

CHNIG 2009-2011 Goals and Objectives

Objectives	Goals
<ul style="list-style-type: none"> • Advocate for the development of appropriate health and social policy in Ministry Task Force, events and governmental and non-governmental organization initiatives. • Integrate CHN principles in policy response. • Identify and respond to relevant issues that may affect community health nursing, health and social policy. 	<p>To influence health and social policy, taking into consideration the social determinants of health.</p>
<ul style="list-style-type: none"> • Participate in conference planning. Explore opportunities to support preceptorship in CHN. • Develop HH competencies. Disseminate relevant research to CHNs. • Explore the feasibility, value and appropriateness of current RNAO Foundation: HH Orientation. • Promote uptake of evidence-informed practice. • Provide funding opportunities for education, program evaluation and research initiatives (Nurse Members). • Assist CHNs to meet competency and certification requirements and standards. 	<p>To build capacity in Community Health Nurses.</p>
<ul style="list-style-type: none"> • Enhance the understanding of the diverse roles in community health nursing among CHNs, non-CHNs, other health professionals, policy-makers, nursing students, and the public. • Actively engage in social marketing to improve visibility and public engagement. 	<p>To strengthen the profile of CHNs and articulate the significance of their practice.</p>
<ul style="list-style-type: none"> • Market CHNIG to members and potential members; improve marketing strategies. • Identify and respond to the needs of CHNIG members. • Improve marketing and dissemination of bursaries, professional development and awards for members and students. • Promote the value of CHNIG membership. Engage members. • Marketing (internal and external). Increase membership by 7.3%. 	<p>To promote, engage and maximize membership in CHNIG.</p>
<ul style="list-style-type: none"> • Engage nursing students in CHNIG and CHN (undergraduate/ student members). • Collaborate with key stakeholders. • Support student involvement within the CHNIG executive. 	<p>To promote engage and maximize student involvement in community health nursing and CHNIG.</p>

Goal One

To influence health and social policy, taking into consideration the social determinants of health.

Objectives	Activities	Target Date	Lead
Advocate for the development of appropriate health and social policy in Ministry Task Force, events and governmental and non-governmental organization initiatives.	Visit MPP and attend Queens Park Day, meet with local politicians; increase CHNIG profile at this level.	2009-2011	<ul style="list-style-type: none"> President, President Elect, Past President (Lead: Policy and Political Action)
	Explore opposition party politicians – meet with them to better understand politicians and their platforms and get their advice to improve influence.	2009-2011	<ul style="list-style-type: none"> Policy and Political Action
	Respond to requests for consultation on program planning and policy documents.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
Integrate CHN principles in policy response.	Integrate Primary Health Care principles in all CHN policy responses.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
	Lobby for inclusion of community nursing effectiveness research in policy response.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
	Increase key message of “the need for community based nursing research” in policy responses.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
	Seek opportunities to influence decisions in research. Work with researchers to identify key priority issues. Look for funding facilitates research.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
Identify and respond to relevant issues that may affect community health nursing, health and social policy.	Respond to RNAO requests for consultation. Collaborate with RNAO on action issues relevant to CHN.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
	Conduct environmental scan, attend workshops, as tools for discovery.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
	Prioritize and plan responses to emerging political and practice issues relevant to community health and community health nurses, within individual teams, in collaboration with the CHNIG executive, CHNIG membership and others, as needed.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)

	Consult with CHNIG members, CHNs, RNAO policy analyst and others, on relevant health and policy issues.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
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Goal Two

To build capacity in Community Health Nurses.

