

**Community Health Nurses Initiatives Group
Executive Committee Meeting**

Saturday, February 3'07 8:30 – 3:30 pm
RNAO Boardroom, Toronto

MINUTES

Present:

Ruth Schofield, Martina Cullerier, Lorraine Vandenberg, Marlene Slepko, Rebecca Ganann, Mary Lachapelle, Bea McDonough

By Teleconference:

Cheryl Reid-Haughian, Kim Dalla Bona, Nursing Students (Christine & Sheena; Algonquin College)

Regrets:

Cathy Ward-Griffin, Marilyn Evans, Sue Starling

Agenda approval & additions

1. Minute approval

Changes to minutes:

4.5 First National Community Health Nursing Conference Update

Should read: Marlene is the Chair of Hospitality.

Minutes approved with amendment: (Martina, Kim)

2. Business Arising
 - 2.1. Environmental scan

Marlene discussed an article in St. Catherine's Standard written by the president of OMA re: support for Justice Campbell's report. Supports the public health response re: SARS, as well as support and acknowledgement for nurses.

Roundtable in Ottawa re: conditions of Home Health in Canada. Looking for 2 representatives from CHNAC. Claire Becker is the Chair. Ruta Valaitis from McMaster will attend as one of the representatives. News release from VON re: Health council & conditions of home health care in Canada. This news release can be found in the news release section on VON website.

Infectious disease – pandemic response has gone under the radar. The community response to flu clinics this year has been poor. ONA is having some education sessions re: pandemic planning. An Infection control 8 module program is supposed to be rolling out this year. (PHAC is the lead on this). All practitioners will need to achieve competency re: infection control. There will be large implications for the roll out of this program.

Action Item:

Cheryl has some contact information re: this module and will forward to Ruth.

Public Health - Mandatory programs revisions have gone forward as a draft. Ruth will represent CHING on this committee. There will be an opportunity for further input on the draft guidelines. CHING has 3 resolutions in particular that will be relevant to the Mandatory Guidelines.

A consultant to the Ministry, has been in Kitchener. He felt one of the improvements he felt that needed to happen is that all nurses in home health should be trained to do IVs. This highlights a clear lack of understanding of the work that is actually being done in the community and the capacity to provide care i.e. that all nurses are already providing this level of care. There is a need for greater knowledge of what home health nurses do. There is an advocacy role for CHNIG

related to the Ministry; also a possible role for nursing secretariat. Perception/understanding of home health at the Ministry level needs to be addressed.

Action Item:

Kim and Lorraine will develop a letter or statement in response to this. They will seek support from Sheila Block in framing letter and ensuring that it is disseminated to all relevant parties. Cheryl will provide Kim and Lorraine with details of date and location of talk.

2.2. RNAO Resolution # 1

Discussion of outcome of resolution #1. Friday, January 26th the vote took place. There was very strong support for going forward with the resolution. 6 distinct actions that have been outlined and can be found on the RNAO website in Resolution section. RNAO will continue to collaborate with CNA. CNA has looked at its position in the advocacy role. The process of discussion and voting was handled well within assembly. The process has ended with a constructive and positive outcome. Ruth spoke on behalf of CHNIG at the assembly commending the Board for the work that has been done and that it was consistent with our mission in CHNIG.

2.3. Partnership update OHCA, OCSA, OACHC

Cheryl provided an update re: OHCA. Cheryl has connected with President of OHCA. Her response was very positive and she seemed happy that CHNIG was looking to establish a connection. Some questions were raised re: expectation, commitment. Will they come to our meetings? Will we go to their meetings? Is the expectation to inform each other of relevant issues. We were reaching out to them and wanting to connect. This issues needs to be explored further.

Discussed 2 different models in operation. 1 with cross-representation across committees vs. collaboration and communication. Also discussed having a partnership group rather than members sitting on the executive.

Decision:

All partners could come to November meeting. Partners will be invited to attend to explore with them how we can develop a partnership. This year the partnerships will be on an invited basis. The next year can be used to figure out the mechanics of a more formal partnership. We could have a partnership meeting to invite each of them to come.

