



Community Health Nurses Initiatives Group

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President's Report

By Kim Dalla Bona MScN(c) RN CVAA(C) CCHN(C)



Blazing our trail...

The theme of our 3rd National Community Health Nursing (CHN) Conference, *Blazing our trail: Tools, tactics and taking charge*, is an appropriate description of CHNIG efforts these past months. It is very apparent that Community Health Nurses are prepared to look to the future, paving the road with knowledge, experience and a vision for CHN.

For more details of 3rd National Community Health Nursing conference being held in Calgary,

Alberta from June 17-19, 2009, please visit <http://www.chnig.org/pages/About%7CUpcoming%20Events/3rd+National+Community+Health+Nurses+Conference>

CHNIG members remain a very active, recognized and valued voice for Community Health Nurses. A few examples are highlighted below.

Tools

CHNIG contributed to the development of a provincial orientation package for public health nursing through membership on the Joint Algoma Health Unit and ANDSOOHA Advisory Committee, a Ministry of Health and Long Term Care Funded Project.

Tactics

- Collaborated with OPHA on a position paper: Violence Prevention: Continued call to Action for Ontario.

CHNIG - taking action on the issues affecting community health nursing

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CHNIG IS A GROUP OF ONTARIO REGISTERED NURSES THAT OFFER PROVINCIAL AND NATIONAL PERSPECTIVES TO NURSES PRACTICING IN THE COMMUNITY.

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Presidents Report (Cont`d)

By Kim Dalla Bona

- Participated in the consultation/review of resolutions related to Core Competencies for Public Health in Canada, and Regulation and Inspection of Splash Pads and Other Similar forms of Wet Recreation.
- Collaborated with RNAO to respond to a request for consultation from the Ministry of Labor (MOL) and the Ministry of Health and Long-Term Care (MOHLTC) on a proposal to extend the scope of the Needle Safety Regulation (O. Reg. 474/07), made under the Occupational Health and Safety Act (OHSA).
- Participated in Queen's Park Day 2009
- Collaborated on a letter to James M. Flaherty, Minister of Finance, advocating for Investing in a National School Nutrition Program.
Authored a letter to Premier Dalton McGuinty and to the Minister of the Environment urging the government to deliver regulations no weaker than the draft regulations issued November 7, 2008 in relation to cosmetic pesticide use.

Taking Charge

CHNIG is pleased to announce plans to co-host, along with the Community Health Nursing Association of Canada (CHNAC), the fourth National Community Health Nursing Conference, scheduled to be held in Toronto, Ontario, 2010.

 Working together, Community Health Nurses have the talent, knowledge and leadership to **blaze the trail** and shape the future of community health nursing.

CHNIG Goes to China

By Ruth Schofield



The Invitation and Purpose

Never in a lifetime did I expect to go to China until I received a formal invitation to join a Canadian delegation of nurses by Marlene Smadu, Associate Dean of the Colleges of Nursing at the University of Saskatchewan and then the current president of Canadian Nurses Association. Feeling humbled and honored with such an incredible professional development opportunity I proceeded to work through the details to make it a reality. The purpose of this professional and cultural international trip was to exchange knowledge, explore models of health care delivery in urban and rural settings, and identify important impacts on education, regulation, research, management, services and policy. Through the expertise of the US based People to People Citizen Ambassador Program, the flight, accommodations, food, visa, and a full program itinerary were arranged from October 31 to November 11, 2008.

Program Highlights

Our professional program began with a very warm welcome by the China Nursing Association in Beijing. While in Beijing we met with various health professionals from the Guang An Men Traditional Chinese Medicine Hospital, and the Capital Medical University, School of Nursing. We enjoyed an excellent

CHNIG Goes to China (Cont'd)

and informative guided cultural program that offered a walking tour of the Forbidden City, a stroll through Tian'anmen Square, a walk on the Great Wall of China, a breath-taking acrobatic show and an evening view of the Olympic Bird's Nest. Of course "a lot " of fine Chinese food and numerous shopping excursions including the Pearl Market which gave us a taste of the world of bargaining.