Objectives	Activities	Target Date	Lead
Participate in conference planning.	Co-chair, along with CHNC, CHN national conferences, when held in Ontario.	2010	<ul style="list-style-type: none"> Katie Dilworth
	Participate in various conference planning committees (e.g. hospitality, program, finance, marketing) and associated activities, relevant to CHN, such as the 2010 National CHN Conference and the 2009 OPHA Conference.	2009-2011	<ul style="list-style-type: none"> All executive members (Lead: Katie Dilworth)
Explore opportunities to support preceptorship in CHN.	Present links or information relevant to preceptor learning and growth.	2009-2011	<ul style="list-style-type: none"> Communication
	Advocate for nurse CHN preceptors.	2009-2011	<ul style="list-style-type: none"> Research and Education
	Explore peer mentoring opportunities.	2009-2011	<ul style="list-style-type: none"> Research and Education
Develop HH competencies.	Participate within HH Competency committee; subcommittee of CHNC Certifications, Standards and Competencies standing Committee.	2011	<ul style="list-style-type: none"> Home Health Executive members (Lead: Kim Dalla Bona)
Disseminate relevant research to CHNs.	Add research icon to CHNIG website; post research.	2009	<ul style="list-style-type: none"> Communication
	Participate in research related to CHN.	2009-2011	<ul style="list-style-type: none"> All executive members (Lead: Research and Education)
	Market opportunities for CHNs to participate in research.	2009-2011	<ul style="list-style-type: none"> Communication (Lead: Research and Education)
	Consider integrating a research only role within the executive, splitting Research and Education into two separate roles.	2011	<ul style="list-style-type: none"> All executive members (Lead: Research and Education)
	Consider highlighting research in CHNIG newsletter.	2009-2011	<ul style="list-style-type: none"> Research and Education (Lead: Communication)
	Disseminate conference workshop materials.	2010	<ul style="list-style-type: none"> All executive members (Lead: Katie Dilworth)
Explore the feasibility, value and appropriateness of	Collaborate with RNAO foundation to ensure the HH orientation is current, comprehensive and evidence informed.	2010	<ul style="list-style-type: none"> Home Health Executive members (Lead: Kim Dalla Bona)

current RNAO Foundation: HH Orientation.			
Promote uptake of evidence-informed practice.	Partner with RNAO chapters, and with relevant groups to sponsor and market PD events.	2009-2011	<ul style="list-style-type: none"> All executive members (Lead: Research and Education)
Provide funding opportunities for education, program evaluation and research initiatives (Nurse Members).	Maintain CHNIG Professional Development Fund, available to support attendance at venues such as the CHN conference.	2009-2011	<ul style="list-style-type: none"> Research and Education (Lead: Members Benefits)
	Maintain CHNIG Executive Member Professional Development Fund, available to support attendance at venues such as the CHN conference.	2009-2011	<ul style="list-style-type: none"> Research and Education (Lead: Members Benefits)
	Administer Educational Bursary.	2009-2011	<ul style="list-style-type: none"> Research and Education
	Administer Research Bursary.	2009-2011	<ul style="list-style-type: none"> Research and Education
Assist CHNs to meet competency and certification requirements and standards.	Post relevant support materials and links on our website, such as: CHNC, orientation manuals, competency resources, NCCMT, NCCPH.	2009-2011	<ul style="list-style-type: none"> All executive members (Lead: Communications)

Goal Three
To strengthen the profile of CHNs and articulate the significance of their practice.

Objectives	Activities	Target Date	Lead
Enhance the understanding of the diverse roles in community health nursing among CHNs, non-CHNs, other health professionals, policy-makers, nursing students, and the public.	Contact RPNAO, parish nurses, family practice nurses and occupational health nurses to contribute to environmental scanning activities and collaborate on CHN issues.	2009-2011	<ul style="list-style-type: none"> All Executive Members (Lead: Policy and Political Action)
	Promote CHN education in academic programs in Ontario.	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Research and Education)
	Encourage CHNs to submit articles to Registered Nurse Journal	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: President)
	Update and encourage the inclusion of information on CHNIG in orientation programs in CHN agencies across the province.	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Research and Education)
	Creation and dissemination of clear and concise definition of CHN.	2009-2011	<ul style="list-style-type: none"> All Executive members

			(Lead: President)
	Support integration of the CHN Standards in Practice and Education.	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Research and Education)
	Increase support for CHNs to become certified by providing information on the website to resources, study groups, CHN certification support guide, funding through RAO, CHNC.	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Professional Practice)
	Support dissemination of discipline-specific competencies for PH.	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Professional Practice)
Actively engage in social marketing to improve visibility and public engagement.	Consider integration of a non-nurse member-at-large within the executive.	2011	<ul style="list-style-type: none"> All Executive members (Lead: President)