Action Item:

Cheryl will follow up with OHCA re: this discussion and invite them to attend the November meeting. Ruth will follow up re: other groups. The Executive will strategize in June re: how to make the November meeting most effective.

2.4. 1st National CHN Conference Update

Conference planning is moving along well. The brochure is in development, if not already organized. There will be 70 presentations and 35 posters. 160 abstracts were originally received. The abstracts were generally of high quality. Speakers are confirmed. Sponsors are coming through. The next phase is publicity and encouraging registration. Registration will be on CHNIGs website for both CHNIG and CHNAC. Members of planning committee will have banquet and registration covered as a thank you for all of the hard work.

2.5. Bylaws

Discussion re: changes to the CHNIG Bylaws. Discussion re: deletion of section re: satellite groups. Ruth spoke with Daniel Lau of RNAO – the only concern re: revisions to bylaws is that we maintain co-signing re: financial matters. Otherwise, we are able to make revisions as needed. Attached document reflects the changes approved by the executive.

Decision:

Marlene moved to approve amendments. Seconded by Ruth. No further discussion. Revisions approved by vote of the executive committee.

Action Item:

Approved changes will be brought to the membership at the AGM for approval.

2.6. BPGs –Client centered care, Early Identification

Lorraine reported re: BPG client centred care – lack of CHN representation (with references/resources) on this BPG workgroup. Cathy has provided some articles to Lorraine.

Action Item:

Lorraine will send letter to Tazim. Lorraine was trying to develop resource list to provide to them. If anyone familiar with research re: client-centred care in the community, please forward references to Lorraine. Lorraine to seek support from the librarians at her health unit in this literature search.

Early Identification – currently no BPG in this area despite very heavy focus in community practice. Ruth sent email to NP association of Ontario and Family Practice Nurses. This recommendation & formal request has gone forward to the BPG group. Their priority for this topic is yet to be determined.

Action Item:

Ruth will follow up with PNIG as well. Lorraine is seeking story-telling from home care nurse perspective, client-perspective or literature: stories or articles re: client centred care (relationship to community). Any relevant resources should be forwarded to Lorraine. Ruth will connect colleague at McMaster to Lorraine. Marlene will forward relevant websites to Lorraine.

2.7. Joint membership

Spoke with membership representative at RNAO and there is no possibility for forming alliances with other groups for a discount.

Action Item:

Martina will follow-up with CNIG re: outcome of discussion with RNAO i.e. that there is no capacity to do so.

2.8. **GUEST: Judy MacDonnell, Rainbow Nurses Interest Group**

Presentation provided re: Sexual Diversity Resolution. Information provided will be beneficial for executive to help support moving this resolution forward.

Discussion re: best approach and/or focus for this work including Clinical BPG, Healthy work environment BPG, population perspective.

Discussion re: best process for development of position paper vs. BPG. Board has approved support for position paper. Currently a policy paper is in the process of being drafted. First step is likely working with RNAO to clarify whether position paper, strategy, position statement or BPG will be developed. Also discussed the piloting implementation of a BPG in a community setting.

Action Item:

CHNIG will support the strategy implemented. Lorraine and Judy will work together with RNAO to clarify. Judy will go back to RNIG to confirm collaboration on this project. Judy will contact RNAO re: dissemination of policy paper to CHNIG for feedback prior to finalization for the April meeting. Lorraine will take a lead on this work.

2.9. Resolutions update

Lorraine discussed the update for the Baby Friendly Initiative. See attachment.

Rainbow interest resolution discussed in 2.8 above.

Comprehensive school health: Looked into letter re: nurses in the schools. Target audience was not suitable at that time. Messages will go through Mandatory Program guidelines.

2.10. Position papers/statements

Teleconference to be arranged. Public health position paper is up-to-date. Consider bringing in some of our new partners re: home health. Marlene & Marilyn to do home health. Decision to do CHN paper first then look at added value of Home Health paper. Ruth, Lorraine, Kim, Cheryl, Marlene sit on the CHN workgroup. Other position papers be considered following the completion of this paper.

Decision:

Teleconference arranged for Tues. Feb. 20th at 8:00 a.m. Other partnership groups will be brought in after this meeting. Kim & Lorraine will take the lead on this initiative. Lorraine will contact Lynne Anne to see if she can join the group. Ruth will inform Sue re: teleconference.

