INFO NURSING

VOLUME 49 ISSUE 1 SPRING 2018

NANB's 2018 ACL







Chantal Léonard

Join us for this year's keynote speakers ... 29

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NANB ELECTION 2018



Only NANB members residing in Region 3 (York-Sunbury) are eligible to vote. Voting begins on April 16 and remains open for two weeks, closing April 30. For details on how to vote and candidate profiles see **page 15 and 16**.







Diane Murray







Cover

All nurses are invited to NANB's AGM on May 10 at the Fredericton Convention Centre. We have an eventful agenda welcoming CNA President Barb Shellian and keynote speakers Dr. Bill Howatt, Morneau Shepell and Chantal Léonard, CNPS. You must register for this free event, please see page 29 for details.



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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 regulates registered nurses and nurse practitioners in New Brunswick to ensure the provision of safe, competent and ethical nursing care in the interest of the public.

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Submissions

Articles submitted for publication should be sent electronically to juhitehead@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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As stated in my fall 2017 message, the NANB has developed a three-year Strategic Plan (2017-2020) and is already one year into the implementation of this plan. The major focus in the first year has been on "Member Engagement" and "Governance". These two pillars will once again be the priority in year two. In September of 2017, NANB hosted a Chapter's Forum, with the goal of exploring methods to engage our membership at the local and provincial level and to support our Chapters. It is evident that status quo was no longer a viable option. Several Chapters are not active at present. The ability of the Chapters to connect with their membership was very limited. Several action items were identified from the robust discussion and brainstorming with Chapter Presidents and Chapter Representatives. These action items included the addition of a question on the licencing renewal form to permit sharing of contact information with their local Chapter to facilitate communication. In addition, NANB will establish an ongoing dialogue with the Chapters to strengthen the relationship with membership.

A Governance Committee has been working diligently in developing Terms of Reference, a Board Charter, and a work plan as well as other support documents. There is much work to do and monthly meetings will be held to advance the dossier of governance review. The transformation of NANB has begun.

The nursing shortage is being felt throughout our province. Another priority item from NANB's strategic plan is to address and continue monitoring this immediate health

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KAREN FRENETTE President

president@nanb.nb.ca



Working for You to Advance Nursing Issues

NANB staff continues to work hard on current files that impact nursing practice and public health. In October of 2017, NANB participated in discussion with CNA and federal government officials regarding a harm reduction approach to non-medical cannabis. Move forward to 2018, and NANB is preparing to present members with further information regarding marijuana in the workplace during a keynote address at the Annual General Meeting. All members are invited but must register for this free event at www.nanb. nb.ca as space is limited.

Nurses in New Brunswick care for victims of addiction and their families every day. NANB has submitted a request to the Hon. Benoît Bourque, Minister of Health to allow NPs to prescribe methadone, and will be engaging RNs in discussion regarding a nurses role in administration of naloxone during opioid overdose emergencies, in both work and non-work environments.

The average age of a registered nurse in New Brunswick is 44 years; with a significant number of nurses in the over 50 years of age group. These figures are similar for many other health professions groups in NB and represent a crossroads for necessary change to meet the health care needs of persons in our communities. For registered nurses in NB, this means working more collaboratively with LPNs and reflecting on where the scopes of practice best meet the needs of clients/patients. As care providers, such as resident attendants, in long-term care settings move toward standardized education and regulation ---further change and collaboration will be necessary. NANB is actively

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LAURIE JANES

Executive Director
ljanes@nanb.nb.ca



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DAWN TORPE, RN, MN

Nursing Consultant, NANB



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SHARON HAMILTON, RN MN NP Senior Teaching Associate, Faculty of Nursing, University of New Brunswick



22 TRACEY RICKARDS, RN, PhD Assistant Professor/Embedded Clinician Researcher, Faculty of Nursing, University of New Brunswick



28
SUSANNE PRIEST, RN, MN
Nursing Consultant, NANB



35
VIRGIL GUITARD, RN
Nursing Consultant, NANB



Call For Entries

Do you have a story idea or article you would 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



Governance Committee

As we look forward to the next 100 years, recognizing a need to strengthen nurse leadership in these changing and challenging times; a Governance Committee comprised of the Board was established determining a Board Charter and Terms of Reference. This Committee ultimately replaces the Executive Committee and is tasked with added responsibilities.

Professional Conduct Review Decisions

A working group established by the Board was tasked with reviewing NANB's current rules for what information is shared regarding professional conduct review (PCR) decisions and how this aligns with other nurse regulators across the country. In an effort to increase transparency, and incorporate best practice, the Board approved changes to the rules that include:

• The name of the member should accompany the registration number;

- When the rules require publication of a decision summary in *INFO Nursing*, the same summary should also be published on NANB's website;
- Decision summaries should stay on the website for a period of at least five years to match the requirements under the Nurses Act; and
- Decision summaries should include more detail on the nature of the misconduct.

Changes will be in effect immediately. Additional information can be found on NANB's website www.nanb.nb.ca.

Resolutions

Furthering support to advance the Strategic Plan, the Board recognized a need to propose house-keeping resolutions at the upcoming Annual General Meeting scheduled for May 10, 2018 at the Fredericton Convention Centre. These proposed resolutions will consider staggering and lengthening

director mandates, and provide flexibility to support Chapters in their efforts to engage and support membership.

Approved resolutions will be circulated once vetted by the Resolutions Committee to all membership via direct email invitation, the April e-bulletin and posted on NANB's website www.nanb.nb.ca.

Retired Nurses

A growing and active group, retired nurses have been recognized by the Board as continued ambassadors of the nursing profession. This retired network is essential to providing an expert voice and mentoring the future nurse leaders. NANB would welcome continued communication with retired members and ask that you keep us informed of potential retirement plans. Please consider staying connected after retirement by ensuring we have an up-to-date email address.



Chapters

Recognizing a need to engage membership and support nursing practice, NANB provides active Chapters funding based on the number of nurses in their respective regions, as per established policy. Members are encouraged to become involved and participate in their local Chapter, as we will be looking to nurses for advice and expertise to guide us into the future.

NANB currently supports the seven active chapters out of the eleven in the following regions:

2018–2019 NANB Chapters		
Bathurst	Péninsule acadienne	
Rachel Boudreau StEloy	Inactive	
Carleton-Victoria Amy McLeod	Restigouche Inactive	
Charlotte County	Saint John	
Inactive	Rosanne Thorne	
Edmundston	Sussex	
Vicky Doiron	Debbie Marks	
Miramichi	York-Sunbury	
Susan Prince	Heather McQuinn	
Moncton Inactive		

Please visit NANB's website www.nanb.nb.ca for the President's contact information. Inactive chapters may also be reinstated by an active member. Interested nurses should contact Jennifer Whitehead, Manager of Communications and Government Relations for further information.



Infograph

Supporting nurses through two nursing organizations, NANB partnered with NBNU to develop a communications tool/infograph that would highlight the roles of each organization while identifying overlapping responsibilities.



Research shows, 1 in 5 Canadians suffer from mental illness at some point in their lifetime and 1 in 8 New Brunswickers experience depression in their lifetime. Nurses are often the public's first point of contact in the health system and can advise of support services available to those suffering.

On January 31, NANB launched a social media campaign whereby a \$10 donation would be made up to \$1,000 to mental health initiatives for each member that liked and followed our Facebook page. Having surpassed our goal, NANB made a donation of \$1.000 to the Canadian Mental Health Association of New Brunswick.

#YESThisIsNursing Showcase Nursing's Diversity Send Us Your Pics to be Shared on Social Media

For the second year, the 2018 theme for National Nursing Week is

#YESThisIsNursing.

Starting May 7 through May 13. help NANB showcase the diversity of the nursing profession by capturing a photo of New Brunswick nurses in their



work environment; at a nursing event; or as a group of colleagues and tag NANB on Facebook. Don't forget to hashtag #YESThisIsNursing so that you can be part of the trending conversation.