Goal Four <i>To promote, engage and maximize membership in CHNIG.</i>			
Objectives	Activities	Target Date	Lead
Market CHNIG to members and potential members; improve marketing strategies.	Increase CHNIG presence at nursing events.	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Members Benefits)
	Consider CHNIG exhibits and presence at multidisciplinary and client/family/caregiver events, such as Ontario Home Care Association (OHCA).	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Members Benefits)
Identify and respond to the needs of CHNIG members.	Explore strategies to identify needs of CHNIG members, such as survey monkey or reviewing relevant research.	2010	<ul style="list-style-type: none"> All Executive members (Lead: Members Benefits)
Improve marketing and dissemination of bursaries, professional development and awards for members and students.	Developing a communication strategy to increase applicants to available CHNIG funding.	2010-1011	<ul style="list-style-type: none"> Member Benefits
Promote the value of	Identify and contact workplace liaisons in community health nursing.	2010	<ul style="list-style-type: none"> Member Benefits

CHNIG membership.	Explore opportunities to disseminate information to relevant nursing practice councils of local agencies.	2009-2011	• Member Benefits
	Develop a network of workplace liaisons. Invite workplace liaisons to join professional practice team.	2010	• Member Benefits
Engage members.	Utilize multiple communication strategies to reach members including: newsletter, e-mail, website, social networking.	2009-2011	• All Executive members (Lead: Members Benefits)
	Enhance website utility: post conferences, educational opportunities, research, letters and evidence of CHNIG advocacy.	2009-2011	• Members Benefits (Lead: Communications)
	Publish two newsletters annually (fall and spring).	2009-2011	• Communications
Marketing (internal and external).	Explore opportunities for marketing CHNIG; increasing the visibility of CHNIG and CHNs.	2009-2011	• All Executive members (Lead: Members Benefits)
	Develop new branding for logo, letterhead, website.	2010	• All Executive members (Lead: Members Benefits)
	Update Practice Pages: HH, PH, CHN.	2010	• Professional Practice (Lead: President)
	Create a facebook page.	2009	• Student Rep
	Utilize and update social networking site to engage new and lapsed members.	2009-2011	• All Executive members (Lead: Student Rep)
	Create a standardized educational presentation, to be used by CHNIG members, Schools of Nursing etc.	2010	• Professional Practice
Increase membership by 7.3%.	Collaborate, find links and shared membership, with other RNAO interest groups.	Oct 2010	• All Executive Members (Lead: Members Benefits)
	Collaborate with RNAO to contact lapsed members.	2009	• Members Benefits
	Create 'the top 7 reasons to join CHNIG': post and send to lapsed members.	2009	• Communications, President, President Elect (Lead: Members Benefits)

Goal Five

To promote engage and maximize student involvement in community health nursing and CHNIG.

Objectives	Activities	Target Date	Lead
Engage nursing students in CHNIG and CHN (undergraduate/ student members).	Maintain and promote Student Professional Development fund, available to support attendance at venues such as the CHN conference.	2009-2011	<ul style="list-style-type: none"> Research and Education (Lead: Members Benefits)
	Maintain and promote student AGM fund.	2009-2011	<ul style="list-style-type: none"> Research and Education (Lead: Members Benefits)
	Develop and promote a CHNIG Facebook page.	2009	<ul style="list-style-type: none"> Lead: Student Rep
	Advocate with relevant stakeholders and multi-sectoral sectors for appropriate community based clinical placements and opportunities, such as continued collaboration with CASN to ensure appropriate clinical placements.	2009-2011	<ul style="list-style-type: none"> All Executive members (Lead: Research and Education)
	Ensure regular student-focused columns in the newsletter.	2009-2011	<ul style="list-style-type: none"> Student Rep (Lead: Communications)
	Sponsor RNAO student memberships.	2009-2011	<ul style="list-style-type: none"> All executive members (Lead: President)
	Raise the profile of CHN education in academic programs in Ontario.	2009-2011	<ul style="list-style-type: none"> Research and Education
	Update and encourage the inclusion of information on CHNIG in orientation programs in CHN agencies across the province.	2009-2011	<ul style="list-style-type: none"> Research and Education
Collaborate with key stakeholders.	Collaborate with CASN and NSO, individual schools of nursing and other relevant organizations e.g. CARE (Centre for Internationally Educated Nurses).	2009-2011	<ul style="list-style-type: none"> Research and Education
Support student involvement within the CHNIG executive.	Maintain student representation on CHNIG executive including recruitment, replacement and succession planning.	2009-2011	<ul style="list-style-type: none"> All executive members (Lead: President)