After four days in Beijing, we flew four hours southwest to a beautiful city in the mountains called Guiyang. In Guiyang, we traveled to the Changjiao Village Primary School in a rural village where we listened to a class of 40 grade 1 students on a Saturday morning sing "Frère Jacques" and were enthralled with traditional Chinese dancing by the children. While there we also visited the Dragon Palace, and an underground cave reached only by boat. From Guiyang we traveled by bus to Anshun to further explore scenic local Chinese villages and learn about the diversity and traditions of the Chinese culture. On return to Guiyang we visited a local rural medical clinic.



Community Health Nursing in China

In China, the role of nurses in community health is very reflective of the status of the nursing profession. Since the critical mass of physicians is higher than for nurses, nursing is often not viewed as a desired career choice rather just another occupation. Not unlike Canada, there is a growing shortage and a shift from hospital to community care; however, in China, the rural population is much larger than Canada. We learned that there are three levels of nursing education to become a nurse: health schools (like high school), university diploma (3 year program with RN exam) and university degree programs (4 years with Bachelor of Science degree). The masters and PhD programs are relatively new in China. In the late 1990's, the quality of nursing education shifted from a medical model to more of a nursing model (Anders, 2002). Yet, it was evident that nursing practice in China compared to Canada is still very medical model and driven by physicians. Independent and autonomous practice was not evident. The role of a nurse practitioner was a very foreign concept as was the idea of inter-professional practice. The preparation to work in the community requires a certificate.

CHNIG Goes to China (Cont'd)

By Ruth Schofiel

The nursing roles associated with public health focused on lifestyle and chronic disease prevention approaches like health education related to hand washing, dental and eye care, nutrition, and CPR. Nurses could practice in primary schools or workplaces like construction sites, provide breast feeding screening clinics, or administer flu immunization. People with mobility problems such as strokes or seniors received nursing care in their home.

Advancing Community Health Nursing

As part of the profession program, the nursing delegation had many opportunities to talk about nursing in Canada. During our meeting with the China Nursing Association, the visits to the 3 different health care institutions and the school of nursing, ideas were exchanged around nursing practice and in particular nursing in the community. RNAO Best Practice Guidelines in particular, the breast feeding and healthy workplace were recognized. On our last visit to a local health care setting, Kate Thompson, President-Elect of CHNAC and I gave a presentation to the largest group of nurses (about 40) while in China on the role of provincial and national professional associations

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in community health nursing. In the China culture, giving gifts is a Chinese hospitality tradition. This tradition enabled us to give each institution visited several copies of Canadian Community Health Nursing standards of practice.

Thank you

In closing I would like to thank CHNIG for their tremendous professional and financial support to enable me to proudly represent community health nurses from Ontario and Canada in China. WOW... what an honor and privilege... This is just the beginning. The door is open to advance community health nursing in China in the future. In fact given the success of our 2008 trip, I have been asked to lead a Canadian delegation of community health nurses in 2009.

Anders, R., Harrigan, R. (2002). Nursing education in China: Opportunities for international collaboration. *Nursing Education Perspectives*. 23 (3), 137- 141.

Community Health Nurses Association of Canada (CHNAC) National Leadership in Community Health Nursing

By Ruth Schofield, CHNAC Ontario Board Representative

CHNAC Update

As the Ontario representative on the Community Health Nursing Association of Canada (CHNAC) Board, I am thrilled to report on the strong national leadership in community health nursing. The CHNAC Board has representation from all the provinces and territories in Canada and from

PHAC. There are 5 standing committees: Education and Professional Development, Certification, Standards and Competencies, Communication, Policy and Political Action and newly formed National Conference Planning. All CHNIG members

Community Health Nurses Association of Canada (CHNAC) National Leadership in Community Health Nursing (Cont'd)

are CHNAC members through a group membership fee with CHNAC. As a federation of provincial/territorial community health nurses interest groups and an affiliate of CNA, the mission of CHNAC is to provide a unified voice representing and promoting community health nursing and the health of communities. CHNAC is very appreciative of the PHAC funding of the following projects in 2008-2009:

1. Evaluation of certification process – the purpose is to identify the enablers and barriers to engaging in certification by conducting a survey of the certified CHNs (partnership with University of Saskatchewan and CNA).
2. The National Public Health Nursing Competencies Development Project – the purpose is to develop public health nursing discipline specific competencies.
3. Model of Communities of Practice for Advancing Practice in Community Health Nursing – the purpose is to facilitate and support communities of practice in Ontario, BC and Nunavut, as they address concerns common to the three health sectors public health, home health and primary health care using community/ population assessment, planning, action (partnership with University of Ottawa).
Strengthening the Quality of Community Health Nursing Practice: A Pan-Canadian Survey of Community Health Nurses' Learning Needs - the purpose is to identify the current practice activities of community health nurses (CHN) across Canada and to measure their continuing education needs in relation to the Canadian Community Health Nursing Standards of Practice (CCHN Standards)(partnership with McMaster University).
4. Environmental Scanning Tool- the purpose is to develop an environmental scan that will provide critical information about the multiple, complex, and interacting environments that influence practice, specifically, and community health nursing, generally (partnership with University of Saskatchewan).
5. Community Health Nursing Definition and Vision Project : the purpose is to develop a common definition and a vision statement for community health nursing practice for 2020 in Canada (partnership with McMaster University and CNA).
6. CHNAC is also a member on the Canadian Association of School of Nursing (CASN) Standing Committee on Public Health. The purpose of this leading edge standing committee funded by PHAC is to advance the integration of the Canadian Community Health Nursing standards of practice in schools of nursing across Canada. In the past year, the committee has been working on entry to practice competencies for community health nurses.

The last significant national activity is the CHNAC and Community Health Nurses of Alberta (CHNA), co-sponsored **3rd National Community Health Nursing Conference** in Calgary for June 17-19, 2009.

To register now, please visit the website on-line at www.chnac.ca.

COMMITTEE MEMBERS REPORT

OPHA Liason Report

By Gloria Morris



The OPHA submitted a response to the Ministry of Education's call for feedback on the first draft of the Ontario Health & Physical Education Curriculum. Gloria Morris, CHNIG's OPHA Liaison representative was subsequently invited by the Ministry of Education to participate in a review of the second draft. The process was transparent & efficient, and the Ministry facilitators considered the feedback from all stakeholders very seriously. The final revised curriculum should be available in May 2009.

Hold the Date! OPHA 2009 Annual Conference, November 1 – 4, 2009 Toronto, Ontario <http://www.opha.on.ca>



Research and Education Team Report

By Barbara Kennedy

The team has continued to support CHN with a focus on individuals who are in education and research. We are continually reviewing activities and strategies which will assist us in meeting the many challenges in preparing a student to practice in a community health nursing setting after graduation. Issues, such as the dominance and valuing of illness/acute care, the lack of integration of CHN components into nursing curricula and the lack of qualified CHN staff who are prepared to teach, or who understand the concepts of community health nursing are issues which the team is considering. Other important issues include consideration of appropriate clinical placements and the most appropriate use of clinical situations which would allow students to transfer knowledge to practice.

Some of our activities include participating in a resolution requesting RNAO's support to ensure the integration and curricular enhancement of community health nursing theory and practice in all undergraduate nursing programs in Ontario.

We are also attempting to engage in more community health nursing research activities. There are a variety of skills and interests within the team which we feel could be supported and encouraged by networking with other researchers in community health nursing and the nursing research interest group.

Reminders to all, applications are being accepted for the research award. The deadline is March 31/09 and the application form is on the web site. This award is opened for any community health nurse who is currently involved in research or would like to begin a project. You do not need to be a student to apply.

COMMITTEE MEMBERS REPORT...(Cont'd)

Professional Practice

By Cori Watson and Katie Dilworth



Over the past few months, the professional practice team has had opportunities to support Community Health Nursing and issues that impact health. We continue to advocate for effective programs to support families in Ontario including advocacy for increased funding for the Healthy Babies Healthy Children program and Nurse Family Partnership program. Both programs were profiled in RNAO's submission to the Ontario Poverty reduction strategy.

Resolution #2, the Infant Sleeping Resolution called for a social marketing campaign for Safe Sleeping practices for infants. A collaborative workgroup with members from CHNIG and CNIG has advocated for updating the 'Back to Sleep' campaign, participated in activities of the Canadian Foundation for Study of Infant Deaths and requested RNAO begin a BPG on safe sleep practices. The Public Health Agency of Canada has begun updating the 'Back to Sleep' brochure and this workgroup will participate in the consultation on this important work.