The nurse who posts the photo with the most likes will win a \$200 pre-paid VISA! The winner will be contacted directly by NANB and announced on Facebook. Any active member of NANB is eligible to win. Please ensure anyone appearing in the photo is aware the picture may be used in future NANB communication publications.

Plan ahead. Register for Supplementary Protection.

As a nurse, you hope to never receive a complaint about your care. When it happens, you can turn to CNPS.



NANB members can register for **Supplementary Protection** for a fee of \$85 plus taxes. This protection generally includes assistance with:

- ✓ Regulatory matters regarding your nursing care (complaints)
- ✓ Disciplinary and fitness-to-practise hearings

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

Visit: cnps.ca/complaints

Follow Us: F/CNPS.SPIIC @CNPS_SPIIC



New NANB Staff

We are pleased to announce that the Nurses Association of New Brunswick (NANB) has added three new staff members: Kate Sheppard; Sylvette Guitard and Sarah O'Leary.



Kate Sheppard, RN MN

Kate Sheppard assumed her role as Senior Advisor Education and Practice on November 20, 2017.

A registered nurse for over 18 years, Kate has worked in a variety of settings including: Staff Nurse in Paediatrics; Nurse Clinician at UNB Fredericton; Nurse Manager of the Cardiac Care Unit and Family Medicine Unit at the Dr. Everett Chalmers Regional Hospital (DECRH) and most recently as Acting Administrative Director for Critical Care and Family Medicine and the DECRH. Kate has been actively involved with the Association volunteering as past member of the Professional Conduct Review Committee and as an active member of the York-

Sunbury Chapter. Kate is also bilingual. In this role, Kate will oversee nursing education and practice responsibilities including: nursing standards review; program approval review and continuing competency program.

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Sylvette Guitard, RN MN

Sylvette Guitard accepted the position of Nursing Consultant and started with the Association on

November 6, 2017. Fluently bilingual, Sylvette joins the team remotely working from Edmundston with an objective to strengthen nursing networks in that region of the province. Having numerous roles in clinical nursing including: surgery; geriatrics; and palliative care, Sylvette also adds over 11 years of experience as a Nurse Educator at Université de Moncton, campus d'Edmundston. Over the years, she has taught a variety of courses, with a specialty in geriatrics and palliative care. Sylvette is engaged in supporting the

regulatory mandate, and Board of Director end goals. She has a diverse portfolio of core organizational and project work and will be leading presentations to various stakeholders and partners.



Sarah O'Leary

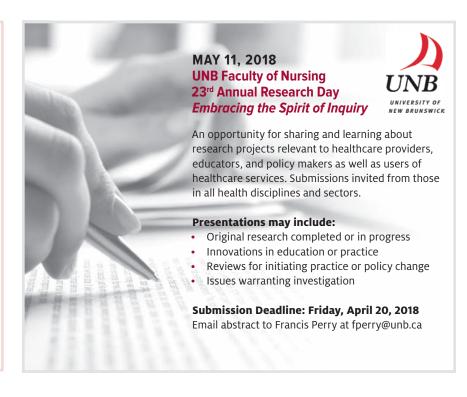
Sarah O'Leary, accepted the position as Executive Assistant and Secretary to the Board of Directors effective

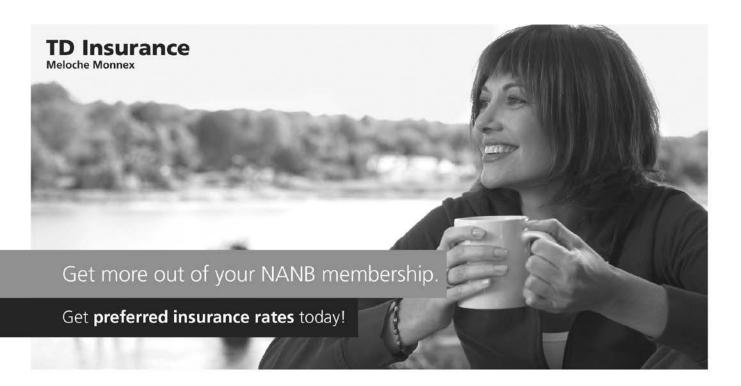
October 10, 2017. With a professional association background, having worked as the Executive Assistant at the Saint John Real Estate Board for over seven years, she brings experience with board operations including an in-depth knowledge of policy development and governance. Sarah is fluently bilingual with an educational background in business administration. Her combination of knowledge and experience allows her to provide a strong network of support to the Executive Office and NANB's Board of Directors.

Follow and Like NANB on Facebook and Twitter!

NANB has joined the world of social media, as an added media presence and monitoring tool; as well as an opportunity to promote to members, both existing and future, of the Association's events, supports and services available while increasing traffic to our existing website.

You can follow NANB at www.twitter.com/nanb_aiinb There is also a direct link to the account from our website homepage www.nanb.nb.ca.





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Due to provincial legislation, our auto and recreational vehicle insurance program is not offered in British Columbia, Manitoba or Saskatchewan.
*Nationally, 90% of all of our clients who belong to a professional or an alumnit group (underwritten by SECURITY NATIONAL INSURANCE COMPANY) or an employer group (underwritten by PRIMMUM INSURANCE COMPANY) that have an agreement with us and who insure a home (excluding rentals and condos) and a car on July 31, 2015 saved \$415 when compared to the premiums they would have poid with the same insurer without the preferred insurance rate for groups and the multi-product discount. Savings are not guaranteed and may vary based on the client's profile. The TD logo and other TD trade-marks are the property of The Toronto-Dominion Bank.



Get registered before April 15th and qualify to be one of two randomly selected members to win:

- One night hotel accommodation (May 9, Delta Hotel Fredericton)
- One ticket to the President's Awards Reception
- Reimbursement for gas with submission of receipt(s)
- Meal(s) according to NANB expense policy

Randomly selected winners will be contacted by Wednesday April 18, 2018. Winners will be announced on NANB's website and through social media. Should the winner not be able to attend or accept the prize, an alternate pre-registered member will be chosen.

Learn more about this year's AGM on page 29.

All Members Are Invited!

You won't want to miss this year's Annual General Meeting (AGM) on May 10 at the Fredericton Convention Centre, welcoming special guest Barb Shellian, President of the Canadian Nurses Association and featuring keynote speakers: Chantal Léonard, CNPS; and Bill Howatt, Morneau Shepell.

Hours & Dates

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

NANB WILL	. BE CLOSED	D	ATES TO REMEMBER
March 30	Good Friday	May 7–13	National Nursing Week
April 2	Easter Monday	May 8 & 9	NANB Board of Director's Meeting
May 21	Victoria Day	May 10	NANB Annual General Meeting
July 2	Canada Day		
August 6	New Brunswick Day		

Notice of Annual Meeting

In accordance with Article XIII of the bylaws, notice is given of an annual meeting to be held May 10th, 2018 at the Fredericton Convention Centre, 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

NANB's Strategic Plan Begins to Take Shape

continued from page 5

human resource challenge. In doing so, NANB had recent discussions with the Ministers of Health, Post-Secondary Education and Labour, Employment and Population Growth, proposing possible best practices implemented by other provinces affected by this workforce challenge. A provincial steering committee, which includes NANB, has been established to bring stakeholders together to find solutions. NANB will continue to collaborate with NBNU and ANBLPN to ensure actions are met. Working together is key to strategy development and success.

Working for You to Advance Nursing Issues

continued from page 5

participating in several provincial initiatives, and with other specific nursing groups to support nurses in the provision of safe, competent care to our public.

Issues with nursing competence regarding medication administration remains the most frequent contributing factor leading to a review of a nurse's practice. There are many reasons for this, and NANB is engaged with nurses, employers, and other organizations to explore processes that can support nurses in the safe provision of services.

As 2018 is an election year, NANB Board of Directors and staff are preparing key messages for election candidates. Messaging for 2018 focuses on: public access to health services; nursing workforce enhancement to best meet public healthcare needs; and public access to required health needs such as medication. The NANB continues to monitor trends and prioritize files that directly affect delivery of safe, competent nursing practice. Stay tuned, there is more information to come.