2.11. Approval of revised budget, acct codes

Discussion re: budget issues. Monies have not yet come from RNAO. Mary reports that money is coming and cheques will be issued next week. Many issues were faced related to the bank account and changes to signing authority.

Discussion related to kilmoetrage. Suggested change: 40 cents/kilometre until end of budget year. As of Nov. 1, 2007: 45 cents/kilometre.

Decision:

Moved Marlene, Seconded Ruth. Moved and carried.

Discussion re: changes to account codes. Suggested revisions to codes distributed. Additional code suggested:

6.2 Awards & Grant

9.2 Bursaries & Scholarships

10.4 Marketing and Promotions

15. Miscellaneous (i.e. gifts, speaker honorarium, etc.).

Decision:

Revised codes approved.

Action Item:

To take forward to AGM, budget for 2005-06 and 2006-07. Bring draft of budget for 2007-08 as far as projected spending. Discussion re: possible need for change in communication budget for 2007-08 and new discussion re: Marketing and Promotion role.

2.13 Succession plan: president elect & other positions , call for nominations

Kim has come forward as President Elect and has arranged this with her placement. Marlene is the chair of the nomination committee. She is reviewing the positions that will be available. Gaps: Cathy Ward-Griffin has moved beyond the term. Research & Education will be vacant. Student representation position is also open – targeting 2nd & 3rd year students. Martina plans to stay at least one year. Cheryl will stay on in her position. As Kim moves into President Elect position, position is open in Professional Practice (Home Health). Also new position will be available re: Communications Team Leader (Marketing & Promotion). The call for nominations will be in the Winter newsletter.

Action Item:

Marlene to follow up with Marilyn re: interest in staying in position. Marlene to follow up with Bea re: nominations in newsletter.

2.14 Nursing Secretariat

Ruth gave spoke to Doris re: issues raised from visit with Lynn Macfie. Ruth asked re: how CHNIG could be involved with New Graduate Initiative to support for roll out. Health Force Ontario job portal agenda is to soliciting for out of country nurses with an excess of nurses. RNAO is not happy with this and is not supporting this initiative. In terms of the Late Career Initiative, Doris suggests keeping the presence of CHNIG in this forum. Late Career has not yet come to community health, as we are aware. Communication around this initiative has been unclear. Communicated that there needs to be a balance of skills developed in professional education between clinical simulation and communication. Had discussion re: inter-professional decision-making. Raised issue of BPGs and some of the barriers to implementation and plan to discuss this further with the membership at the AGM. This concern will be reported back to RNAO.

Action Item:

Ruth to work with Marilyn & Cathy re: letter to RNAO and COUPN re: implicit messaging to nursing students re: acute care vs. community nursing.

2.15 Storage Space

Marlene attempted to contact RNAO re: previous space available in RNAO head office. She plans to follow up further on this issue.

3. New Business

3.1. AGM planning, speakers, awards, elections

AGM planning: Need to get guest speaker. Suggestion re: topic “BPGs”, including some of the barriers to implementation. One speaker to come from home health and one from public health. There was support from the executive for this suggestion. Feedback re: barriers can be included in CHNIGs strategic planning. One hour to be allocated for speaking. Theme “Barriers & Facilitators to the Implementation of BPGs in Community Health Nursing” (to an Integrated Approach).

Action Item:

Suggested speakers: Nancy Edwards & Barbara Davies. Cheryl could approach these potential speakers. Panel re: practice settings successes & challenges – to include spotlight and non-spotlight organizations. Creating a framework for supporting these changes in the community. Cheryl – “Palliative Care” related integration of multiple BPGs. Education: integration of BPGs into curriculum. Marlene to follow up with Marilyn St. John from Niagara Public Health Department to see if they have a representative on the panel. Ruth to elicit student representative (Lorraine will be back up for Public Health Perspective). Leadership perspective: possibly Marilyn St. John, Cheryl. Call for individuals to work with together with CHNIG re: strategic planning of implementation.

Plan for speakers:

10 minutes per speaker with 20 minutes per discussion. Lorraine will be the moderator of this discussion (Kim as back up, if Lorraine speaks on behalf of the health unit).

