite for newsworthy "chatting" highlights the need for registered nurses to be very vigilant when using social media platforms for communication.

Social media in its many different forms, has become very easy to use and a preferred means for communicating with family and friends. While you may think using social media tools for these purposes is your "personal business", you must be aware that the information or opinion you shared can cross over to your professional world and have a negative impact on how you are seen as



a professional.

The *Nurses Act* states that RNs are accountable to the profession and for any "conduct unbecoming of a member including any conduct that might adversely affect the standing or good name of the practice of nursing or the Association [Nurses Act, 2002, 28 (1), ii)]. This expectation applies to all RNs and can include conduct that occur outside the "work time" or practice setting.

When using social media, RNs are responsible for their actions and comments and accountable not only to their client, but also to their employer, the profession they represent and the public they serve.

To participate responsibly in the online world, consider these tips/ pointers:

- build your own social media competence, know the legislation and the technology and have the skills and judgment to use it appropriately and ethically;
- abstain from making disparaging remarks about employer or co-workers (e.g., threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic, or other offensive comments);
- be aware of and follow workplace policies concerning the use of personal or work issued social media tools when at work, including how to manage a privacy breach; and
- do not post content or otherwise speak on behalf of the employer unless authorized to do so, following all applicable employer policies.

For more information about the use of social media tools in relation to RN's responsibilities, contact NANB at 1-800-442-4417 or by email at nanb@nanb.nb.ca.

References

Nurses Association of New Brunswick (2002). *Nurses Act*. Fredericton: Author.

Nurses Association of New Brunswick (2012). *Practice Guideline: Ethical and Responsible Use of Social Media Technologies*. Fredericton: Author.

REINSTATEMENT OF REGISTRATION AND CONDITIONS IMPOSED

In a decision, dated September 22, 2016, the NANB Review Committee granted reinstatement of the registration of Heather Ann London (former name Myshrall), registration number 021451. The Review Committee further ordered that conditions be imposed on the registrant's registration.

REGISTRATION SUSPENDED

On October 4, 2016, the NANB Registrar suspended the registration of Lynn M. McRae (former name Blaqui re), registrant number 023625, pending the outcome of a hearing before the Discipline Committee.

CONDITIONS IMPOSED

In a decision, dated September 26, 2016, the NANB Review Committee ordered that conditions be imposed on the registration of Sophie Power, registrant number 025030. The Committee further ordered that, within 12 months of the date of the Order, the member meet the imposed conditions and that she pay costs to NANB in the amount of \$1,500.

REGISTRATION SUSPENDED

On October 5, 2016, the NANB Complaints Committee suspended the registration of registrant number 022954 pending the outcome of a hearing before the Discipline Committee.

REGISTRATION SUSPENDED

On October 6, 2016, the NANB Complaints Committee suspended the registration of registrant number 019745 pending the outcome of a hearing before the Review Committee.

REGISTRATION REVOKED

On October 18, 2016, the NANB Discipline Committee found Joseph Fernand Richard, registration number 018467, responsible for his conduct and actions. The committee also found that the member demonstrated incompetence, professional misconduct, conduct unbecoming a member, dishonesty, a disregard for the welfare and safety of

patients, a lack of judgement, integrity and that his practice was deficient in regards to medication administration and documentation.

The Discipline Committee ordered that the member's registration be revoked and that he be prohibited from practising nursing or representing himself as a nurse. He shall be eligible to apply for reinstatement, upon satisfactory completion of conditions, one year from the date of the Committee's order. The member was also ordered to pay, within 24 months of his return to the active practice of nursing, a portion of the costs in the amount of \$3,500 and the remainder of the portion of the costs in the amount of \$1,500, ordered by the Discipline Committee, April 7, 2015.

CONDITIONS LIFTED

The conditions imposed on the registration of registrant number 019026, have been fulfilled and are hereby lifted effective November 17, 2016.

REPRIMAND ISSUED

In a decision dated December 9, 2016, the NANB Discipline Committee reprimanded Stephanie Claire Lyons, registration number 026489, for professional misconduct, conduct unbecoming a member and a disregard for the welfare of a vulnerable patient

under her care as demonstrated by a breach of patient privacy and confidentiality and by failing to protect the patient's right to privacy and confidentiality. The Discipline Committee ordered that the member meet conditions within 7 months of the date of this Order. The Committee also ordered that within 12 months of the date of the Order, the member pay a portion of the costs of the Complaint in the amount of \$2,500 and pay a fine in the amount of \$1,000.

CONDITIONS IMPOSED

In a decision dated December 14, 2016, the NANB Discipline Committee ordered that conditions be imposed on the registration of registrant number 028876. The Committee found that the member demonstrated incompetence and professional misconduct. The Discipline Committee ordered that, within 12 months of the date of the Order, the member meet the imposed conditions and pay costs to NANB in the amount of \$1,500.

REGISTRATION SUSPENDED

On December 22, 2016, the NANB Complaints Committee suspended the registration of registrant number 012587 pending the outcome of a hearing before the Discipline Committee.

Where can NANB members turn for legal support?

The Canadian Nurses Protective Society is here for you!



How the CNPS can help you:

- confidential, free legal advice to support you in your nursing practice
- risk management and educational services
- assistance with legal proceedings

Call us: 1-844-4MY-CNPS (1-844-469-2677)

Visit us: cnps.ca

Follow us: [f /CNPS.SPIC](https://www.facebook.com/CNPS.SPIC) [t /CNPS_SPIC](https://twitter.com/CNPS_SPIC)

More than liability protection. For nurses, by nurses.