Canadian Nurses Foundation Announces New Brunswick Scholarship Recipients

Isabelle Wallace NANB Nursing Award

I grew up in the Madawaska Maliseet First Nation in New Brunswick. While I was pursuing an undergraduate degree in psychology, I did



research work that gave me the opportunity of seeing nurses at work. I readily fell in love with this profession and I redirected my studies toward nursing. I became a registered nurse in 2016 and decided to move on to graduate studies right away. As I am highly aware of the healthcare needs of Canada's Indigenous peoples, it is very important for me to orient my master's 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). Moreover, I am a Junior Nurse Consultant for the First Nations and Inuit Health Branch (Government of Canada).

I believe that Indigenous nurses have an important role to play within these communities, particularly on providing culturally competent care. I hope that my involvement, my background and the knowledge gained during my training will be an asset in helping the Indigenous population.

I wish to thank CNF, CNA and NANB for selecting me as a recipient of this award. I also want to take the opportunity to thank CNF for allowing me to become a voice for Indigenous nursing students, and for supporting me in becoming the nurse I am today. I hope this will inspire other Indigenous nursing students to pursue their graduate studies!

Anne Pelletier NANB CNA Centennial **Award**

As soon as I began university, I knew that nursing would not be



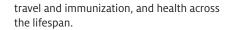
My goal is to earn a doctorate degree that will allow me to pursue an academic career to share my passion and my knowledge with future nurses. My varied clinical experience and my current work as a specialized clinical nurse are just as fulfilling as my studies. I am proud to have chosen nursing as a profession, as it offers endless possibilities. I want to thank NANB and CNF for the NANB award that will help me succeed in my career!

Mary Lou Batty New Brunswick PhD **Nursing Scholarship**

I am grateful to receive CNF Funding! Although I did not anticipate waiting until now,

doctoral studies have been a dream of mine since I was a new graduate in 1988!

I have always enjoyed working with families, teaching, and relationship building. Therefore, I have worked as a staff nurse in post-partum or labour and delivery units in Lahr. Germany. Halifax. N.S. Moncton and Fredericton, N.B. I became an International Board Certified Lactation Consultant in 1997, completed my MN in 1999, taught prenatal classes and peppered this with university teaching contracts. I have also worked with VON as staff nurse and Manager. This reinforced the importance of community nursing and prevention. It also broadened my understanding of workplace wellness,



Becoming a school nurse in Fort Knox, Kentucky ignited the spark that led to my current studies. Entitled Investigating the Roles of Nurses in School-based Positive Mental Health Initiatives in New Brunswick, my dissertation will focus on strengthbased approaches to health promotion. I believe that nurses can be leaders in the creation of healthy learning environments for children and school staff.

Once again, I am so grateful for this CNF Scholarship! It will enable me to study an area that I hope will not only help children, but also contribute to the profession of nursing.

NANB/TD Meloche Monnex Centennial Doctoral

Scholarship I have been a practicing

nurse for 14 years. I

became a nurse because I wanted to work with people. Knowing that I could make a difference in the lives of patients has always been a great source of motivation in my career.

After working as a staff nurse in diverse settings, I began sharing my passion for our profession by teaching nursing at the Edmundston Campus of the University of Moncton at the undergraduate level. I am currently teaching academic and clinical courses. I have a special interest for perinatal care both as an educator and a researcher. In my community. I am involved on a volunteer basis in projects related to breastfeeding and perinatal bereavement support.

I am completing a PhD in Nursing at Université Laval. Pursuing doctoral studies gives me an excellent opportunity to influence the development of our profession. In my research, I am focusing on the personal experiences of couples and the professional experiences of nurses with early perinatal death. For some parents. experiencing early perinatal loss can be distressing and challenging. For this reason, the goal of my research is to improve the support provided in these circumstances.







Visit www.nanb.nb.ca

Voting period begins Monday, April 16 at 9:00 am and ends Monday, April 30 at 5:00 pm.

All registered members in Region 3 (York-Sunbury) will be eligible to vote for their regional director in the upcoming NANB elections. Regions 1 (Moncton), 5 (Restigouche) and 7 (Miramichi) have been acclaimed. Candidate profiles can be found on page 16.

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 8:30 am to 4:30 pm.

Voting Takes 2 Minutes and is Completely Confidential!

All you need to vote is:

- Be a registered member of the Association;
- 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.

MEET THE CANDIDATES

REGION 1

JOSEPH GALLANT

ACCLAIMED

Education

2009: Bachelor of Science in Nursing, University of Prince Edward Island



Additional Education

2016: LEADS in a Caring Environment Workshops, Horizon Health Network

2015: CNA Certification in Community Health Nursing

2013: CNA Code of Ethics for RNs Modules

2013: Nursing Clinical Leadership Program, Horizon Health Network

2012: Immunization Competencies Education Program, Advancing Practice

Present Position

Clinical Leader & Community Developer, Albert County Health and Wellness Centre, Horizon Health Network

Professional Activities

Aug 2017–Present: Canadian Vascular Access Association, Member

2016–Present: Horizon Health Network Nursing Standards and Policy Committee, Member

2015–Present: Community Health Nurses of Canada, Member

2015–Present: Albert County Area Community Health Needs Assessment Community Advisory Committee, Member

2014–Present: Horizon Health Network Regional Clinical Documentation Committee, Member

2014–Present: Horizon Health Network Primary Health Care Clinical Documentation Committee, Chair

2014–Present: Connecting Albert County Board of Directors, Chair

2014–Present: Tele-Drive Albert County Board of Directors, Director

2014–2017: Anglophone East School District Community Health Advisory Committee, Member

2013–Present: Horizon Health Network Primary Health Care Nursing Standards and Policy Committee, Chair

2013–Present: Westmorland-Albert Action Board of Directors, currently Vice-President

2013–Present: Nurses Association of New Brunswick Workplace Representative

2012–Present: Horizon Health Network Regional Immunization Quality Improvement Committee, Member

2012–Present: Horizon Health Network Community Developers Network, Member

2012–2015: Albert County Health and Wellness Centre Community Advisory

Committee (disbanded), Member

2011: Preceptor for an RN student and an Internationally Educated Nurse, The Moncton Hospital

Nominated By

Susan Bennett and Gloria Smith

Reason for Accepting Nomination

I am passionate about nursing practice and advancing the roles of RNs and NPs. Over the past eight years, I have worked in both Acute and Community Care and have seen the variety of issues that can face nurses in both settings: for example, insufficient human resources, model of care restructuring, and complex care. I believe that my experience working with policy and supporting nursing practice in Horizon, as well as my experience working on multiple boards, has equipped me to represent our region and continue the work of advancing the nursing profession and protecting the public.

REGION 3

TERESA HARRIS
CANDIDATE

Education

2012: Master of
Nursing Program:
Generalist Stream,
Athabasca University, Alberta

2006: Bachelor of Nursing Program, University of New Brunswick, Fredericton 1984: Nursing Diploma Program, Saint John School of Nursing

Additional Education

2015: Rosetta Stone French Training Program

2011: LEADS Management Education

2003: Emergency Nurse Pediatric Program (ENPCC)

2003: Trauma Nursing Core Course (TNCC)

1986: Post Basic Critical Care Course, Saint John School of Nursing

Present Position

Nurse Manager: Upper River Valley Hospital

Professional Activities

June 2014–Fall 2016: NANB Resolutions Committee, Chairperson

New Brunswick Provincial Bioethics Consortium since 2008 later became Bioethics Committee within Horizon Health Network(HHN)

Family Medicine Network, HHN

Health and Aging Network, HHN

Regional Nurse Recruitment Committee, HHN

Upper River Valley Area Falls Prevention (Chairperson)

Horizon Falls Committee, HHN

Palliative Care Network, HHN

Local Palliative Care Committee, Fredericton and Upper River Valley Area

Senior Population Steering Committee & Accreditation Team Member

In Patient Care Committee Chair Person, URVH

Nominated By

Susan McCarron and Denise Brown

Reason for Accepting Nomination

I love nursing! I love transitioning new graduate nurses to competent staff nurses on the medical unit and then seeing these nurses flourish throughout all environments of health care including community, nursing homes and hospital settings. I promote and support ongoing learning. Quality professional registered nurses providing competent healthcare services is very rewarding. I value the Nurses Association of New Brunswick as a regulatory body and want to do more with the association.