We collaborated on a letter to the Minister of the Environment on the pesticide legislation urging for regulations no weaker than the draft regulations issued November 7, 2008 in relation to cosmetic pesticide use. We are also in process of creating a letter to advocate for a national school nutrition program.

Thanks to all the nurses who sent us issues to advocate for, and participated in the many issues we have consulted on recently. Contact Katie Dilworth kdilwor@toronto.ca or Cori Watson at cwatson@saintelizabeth.com if you are interested in being a part of our dynamic professional practice team. We will orientate you and review the roles within our team as well as our responsibilities to the Executive and the membership. Get involved today!

COMMITTEE MEMBERS REPORT...(Cont'd)

Canadian Foundation for the Study of Infant Deaths [CFSID] October 2008 Conference Report and Public Health Agency Canada [PHAC] and CFSID Roundtable on “Back to Sleep”

By Helen Tindale RN BScN PHN

Helen Tindale and Jan Levesque, Public Health Nurses and CHNIG members of the Infant Safe Sleep practices Workgroup attended the CFSID National Conference in October 2008 and presented **Advocating for Safe Infant Sleep Practices**. Twenty people attended this session about how Jan, in her PHN practice, noticed inconsistencies of infant sleep practices and messaging and developed a RNAO resolution which was accepted at the 2007 RNAO AGM. Attendees learned that this led to a workgroup which in January of this year submitted a proposal for a RNAO Best Practice Guideline [BPG].

THE ABCs of Safe Sleep, an online course was launched officially at the conference. Helen and Jan previewed this course and gave feedback prior to the launch. It was at least 5 years in the making. CFSID created this course to generate awareness about SIDS and what caregivers can do to reduce risk. It is designed for parents, grandparents, babysitters, day care workers and other individuals who provide care to infants. The course is 2 hours long and costs \$ 49.99 @www.sidscanada.org. There was discussion that community organizations should be encouraged to subsidize the cost and offer the course to parents. An online course targeted for professionals is to be released soon.

Also part of the conference was a half day **Research Update**. CFSID announced that it will release 2 new position papers. A family physician researcher spoke on “Pacifiers - do they reduce the risk?” and recommended pacifiers be used in the first year [after breastfeeding is established 4-6 weeks.] A children’s

lung specialist spoke about a framework of triple risk: vulnerable infant, critical developmental period, and external stressors. An American pediatrician’s topic was “It’s for sale so it must be safe - right? She reviewed a number of products available to parents, their claims and pointed out unsafe factors.



COMMITTEE MEMBERS REPORT...(Cont'd)

The Roundtable session on the “Back to Sleep” Brochure co hosted by Public Health Agency Canada and CFSID followed the CFSID conference. Researchers from the morning session were joined by invited experts: a pathologist; two pediatrics’ professors; a pediatric respirologist; a pediatric emergency physician; and Public Health Nurse, Helen Tindale, representing RNAO. Two of the physicians were past executive members of the Canadian Pediatric Society. There were representatives of CFSID Board, their executive director and their medical advisory committee. There were also Federal Government Representatives: three from PHAC, and two from Health Canada. We were provided with a binder and memory stick of research articles and samples of brochures from Canada, USA, and Australia. Janet Nevala, RN, facilitated the group discussion on key

issues of SIDS and Safe Sleep. The group identified priority issues. It is expected to take a year to revise the brochure. Drafts will be sent for review. Helen Tindale pointed out that after Jan Levesque’s article in the RN Journal [January 2008], we became aware of others in the province working on the issue, in particular Ottawa and London Public Health in Ontario had developed parent and professional resources. PHAC will attempt to seek info from others across the country. Calgary Health Region has developed info for parents and professionals and has also developed a BPG for Infant Sleeping Practices and SIDS. There was lively and productive discussion. Helen Tindale was able to make some points from the PHN practice especially with regard to inconsistent messages and the ensuing results seen on home visits.



Please refer potential candidates to <http://www.chnig.org/pages/Join> for online registration to CHNIG.



COMMITTEE MEMBERS REPORT...(Cont'd)

Ontario Community Health Nursing Standards Coalition

By Cheryl Reid-Haughian, RN, BHScN, MHScN, CCHN©

The past few months has been very quiet with the Coalition. Strategic planning and review of our goals should be forthcoming as we consider what and how to continue with the work of standards integration in Ontario.