101ST

NANB Annual General Meeting

Save the Date!

Wednesday, May 31, 2017

Delta Fredericton Hotel

225 Woodstock Road, Fredericton, NB

AGENDA FOR WEDNESDAY, MAY 31, 2017

0730	Registration
0900–1030	Call to order Introductions Greetings Announcements Deadline for Resolutions (11:00) Approval of Agenda, Rules & Privileges 2016 Annual Report Auditor's Report
1030–1100	Break Announcement (Resolution Deadline)
1100–1230	<i>Compassion Fatigue @ Resilience</i> , Rebecca Brown, MSW, RSW, CHWC Keynote Speaker

1230–1330	Lunch (provided)
1330–1430	Resolutions Committee Report Voting on Resolutions New Business
1430–1500	Break
1500–1600	President's Address Installation of New President Invitation to the 2018 Annual Meeting Adjournment
1800	Reception for Awards Banquet
1900–2100	Awards Banquet (ticket required)

*Members are asked to refrain from wearing scents as some participants may be sensitive to perfume or aftershave.
A photographer will be circulating taking pictures at our Annual Meeting. Photos may be used in future NANB communication materials.*

APRIL 19–20, 2017

Semi-Annual Conference 2017 Brain Injury Association of Canada

- Saint John, NB
- » <http://braininjurycanada.ca/shop/>

APRIL 26–28, 2017

11th Annual NPANS Conference and AGM

- Annapolis Valley, NS
- » www.npans.ca

APRIL 30–MAY 4, 2017

25th ORNAC National Conference: *Harnessing our Power*
#knowledgeispower2017

- Niagara Falls, ON
- » www.ornac.ca/en/home-return

MAY 4–6, 2017

19th Biennial Conference of the Canadian Gerontological Nursing Association: *Shaping Healthcare for those who Shaped Canada*

- Ottawa, ON
- » <http://cgna2017.ca>

MAY 4–6, 2017

CANAC 25th Annual Conference—*HIV Nurses at the Forefront: Then and Now*

- Regina, SK
- » <http://canac.org/annual-conference/>

MAY 11–12, 2017

27^e édition du congrès annuel de l'Association québécoise de soins palliatifs

- Lévis, QC
- » <https://pluri-congres.com/aqsp2017/>

MAY 8–14, 2017

National Nursing Week

MAY 28–MAY 31, 2017

40th Annual National CONA Conference

- Toronto, ON
- » www.cona-nurse.org/conf-national.php

MAY 29 & 30, 2017

NANB BoD Meeting

- NANB Headquarters, Fredericton, NB
- » www.nanb.nb.ca

MAY 31, 2017

NANB AGM

- Fredericton, NB
- » www.nanb.nb.ca/agm

JUNE 2–4, 2017

NENA 2017 Conference—*Find the Edge: Prospects for Emergency Nursing*

- Charlottetown, PE
- » <http://nena.ca/conferences/>

JUNE 13–16, 2017

CANN 48th Annual Meeting and Scientific Sessions: *Running Back to Saskatoon!*

- Saskatoon, SK
- » <http://cann.ca/cann-annual-scientific-sessions?dt=160819122127>

JUNE 18–21, 2017

IPAC Canada 2017 National Education Conference: *New Paradigm Ahead*

- Charlottetown, PE
- » <http://ipac-canada.org/ipac-canada-annual-conference.php>

JUNE 20–22, 2017

CHNC 2017 Annual Conference : *Blueprint for Action, Making Connections*

- Niagara Falls, ON
- » www.chnc.ca/en/annual-conference

SEPTEMBER 21–22, 2017

2017 Baby-Friendly Initiative National Symposium: *Creating Change!*

- Moncton, NB
- » www.breastfeedingcanada.ca/Symposium.aspx

SEPTEMBER 21–23, 2017

2017 Atlantic Trauma and Emergency Medicine Conference

- Moncton, NB
- » <http://devwebs.zeditsolutions.com/home/facilities-and-services/provincial-programs/new-brunswick-trauma-program.aspx>

SEPTEMBER 24–26, 2017

15th Biennial Canadian Association of Burn Nurses (CABN)

- Winnipeg, MB
- » www.cabn.ca/en/

OCTOBER 4, 2017

15th Biennial Custody and Caring International Conference on the Nurse's Role in the Criminal Justice System

- Saskatoon, SK
- » <http://custodyandcaring.usask.ca>

COMPASSION FATIGUE HIGH-STRESS THE COST OF *CARING* SECONDARY TRAUMA BURNOUT RISK

**Don't Miss this
Year's AGM
Keynote speaker**



Rebecca Brown
MSW, RSW, CHWC

Compassion Fatigue & Resilience

This keynote address will provide you valuable information about the impact of trauma work on professional helpers who work in the most challenging jobs.

Vicarious Trauma and Compassion Fatigue are now seen as “the Cost of Caring” for these dedicated people in direct care. It has become the personal price we pay as professional helpers in sectors such as medical, health care, police, law, child welfare, shelters, trauma work, emergency and crisis responders, addictions, domestic violence, poverty, with the elderly and ill.

- **Understand** the terms: PTSD, Vicarious Trauma, Secondary Stress, Compassion Fatigue, Moral Distress/Conflict and Burnout
- **Recognize** signs and symptoms in ourselves personally and professionally, how they happen, how they are similar and what to do when we are impacted by the work
- **Develop** an Individual Resilience Tool Kit of strategies to stay healthy and incorporate these into an organizational culture of care for a Truly Trauma-Informed Workplace

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