DIANE MURRAY

CANDIDATE

Education

2008: Bachelor of Nursing, UNB

1981: Diploma, St. John School of Nursing

Present Position

Regional Standards Coordinator, Horizon Health Network, Area 3, Fredericton

Professional Activities

NBNU - Vice President of the DECH Local and President of the EMP Local, Fredericton and Oromocto

NANB Annual Meeting scrutineer

Active member of NANB York Sunbury Chapter

Nominated By

Paula Pickard and Darline Cogswell

Reason for Accepting Nomination

My lengthy and diverse career has afforded me an understanding of the scope, challenges, responsibilities and opportunities for registered nurses in New Brunswick. I have a keen interest in community advocacy and feel strongly that the New Brunswick nurse must speak out regarding issues related to not only nursing, but health care and in particular, primary and secondary prevention and primary health care.

NATHANIEL WICKETT

CANDIDATE

Education

2002: Bachelor of Nursing, University of New Brunswick

Additional Education

2016: Master of Health Studies, Athabasca University

2016: LEADS, Horizon Health Network

2013: Lean Six Sigma Black Belt, Government of New Brunswick

Present Positions

Process Improvement Facilitator, DECH

Clinical Bed Access Coordinator, DECH

Professional Activities

2016–present: NANB Discipline Committee

2011, 2013: Camp Rotary Nurse

2011: DECH Medical Staff Award

2007: Medical Mission to Sierra Leone Team Member

2006: Professional Advisory Committee

2005–2007: Nursing Council Clinical Representative

Nominated By

Nicole Moore and Jennifer Little

Reason for Accepting Nomination

Public opinion continues to indicate that nurses are one of the most trusted groups of professionals. Participating on the board that helps maintain and progress standards for such a profession would be an honour. This opportunity expands my professional citizenship beyond the structure of the regional health authority. It would allow the opportunity to transfer gained experiential knowledge, and continue my professional development, through expanding opportunities to develop leadership skills while acquiring new knowledge.



REGION 5

LAURA GOULD

ACCLAIMED

Education

2011: Master's in Nursing/Nurse Practitioner, UNB Fredericton



2006: Bachelor of Nursing

Additional Education

Advanced Cardiac Life Support, Trauma Nursing Critical Care, Basic Critical Care, Nursing Unit Administration certificate, Certified Canadian Diabetes Educator, Certified Insulin Pump Trainer, Immunization Certificate, Foot care certificate, OMEGA, Insulin adjustment course supervisor.

Present Position

Full Time: Nurse Practitioner (Family Practice), Expertise in diabetes, St. Joseph Community Health Center

Professional Activities

2015–current: President elect NPNB interest group

2015–current: Member for National Nurse Practitioner Exam review committee

2006–ongoing: Nurse coordinator for Camp Dia-best (children's diabetes camp)

2016: member advisory committee for Université de Moncton

2009–2011: Student representative UNB Nurse Practitioner group for the UNB advisory committee.

2006: Worked in collaboration with multiple professionals, unions and associations to bring the First Annual Summit for Poverty to NB.

2004: Participated in the Governor

General Leadership conference across Canada (total of 17 days). This conference strengthened leadership skills, enhanced communication skills and provided opportunity to work alongside a diverse group of individuals. The opportunity to be one of the 225 individuals across Canada to be chosen for this conference was a privilege.

2002–2011: Member of the Appeals Tribunal of Work Safe NB

Local president NBNU Nurse Managers and Nurse Supervisor (2 yr term)

Local President NBNU nurses group (9 yr term)

Chair of professional practice committee

Chair of grievance committee

Member of the Provincial Professional Practice Committee

Member of the Provincial committee for the "Common Front for Social Justice"

Nominated By

Thérèse Thompson and Dominique Doucet

Reason for Accepting Nomination

I am interested in this position as I believe strongly in the advancement of the nursing profession and the importance of strong voices in moving our profession forward. I enjoy working in collaboration with many professionals to strengthen our goals and improve access to healthcare. I believe nurses are key stakeholders in health reform, enhancing health and wellness for the people of New Brunswick and Canada. The importance of regulating practice to ensure the highest quality of care is provided to the New Brunswick people is of utmost importance. I am ready to work with the team to assure safe and competent care is provided to all New Brunswick people assuring the nursing profession continues to provide high quality care.

REGION 7

DEBORAH WALLS

ACCLAIMED

Education

1992: Bachelor of Nursing, UNB

1984: Nursing Diploma, Bathurst School of Nursing

Additional Education

1998: MED, UNB

1994: Nurse Management Certificate, McMaster University

Present Position

Administrator, Mount Saint Joseph Nursing Home

Professional Activities

Past member NANB Board of Director

Past member New Brunswick Association of Nursing Home Board

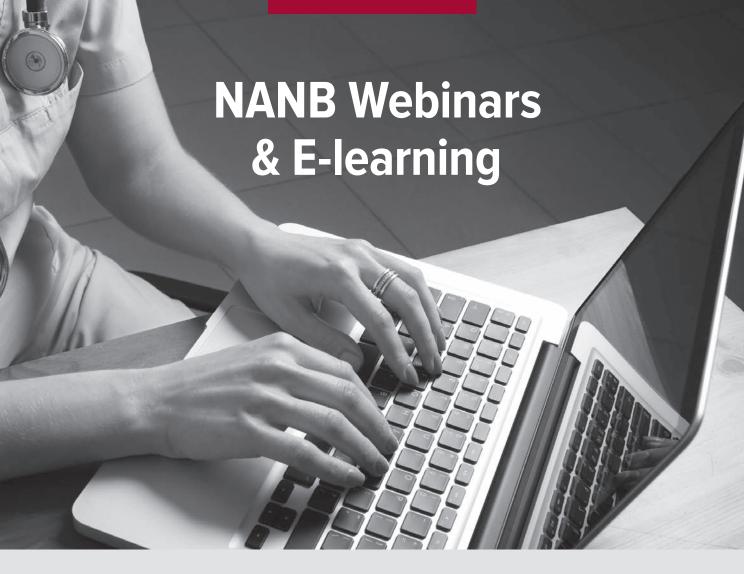
Past member Miramichi Chamber of Commerce Board

Nominated By

Susan Prince and Lisa Keirstead Johnson

Reason for Accepting Nomination

I believe very strongly that nurses should participate in the Nurses Association, both at the local and provincial level, as a means of advocating for and influencing decisions that affect nurses every day work life. Only by actively participating, can we make sure that our opinions are heard and that our Region is well represented. I look forward to representing my Region 7 colleagues at the provincial level and welcome their input so that I do my best to bring their concerns and issues forward.





WEBINARS

- Nursing in the Anthropocene: the challenge of nursing practice in an age of environmental turmoil
- 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
- When Meeting Standards Becomes a Challenge-Working with Limited Resources and Resolving Professional Practice Problems

- Frequently Asked Questions from RNs Working in Nursing Homes
- 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

Continuing Competence Program (CCP) Audit Results

By DAWN TORPE

ANB'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
- reflective practice, or the process of continually assessing one's practice to identify learning needs and opportunities for growth, is the key to continuing competence.

The CCP requires registered nurses and nurse practitioners to reflect on their nursing practice through self-assessment, the development and implementation of a learning plan, and the evaluation of the impact of the learning activities on nursing practice. It is an 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 and influenced their professional practice.

This past fall 390 members (380 RNs and 10 NPs) participated in the audit process.