Building Community and Public Health Capacity: Results of the Community Health Nursing Study

By Rebecca Gannan

Community health nursing including the public health sub-sector will be facing the same or greater health human resource challenges as the rest of the health care system in the next decade. A three year study provided a unique opportunity to investigate the community and public health nursing capacity nationally through results from a demographic analysis, 6700 survey responses, and 23 focus groups of public health professionals in 6 geographic regions across Canada (comprising rural and urban, front line, and policymaker/manager participants).

Community Health Nurses, leaders and decision-makers will have the opportunity to hear the study results and dialogue about opportunities to utilize study findings in their own workplaces at three upcoming events. A fireside chat will be hosted in partnership with CHNet-Works on April 3, 2009, 1:00-2:30 p.m. The researcher/decision-maker team¹ will next lead a pre-conference workshop on Sunday, June 7, 2009, before the CPHA Conference in Winnipeg, Manitoba, organized by the Nursing Health Service Research Unit (McMasters site) and the Winnipeg Regional Health Authority. Later in June, a Networking Café will be held at the CHNAC National

Conference in Calgary, Alberta on Thursday, June 18, 2009. These sessions will provide an opportunity to explore implications and actionable ideas that participants will be able to use in their own workplaces.



The findings of this Pan-Canadian study, entitled 'Building community and public health nursing capacity', provide evidence to support health service delivery and health human resource strategies. Community and Public Health professionals at all levels have opportunities to enhance utilization of human resources which in turn could improve the health outcomes in our communities. A combination of effective management practices, supportive organizational cultures, leadership development at all levels, and targeted government policies are essential if Community and Public Health Nurses are to practice the full scope of their competencies.

COMMITTEE MEMBERS REPORT...(Cont'd)

Building Community and Public Health Capacity: Results of the Community Health Nursing Study (Cont'd)

For further information on this study, contact Rebecca Ganann, Nursing Health Services Research Unit (McMaster site) at ganannrl@mcmaster.ca

Project Funded by:

Canadian Health Services Research Foundation; Health Canada (Public Health Agency for Canada; Health Human Resources Strategy Division; Office of Nursing Policy; Health Canada First Nations & Inuit Health Branch); British Columbia Ministry of Health (Nursing Directorate; Communicable Diseases & Addictions Prevention Branch); McMaster Nursing Health Services Research Unit; Vancouver Coastal Health Authority

Study team:

Researchers: Jane Underwood; Dr. Andrea Baumann; Dr. Donna Ciliska; Dr. Donna Meagher-Stewart, Dr. Raisa Deber, Mary MacDonald; Anne Ehrlich; Bonnie Schoenfeld; Dr. Melanie Lavoie-Tremblay; Dr. Jennifer Blythe; Dr. Noori Akhtar-Danesh; Dr. Audrey LaPorte; Val Munroe; Kristin Knibbs

Decision-makers: Dr. David Mowat; Dr. David Butler-Jones; Sandra McDonald Rencz; Barbara Oke; Dr. Susan Matthews; Dr. Ron Wall; Carla Troy; Lynn Jobin; Lynnette Leeseberg Stamler; Rosemarie Goodyear; Dr. John Blatherwick; Dr. Cory Neudorf; Paul Fisher



Upcoming Conferences and Workshops

Canadian Public Health Association 2009 Annual Conference Public Health in Canada: Strengthening Connections

Winnipeg Convention Centre

Winnipeg, Manitoba

7-10 June 2009

<http://www.cpha.ca/en/default.aspx>

18th Annual Canadian Conference on HIV/AIDS Research CAHR-Facing the Evolving Epidemic

Westin Bayshore

Vancouver, BC

April 23-26, 2009

<http://www.seatoskymeetings.com/cahr2009/index.html>

15th National Conference on Gerontological Nursing Making Moments Matter

Banff Conference Centre

Banff, Alberta

May 27-30, 2009

<http://www.cgna.net/>

19th Annual Canadian Home Care Association National Conference Home Care Summit

Fairmont Banff Springs,

Banff, Alberta

October 28-30, 2009

<http://www.cdnhomecare.ca/>

Communication Corner

Contact us if you have any concerns or questions or wish to join our committee.

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