Awards: Need to think about clinical excellence award. Deadline currently is: April 17, 2007.

Clinical excellence and seed grant will have same deadline: March 30 updated on website. Should be in newsletter.

Marlene to send template of agenda to Ruth re: meeting. Meeting to start at 8:30 a.m. There will no longer be ½ hour allocated to breakfast. Instead it will occur as a working breakfast. Ruth will act as the formal voting delegate at the RNAO AGM.

Action Item:

Martina to follow up re: updating newsletter re: clinical excellence award.

3.2. Interest Group Chairs meeting

3.2.1. Practice Pages

A sub-committee of RNAO is looking at the practice pages. RNAO is looking at developing a common format for the development of these practice pages. These will be available for the various practice areas. CHNIG does have these in place i.e. "a day in the life of home health nurse".

Action Item:

Once these guidelines are formalized, Ruth will forward these to Lorraine in order to revise the existing pages.

3.2.2. Home office support/communications

RNAO is now asking how the home office can support the interest groups with their communication.

Action Item:

Bea to develop a list of the activities that could be supported. RNAO will send an assessment re: needs of groups. When it does come, Ruth will forward to Bea.

3.2.3. Public Education Seminars

Relevant document was sent with agenda. Do we support the strategy? Do we have individuals that could act as speakers at such forums? Discussion re: is this a role for RNAO? Does it fit better within the mandate of Public Health? Issue of role conflict identified re: conflict of interest and conflict in public perception. In nursing practice, the BPGs are utilized but this activity of public education falls within the practice domain. Executive members do not support the involvement in this initiative.

Action Item:

Ruth & Marilyn will draft letter to Connie, chair of interest groups, to articulate the comments.

3.3. Guests : June meeting

June meeting will be in overnight meeting in Hamilton. Focus will be on Strategic Planning. Guest will be invited to November meeting. The exception is that James will be invited to come to highlight key features of the website. Date for June meeting is June 1st & 2nd.

3.4. Queens Park day

As per email sent by Marilyn Evans on January 29, 2007.

3.5. Job Opportunities on CHNIG website/newsletter

Bea has added link on website to HealthForce Ontario.ca and job careers through RNAO. Martina got some information from RNAO re: guidelines should CHNIG decide to provide online advertisements for job opportunities.

Recommendation:

That we not provide forum for job postings on website at this time.

3.6. Home Health - Healthy Workplace

Marlene is on the National Advisory Panel for this initiative. Marlene reviewed the membership of this panel. Six case studies have just been completed including for-profit, non-for-profit, VON, SEN, public health and regional health settings. This document is in the process of going to press; the release date is unknown. Workplace conditions have been studied.

3.7. CHNAC Update

A meeting was held in Winnipeg on Dec. 1 supported by PHAC. It is CHNAC's 20th anniversary this year. History and goals have been revisited. CHNAC is currently supporting the core competencies and toolkit, as well as other initiatives. For more information refer to CHNAC website. This meeting was a productive networking meeting with representation across the country.

Concerns were identified by Bea on behalf of the membership that members are unable to access the CHNAC newsletter.

Action Item:

Marlene will follow up with CHNAC re: access to CHNAC newsletter.

4. Information only
 - 4.1. Executive reports
 - 4.1.1. President
 - 4.1.2. Past president
 - 4.1.3. Secretary
 - 4.1.4. Treasurer
 - 4.1.5. OPHA
 - 4.1.6. Ontario CHN Standards Coalition
 - 4.1.7. Communication
 - 4.1.8. Membership Benefits
 - 4.1.9. Professional Practice
 - 4.1.10. Research Education
 - 4.1.11. Student representation
 - 4.1.12. Political Action

5. Letters of Support

Ruth has had a number of requests for letters to support CHSRF grant application re: Building PHC leadership, an application for the Change Foundation. She has sent letters of support on behalf of CHNIG for these applications.

6. Newsletter

Bea requested that students (on teleconference) send via email and suggestions re: the student section and/or articles re: issues relevant to students.

Bea also reminded executive to submit articles for newsletter.

7. Next Meeting CHNIG AGM April 21, 2007