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 anticoagulation, hemodialysis, bullying and violence, mindfullness and dementia.

NANB Consultants contacted 13 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.

Mandatory Registration Requirement

CCP requirements must be met annually by all RNs and NPs to renew registration. However:

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

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 Consultant at 1-800-442-4417.





390 Members Audited

380 RNs and 10 NPs

TABLE 1 Language

	RN	NP
English	250	7
French	130	3

TABLE 2 Areas of practice

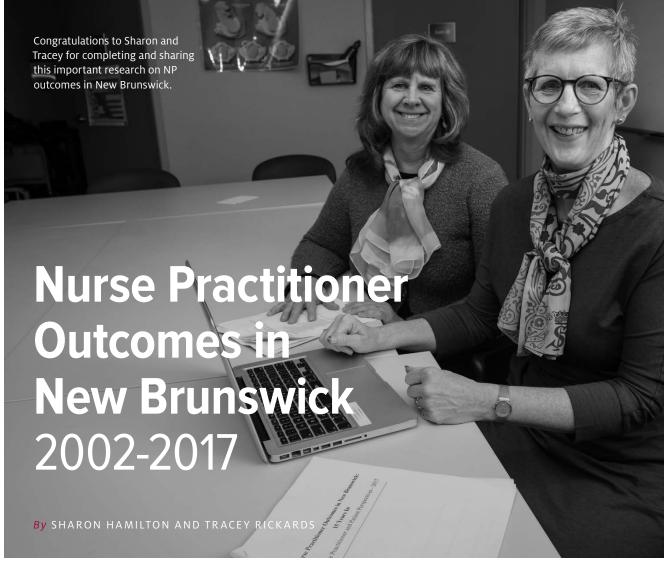
	RN	NP
Direct care	335	8
Administration	22	0
Education	18	1
Research	3	0
Other	2	1

TABLE 3 Employment setting

	RN	NP
Hospital	265	1
Community	62	8
Nursing Home	32	0
Educational Institution	10	1
Other	11	0







urse practitioners (NPs) were incorporated into the Canadian health care system primarily as a response to population need for increased accessibility to primary health care (PHC) providers. The integration of NPs in New Brunswick (NB) began in 2002 with a revision to the *Nurses Act*, enabling legislation permitting NP licensure in an advanced practice role while practicing with a collaborative physician (NANB, 1998).

Standards and Competencies for NPs were established by the provincial regulatory body, NANB, and continue to be updated regularly (2015, 2016). In March 2017, there were 112 NPs registered in NB. Regional Health Authorities employ the majority of NPs who work in community health clinics, long term care, emergency departments, correctional facilities, schools, and public health.

A research study conducted at the University of New Brunswick (UNB) in 2016/2017 by Hamilton and Rickards examined whether the implementation of the NP role in NB was successful. A mixed method descriptive survey design was used to meet the following objectives. To 1) understand the practice patterns of NPs in NB, 2) evaluate NP outcomes within NB, and 3) provide foundational documentation to aid ongoing evaluation of the NP role in NB. Research questions were:

- What are the practice patterns of NPs in NB?
- What are the services provided by NPs?
- What are the facilitators and barriers to practicing at full scope? (Full scope defined by Dekeyser-Ganz, Toren, & Fadlon (2016) as "actions, functions, and procedures that NPs are legally able to perform").
- What are the experiences of patients who see NPs for their PHC?

Data collection took place between July 2016–March 2017. The response rate to the NP Practice Patterns survey was 87.5% (n = 97 of 112 NPs surveyed); two were not actively practicing and completed demographics only. Of the 95 NPs who completed the survey, 89 were English speaking and eight French speaking.

NP Practice Survey

The NP survey sought to understand practice conditions, NP's perceptions of greatest facilitators and barriers to practice and NP's perceived contributions to primary health care (PHC). The survey was designed to include both closed and open-ended questions, with a total of 42 questions.

Patient Experience Survey

The patient experience survey collected quantitative and qualitative data related to patient experiences receiving PHC from NPs. The patient experience survey guided by the Canadian Institute for Health Information's Patient Experiences in Primary Health Care Survey (CIHI, 2017) collected quantitative and qualitative data related to patient experiences receiving primary health care from NPs. The CIHI survey included 87 questions that were refined through

discussion with the research team, resulting in a survey of 35 questions. The patients were also invited to respond to "Please comment on the advantages/disadvantages of having a nurse practitioner as your primary care provider."

The patient experience survey involved the distribution of 2300 surveys (1300 English, 1000 French) in November 2016; 498 English and 201 French surveys were returned by April 2017 for a total of 699 surveys (30% return rate).

NP Practice Findings

NPs are generally satisfied with practice conditions. Most NPs (80%) reported office visits between 15–30 minutes. NPs saw between 6–25 patients daily (avg. of 14); nine patients per day are affected by two comorbidities, seven patients with greater than two comorbidities. The majority of NPs (75%) rated appointment times as satisfactory/very satisfactory. Many stated they set aside one or two same-day appointments for urgent care.

Practice facilitators were: administrative/manager support, adequate human/physical resources, time allotted to provide patient care; adequate administrative time; and educational opportunities.

Patient Experience Findings

Perceived advantages of seeing a nurse practitioner as a PHC provider closely alligned with NPs' perceived contributions to PHC. See Table 1.

Although patients were given opportunity and anonymity to submit both negative and positive comments regarding patient care provided by an NP, no negative comments were submitted. Examples of typical comments provided by patients were as follows:

"The NP is able to take the time to fully address issues that I have. It is much easier to get an appointment. Because I have time to address my health concerns, I do not need to be seen nearly as often. They (or at least my NP) does an amazing job!"

"I have found the care I receive has been exceptional...it seems more personal... I appreciate the concern for my emotional and spiritual health; I see it very connected to medical issues."

TABLE 1 Perceived NP Contributions to PHC

NPs	Patients
Accessibility to PHC	Accessibility to PHC
Unlimited number of concerns / visit	Opportunity to discuss multiple health issues
Providing a patient centered approach	Providers partner with patients in health care decisions
Health promotion/education	Health promotion/education
Provision of evidence-based practice for chronic disease management	NP knowledge of medical history and management of health problems

"My NP...Gives education patiently and listens to me thoroughly to understand medical issues. Goes over blood tests with me, emphasizes the importance of hydration, exercise, mental and spiritual health. Apologizes if running late (although I have no problem waiting because I know the high level of care she gives each patient). Makes sure that I have no further questions. Calm, never hurried."

These comments speak to the underpinning philosophy of patient-centered care that is practiced by NPs in PHC. Patients respect the knowledge, level of care, willingness to listen, and the NP's desire to partner together for optimal healthy outcomes.

Disadvantages/Barriers

Perceived disadvantages of seeing a nurse practitioner for healthcare mirrored the barriers to practice cited by NPs in New Brunswick and across Canada. See Table 2.

Following are representative comments by patients expressing disadvantages to seeing NPs;

"I wish she had admitting privileges at the hospital so she could be present for the birth/care of our newborn, rather than a stranger."

"I have not experienced any disadvantages regarding my health care. However, when I had a document for the government that I needed my HCP to sign, my NP required the co-signature of the doctor ... This delayed my file by several weeks."

"I encountered some resistance and disregard by staff at "Regional" hospital when referred by my NP. There has been some improvement but large center staff need 'education'."

Comments such as these demonstrate that perceived disadvantages faced by patients are not due to the provision of PHC by NPs but from systemic/extraneous influences.

Multiple recommendations have come out of this study including: That stakeholders, including government and regional health authorities:

TABLE 2 Barriers to Practice

NPs	Patients
Systemic issues: i.e.inability to admit to hospital or EMP (NPs were given license to admit to EMP in Fall 2017 after the results of this study)	Systemic issues: i.e. inability of NP to follow them into hospital or EMP
Policy issues: i.e. the inability to sign forms (insurance, Form 1) autonomously	Policy issues: i.e. having to wait for MD to sign forms
Lack of a provincial EMR	Perceived limitations in scope of practice by public and other health professionals (ie. nurses, physicians)
Lack of physical/human resources (i.e. adequate office space, equipment, office staff)	Perceived lack of respect for NPs by physicians

- Acknowledge the success of the NP role, changing the language used in reports to reflect the need for every patient to have access to a health care provider that includes either a family physician or an NP.
- 2. Continue to advance the NP role, seeking salient solutions to the management of patients with chronic illness, mental illness, and comprehensive care for all populations through inclusion of NPs in family health teams, Unattached Patient Lists, and other PHC programs.
- 3. Provide funded positions for all NP graduates in NB, thereby contributing to the fulfillment of the commitment that all patients have access to an appropriate health care provider.
- 4. Update regulations in New Brunswick health care systems to be better aligned with NP practice, developing a plan to eliminate legislative and policy barriers to NP practice.

Conclusion

This study provides a baseline to understand the practice patterns of NPs in New Brunswick and how they contribute to the improvement, delivery and sustainability of PHC in New Brunswick. Results demonstrate that initiation of NPs to increase accessibility to health care was and continues to be successful in a fiscally responsible manner. This study will help guide nursing leaders, regulatory bodies, and stakeholders in future evaluations as the NP role continues to evolve. The results can help influence changes to a health care system that has traditionally deified the physician while discounting the tremendous contributions possible when including NPs in collaborative PHC practice.

References

Canadian Institute for Health Information (2017) The Canadian Institute for Health Information's Patient Experiences in Primary Health Care Survey Retrieved from: https://www.cihi.ca/sites/default/files/info_phc_patient_en.pdf

Dekeyser-Ganz, F., Toren, O., & Fadlon, Y. (2016). Factors associated with full implementation of scope of practice. *Journal of Nursing Scholarship*, 48 (3), 285-293.

Nurses Association of New Brunswick (1998). The Future of Health Care in New Brunswick: The Nursing Contribution. Fredericton, NB.

Nurses Association of New Brunswick (2015). Standards for the practice of primary health care nurse npractitioners. Fredericton, NB.

Nurses Association of New Brunswick (2016). Entry-level competencies for nurse practitioners. Fredericton, NB.











Legislated to practice in NB since 2002, NPs are demonstrating their invaluable contribution to the province's health system.



NANB PARTICIPATES IN CNA'S ANNUAL

PARLIAMENT HILL LOBBY DAY









NA co-hosted a parliamentary reception on November 21 welcoming several MPs and Senators. CNA president Barb Shellian delivered a talk about how to reduce the harms of non-medical cannabis use with New Brunswick MP Serge Cormier in attendance.

A Facebook live coffee-break was a highlight featuring federal Health Minister Ginette Petitpas Taylor answering questions on healthy eating, seniors and home care, the opioid crisis, as well as important issues such as pharmacare and the proposed new federal legislation on cannabis.



n New Brunswick, a nurse practitioner (NP) is a registered nurse who has completed a nurse practitioner program, (in primary health care or Family All Ages) and has advanced knowledge and clinical expertise. Within the competencies and standards established by the NANB Board of Directors, NPs have the authority to prescribe drugs and since September 2014, NPs have been prescribing controlled drugs and substances.¹

In 2012, federal regulations under the *Controlled Drugs and Substances Act* (CDSA) authorized NPs to prescribe controlled drugs and substances, with the exception of cocoa leaves, heroin, opium, and anabolic steroids (excluding testosterone). Following the changes, NANB and the provincial Minister of Health, authorized NPs to prescribe controlled drugs and substances, but added two additional exceptions: cannabis and methadone.²

Seeing that NPs are the primary

care provider for thousands of New Brunswickers, and because of the current opioid crisis, NANB successfully obtained additional prescribing authority from the provincial minister of health for NPs to prescribe methadone for opioid dependency and methadone for pain. However, the NANB is not mandating that all NPs must seek federal exemption to prescribe methadone.

These changes are similar to NP practice in Newfoundland/Labrador, Nova Scotia and Manitoba.

Prescribing Methadone

To prescribe methadone, NPs are subject to the Government of Canada's Narcotic Control Regulations subsection 53 (3), which requires practitioners to obtain a section 56 exemption under the Controlled Drugs and Substances Act (CDSA). Health Canada will issue exemptions to NPs to prescribe methadone upon recommendation from the

Nurses Association of New Brunswick (NANB).

NPs who have successfully completed the required learning and clinical practice expectations, as outlined by the NANB and who have received an exemption from Health Canada, will be authorized to prescribe methadone.

For additional information on the exemption process, please contact the NANB Practice Department.

At the time of print, NANB was awaiting the final approval from Health Canada for NPs in New Brunswick to apply for exemption to prescribe methadone. Once this final approval is received, NANB will communicate directly with NPs, their employers and other key stakeholders.

¹ The NANB required all NPs in New Brunswick to complete additional education regarding controlled drugs and substances, in order to renew NP registration for the 2015 practice year.

² The prescribing authority for NPs in New Brunswick can be found in the Schedules for Ordering for Nurse Practitioners - in Appendix 2 of the document Standards for the Practice of Primary Health Care Nurse Practitioners (NANB, 2017).





Dr. Bill Howatt

CHIEF OF RESEARCH AND DEVELOPMENT
WORKPLACE PRODUCTIVITY

MORNEAU SHEPELL



Chantal Léonard
CHIEF EXECUTIVE OFFICER
CNPS

Dr. Bill Howatt, a behavioural scientist, is known as one of Canada's top experts in mental health issues in the workplace. As a highly-respected columnist for the Globe and Mail, author, clinician, consultant and speaker, he effortlessly engages and inspires both individuals and groups. With his confident, yet casual style, he openly shares his vast experience and knowledge with his audiences.

Dr. Howatt is a master at translating cutting-edge academic research into practical, tactical strategies that employees and managers can integrate

into their daily professional and personal lives. His passion is helping people to ensure their workplaces are healthier, happier and more productive.

As Chief of Research and Development, Workforce Productivity at Morneau Shepell, as well the creator of the Total Health Index (THI), Dr. Howatt offers more than 30 years of experience in the field of mental health, addiction and HR consulting.

Chantal Léonard is a highly respected bilingual lawyer with a wealth of knowledge and experience through many years of advising clients on health law and all aspects of professional liability, and through liaising with government, professional associations and regulatory bodies on health-related issues.

She has lectured at many professional conferences and at the University of Ottawa at the Faculty of Law and in the Masters in Health Administration program. She holds a Bachelor in Social Sciences with a major in sociology, a Bachelor of Sciences with a major in biochemistry and an L.L.B. from the University of Ottawa.



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.

1100 - 1145

1145 - 1200

1200 - 1300

1300 - 1430

1430 - 1500

1500 - 1600

- Resolutions Committee Report
- · Voting on Resolutions

Lunch (provided)

- Introduction of Board of Directors
- · Invitation to the 2019 Annual Meeting

• Announcement (Resolutions Submission Deadline)

• Canadian Nurses Protective Society (Chantal Léonard)

• Invitation to M. Villeneuve Leadership Seminar—

• Risk Assessment & Future Fee Increases

• Marijuana in the Workplace (Dr. Bill Howatt)

National Nursing Week Greeting

Adjournment

• Break

WHAT YOU NEED TO KNOW

Proxy Voting

Anyone who does not plan to attend the 2018 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.

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 10**, **2018** in Fredericton.

By signing the proxy form, 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 page 32 accurately (the blank form may be reproduced if necessarv), and (e) send the form to the NANB office. All forms must be received at the office by May 4, 2018 at 1300 hrs.

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

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.

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 4, 2018 1300 hrs**.

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.

Anyone wishing clarification on proxy voting is welcome to call the Association at 506-458-8731 or toll-free 1-800-442-4417 ext.851.



Rules & Privileges

The following are the Standing Rules governing the annual meeting.

Members should note procedural authorities for further references.

- When approved by a majority of the voting members and the registered proxies, the Standing Rules shall apply throughout the annual meeting.
- Robert's Rules of Order shall be the parliamentary authority in all cases not covered by the Nurses Act, Bylaws, Rules or Standing Rules.
- 3. The order of business shall be that printed in the program. Subject to the consent of the voting members and the registered proxies, items of business may be taken up in a different order whenever appropriate.

Rules of Debate

- Any member or student may ask questions and participate in discussions.
- Speakers shall use microphones, address the chair and state their name and chapter. The chairperson shall call speakers in the order in which they appear at the microphone.
- 3. Motions or amendments to main motions may be made only by a practicing member and must be seconded by another practicing member. To ensure accuracy, these must be presented in writing on forms provided, signed by the mover with the name of the seconder, and sent to the recording secretary.
- 4. The chairperson will exercise her responsibility to limit debate. A speaker will be given a maximum of two minutes and may speak only once to any motion unless permission is granted by the assembly. The chairperson will announce the

- termination of the discussion period ten minutes in advance.
- All resolutions and motions shall be decided by a majority of the votes cast.
- 6. Only practicing members present and registered proxies have the right to vote and voting shall be by show of hands and proxy cards, unless a secret ballot is ordered.
- The Board of Directors shall have the authority to approve the minutes of the Annual Meeting.
- **8.** The rules of debate shall be strictly observed.
- **9.** All members and guests are asked to turn off electronic devices while inside the meeting room.
- 10. As some participants may be sensitive to perfume or aftershave, members and guests are asked to refrain from wearing scents.

NANB Proxy Voting Form

(please print)

I,, a practising nurse member of the Nurses Association of New Brunhereby appoint, registration numberas my proxy to act and vote on my behalf, at the annual meeting of the Nurses Association of New Brunswick to be held \(\Delta \) 2018 and any adjournment thereof.			,
Signed this day Registration number		2018.	

Original signed proxy forms must be received before May 4, 2018 at 1300 hrs. Forms sent by mail or scanned original copies sent by email or fax will be accepted.

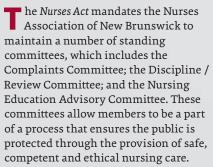
NANB

165 Regent Street Fredericton NB E3B 7B4 E-mail: nanb@nanb.nb.ca Fax: 506-459-2838



Nurses Association Association des infirmières et infirmiers
OF NEW BRUNSWICK DU NOUVEAU-BRUNSWICK





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.



Call for Committee Members

Name	
Address	
Registration number	
Current area of practice	
-	
Telephone	
Cell phone	
Email	
Language Proficiency	
Areas of interest (please check)	
Nursing Education Advisory Committee	Nurse Practitioner Therapeutics Committee
Advisory Committee	Therapeutics committee
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.)

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/examvolunteer-opportunities.htm



Get Involved!

Play an Active **Role in Your Association**

By VIRGIL GUITARD

YOU'VE ASKED

I'm a registered nurse/nurse practitioner practising in New Brunswick. How can I get practice advice from NANB?

NANB has adopted a three-pronged approach to self-regulation. By placing most of our emphasis on promotion and prevention, the need for discipline interventions is kept to a minimum. One of the ways the NANB ensure the provision of safe, competent and ethical care in the interest of the public is through consultation services. This confidential service is offered to New Brunswick registered nurses, nurse practitioners and their employers, to support safe, ethical, and competent nursing practice.

The Practice Department is available for consultation on a wide variety of issues, such as: the interpretation of NANB documents and government legislation; collaborative practice with other healthcare providers; ethical dilemmas; meeting NANB standards, addressing issues of safety with appropriate action; and the management of significant practice issues.

NANB members are encouraged to contact a nursing consultant with specific nursing practice related questions, so the nursing consultants may support decision-making from a regulatory lens. NANB's nursing consultants have the same professional and ethical responsibilities as all RNs/ NPs, when it comes to mandatory reporting regarding a patient at risk of harm. For example, if a nursing consultant were to become aware of professional misconduct or incompetence, the nursing consultant would have an obligation to follow through with any concerns, to ensure safe, competent and ethical nursing practice. When a person contacts NANB, the

FIGURE 1: Development of Nursing Support Resources

Identified members needs from consultations

Areas of risk in practice

Legislative requirements

Develop standards and resources

Support application of standards

Increase access to resources

CNO, 2017

callers name and the content of the call will not be shared with others outside NANB, unless deemed necessary.

Have you ever wondered how NANB develops and revises nursing resources to support practice?

To identify resources that need to be developed or revised, and the best way to support RNs/NPs in using those resources, NANB uses information generated from a variety of sources, such as laws, areas of risk in practice (i.e., Medical Aid in Dying) and stakeholder needs (see Figure 1).

For example, when NANB receives practice queries, staff look for trends in the practice and education database to

understand where there may be a need for more resources. RN and NP inquiries influence the development of NANB support resources. In summation, members engaging NANB through practice queries results in one of the ways NANB ensures the provision of safe, competent and ethical care in the interest of the public.

For more information on nursing consultations, or to contact one of our consultants, please send an email to nanb@nanb.nb.ca or call 506-458-8731, Toll-free 1-800-442-4417.

References

The College of Nurses of Ontario (2017). *The Standards*. Toronto: Author



SUSPENSION LIFTED, CONDITIONS IMPOSED

In a decision dated October 13, 2017 the NANB Review Committee found Melanie Ann Martin, registrant number 025947, to be suffering, at the time of the complaint, from conditions or ailments rendering her unfit and unsafe to practise nursing and that the member's conduct demonstrated incompetence, professional misconduct, conduct unbecoming a member and a disregard for the welfare and safety of patients by continuing to practise nursing while incapacitated by her ailments or conditions. The Review Committee found that the member presented sufficient proof that she had undertaken the required steps to address her ailments and conditions to return to the practice of nursing subject to conditions. The Review Committee ordered that the suspension imposed on the member's registration by the Complaints Committee on May 6, 2013, be lifted and that conditions be imposed on the member's registration.

REPRIMAND ISSUED, CONDITIONS IMPOSED

Reprimand of Former Member Donna Marie Collins for Misuse of Professional Nursing Titles and Designations

On November 22, 2017, the NANB Discipline Committee met to consider a complaint against former member Donna Marie Collins, registrant number 023716, for improperly using the designations RN and NP and other designations such as RN+ and DNP (Doctorate of Nursing Practice) indicating she is a nurse or nurse practitioner while not being a registered member of the Association and not entitled to use the designations, and for holding herself out in a manner indicating that she is entitled to practise nursing. In her position as CEO and Consultant of Crystal Clear Transitional Care Inc.,

the former member's conduct by using the above mentioned designations while widely distributing information to numerous parties with whom NANB has relationships including provincial, national and international health organizations, media, Canadian nurse regulators, medical, pharmacy and other professional associations, universities, government officials and health departments and other organizations when not registered and not entitled to use such designations, and by failing to cease and desist doing so after being repeatedly requested by NANB to cease such activity constitutes:

- A. conduct in breach of the *Nurses Act* and the Rules of the Association;
- B. conduct unbecoming a member of the Association; and
- C. conduct that has and is likely to continue to adversely affect the standing and good name of the practice of nursing and of the Association.

In a decision dated November 22, 2017, the NANB Discipline Committee made the following order:

- The Former Member is reprimanded for improperly using the designations RN and NP and other designations indicating she is a nurse or nurse practitioner while not being a registered member of the Association and not entitled to use the designations, and for holding herself out in a manner indicating that she is entitled to practise nursing;
- 2. within 1 month of the date of this Order, the Former Member pay to the Association a fine in the amount of \$1,000;
- within 3 months of the date of this Order, the Former Member pay to the Association a portion of the costs of these proceedings in the amount of \$12,000;

- The Former Member submit evidence of the successful completion of the Canadian Nurses Association (CNA) 2017 Edition "Code of Ethics for Registered Nurses" modules;
- 5. The Former Member is not eligible to apply for registration until:
 - A. she has provided an Affidavit to NANB confirming that for a continuous period of one year compliance with sections 12(1), 12(1.1) and 19 of the Nurses Act she has not used the designations RN, NP, RN+, DNP or any variations of those designations, and has not held herself out or otherwise represented herself in any manner that does or could lead the public to believe that she is entitled to practise nursing;
 - B. the fine and costs are paid; and
 - C. she submits proof of successful completion of the Canadian Nurses
 Association (CNA) 2017 Edition "Code of Ethics for Registered Nurses" modules.
- **6.** A notice of this decision shall be published:
 - A. in the next edition of the Info Nursing and on the Association's website, which notice shall include the Former Member's name and registration number and shall remain on the Association's website for such time and be posted at such times as the Regulatory Consultant: Professional Conduct Review of the Association determines it is useful or necessary in order to inform other parties and organizations and the public that the Former Member is not a registered member of the Association and is not authorized to use nursing designations;
 - B. in such other publications and media of any kind as deemed necessary or appropriate by the Regulatory Consultant: Professional Conduct Review.

7. The Regulatory Consultant: Professional Conduct Review of the Association may provide information and copies of this Decision or notice of this Decision to such persons the Consultant deems necessary or advisable to ensure that such persons are aware the Former Member is not a registered member of the Association, is not authorized to use nursing designations, and is subject to the terms and conditions of this Decision.

REGISTRATION REVOKED

In a decision dated November 27, 2017, the NANB Review Committee found Karen Anne Brown, registration number 022860, to be suffering from ailments or conditions rendering her unfit and unsafe to practise nursing at the time of the Complaint in 2012. The Review Committee ordered that the member's registration be revoked and that she is prohibited from practising nursing or representing herself as a nurse. She shall not be eligible to apply for reinstatement for a minimum period of one year from the date of the Committee's order and until sufficient evidence is presented that she is fit and capable of returning to the practice of nursing in a safe manner.

REGISTRATION REVOKED

In a decision dated December 7, 2017, the NANB Review Committee found that Loretta Christine Huffman, registrant number 027400, demonstrated dishonesty in that she attempted to deceive her employer by altering her status on a printed copy of the registration verification of the Association's website in order to cover up the fact that she did not hold a valid registration as a nurse and that she improperly used the designation of RN and held herself out to be a nurse to multiple individuals. The Committee found that the member's conduct by using the designation RN, nurse while not being registered constitutes conduct in breach of the

Nurses Act and the Rules of the Association and conduct unbecoming a member of the Association. The Review Committee reprimanded the member for dishonesty and breach of the Nurses Act and the Rules of the Association and ordered that the member's registration be revoked and that she is prohibited from practising nursing and from using any title, words, figures or letters indicating she is a nurse. She is not eligible to apply for reinstatement for a minimum period of one year and until conditions are met. The Committee also ordered that the member pay to the Association a fine of \$1,000 and pay a portions of the costs of the hearing in the amount of \$1,000.

CONDITIONS LIFTED

The conditions imposed on the registration of registrant number 022609 have been fulfilled and are hereby lifted effective December 8, 2017.

SUSPENSION LIFTED, CONDITIONS IMPOSED

In a decision dated December 14, 2017, the NANB Review Committee found Daniel Clavet, registrant number 023137, to be suffering, at the time of the complaint, from conditions or ailments rendering him unfit and unsafe to practise nursing and that the member's conduct demonstrated incompetence. professional misconduct, a lack of judgement and professional ethics and that he did not meet the standards of nursing practice in documentation and nursing techniques. The Committee also found the member demonstrated a disregard for the welfare and safety of patients by not informing his employer of the severity of his health problems and the impact on his nursing practice. The Review Committee ordered that the suspension imposed on the member's registration by the Complaints Committee on February 25, 2016, be lifted. The Committee ordered that the member is eligible to apply for a

conditional registration once conditions have been met. The Review Committee further ordered that the member pay to the Association a portion of the costs in the amount of \$1,500 within 18 months of returning to the active practice of nursing.

CONDITIONS LIFTED

The conditions imposed on the registration of registrant number 023942 have been fulfilled and are hereby lifted effective December 19, 2017.

APRIL 5-7, 2018

CANAC 26th Annual Conference Acting Up, Reducing Harm: Clinical Practice and Advocacy in the Context of Crisis

- Vancouver, BC
- » http://canac.org/annual-conference/

APRIL 18, 2018

8th International Research Conference on Adolescents and Adults with FASD Review, Respond and Relate— Integrating Research, Policy and Practice Around the World

- · Vancouver, BC
- » http://interprofessional.ubc.ca/ initiatives/adults2018/

APRIL 20-22, 2018

CANN 2018 National Conference It Takes a Village

- Calgary, AB
- » www.neonatalcann.ca/SitePages/ EventDetails.aspx?itmID=39

APRIL 27-28, 2018

CFPNA 2018 National Conference Grass Roots 2018

- Winnipeg, MB
- » www.cfpna.ca/agm-biennial-conference

MAY 8-9, 2018

NANB BoD Meeting

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

MAY 10, 2018

NANB's Annual Meeting

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

MAY 11. 2018

23rd Annual Research Day Embracing the Spirit of Inquiry

- · UNB Faculty of Nursing, Fredericton, NB
- www.nanb.nb.ca/events/entry/ 23rd-annual-research-day

MAY 17, 2018

NANB/NBNU Workshop Running on Empty: Recognizing When Nurses Need to Refuel

- · Edmundston, NB
- » www.nanb.nb.ca/workshop

MAY 27-30, 2018

41st Annual National CONA Conference Pile of Bones Conference

- Regina, SK
- » www.cona-nurse.org/calendar/

MAY 27-30, 2018

Infection Prevention and Control Canada National Education Conference

- Banff, AB
- » https://ipac-canada.org/ipac-canadaannual-conference.php

JUNE 2-3, 2018

National Association of PeriAnesthesia Nurses Canada 16th National Conference

- Edmonton, AB
- » http://napanc.ca/index.php/ conference-44886/2018-nationalconference

JUNE 7-8, 2018

2018 CAMSN Conference Medical-Surgical Nursing: It's Getting Complicated

- Ottawa, ON
- » https://medsurgnurse.ca/events/

JUNE 15-17, 2018

Canadian Association for the History of Nursing Annual Conference Tracing Nurses' Footsteps: Nursing and the Tides of Change

- Halifax, NS
- » https://cahn-achn.ca/annual-conference-2/

JUNE 18-20, 2018

2018 CNA Biennial Convention From Insights to Impact: It Starts with Nursing

- · Ottawa, ON
- » https://cna-aiic.ca/en/events/ 2018-cna-biennial-convention

OCTOBER 16-17, 2018

NANB BoD Meeting

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





Following the success of two workshops hosted last September, NANB and the New Brunswick Nurses Union decided to continue offering Compassion Fatigue Workshops facilitated by Stephanie Maillet in Saint John and Moncton. The last stop will be in Edmundston (May 17, 2018).

There is still time to register!

Visit www.nanb.nb.ca for details.



VOLUNTEER WITH THE ASSOCIATION GET INVOLVED **WE WANT YOUR OPINIONS & EXPERTISE** · Join our email distribution list to receive • Contribute in our provincial & federal updates & e-bulletins; election advocacy campaigns to strengthen nursing's voice in healthcare; · Visit our website for recorded webinars, e-learning modules and documents to · Be part of our Committees; support your practice Nominate deserving RNs/NPs for nursing Partake in nursing workshops, awards; and conferences or meetings in your area; · Recommend a nurse colleague to profile, · Participate in member surveys; highlighting the diverse roles nurses play in our health system. · Submit your candidacy, or that of a colleague's for the next Board election; Attend our Board of Director meetings as an observer; Follow and like NANB on Facebook and Twitter for updates and information

Follow and like NANB on Facebook and Twitter for updates and information relevant to nursing practice and Association activities.



