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CFNU Biennial 2013

ICN Down Under

Sergeant by day, nurse by night

"What's NU?" www.nsnu.ca Issue 88 June 2013

## President's Notebook

Janet Hazelton, NSNU President





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It's summertime, but by no means are things slowing down. There are numerous issues still percolating which require our attention.

Since our AGM in late April, I have travelled to Melbourne, Australia to attend and present at the International Council of Nurses. From there I quickly laundered the contents of my suitcase and headed to Cape Breton to attend the Nova Scotia Federation of Labour executive meetings then I repacked my luggage and hopped on a flight to Toronto for the Canadian Federation of Nurses Unions Biennial Conference from June 3-7. After attending the Ontario Nurses Association conference on leadership in London, Ontario June 20-21, where I presented highlights from our identity campaign, I proceeded to Cape Breton to participate in a rally in protest to changes in Employment Insurance benefits.

About 75 protesters joined labour leaders from across the province on

Saturday, June 22 to voice their anger over the federal government's changes to Employment Insurance.

We marched from Access Nova Scotia to Cabot House to MP Mark Eyking's office. The Liberal Member of Parliament joined us, sending a message to the federal government that these changes to El will hurt many families in Nova Scotia and beyond.

Fellow MP Rodger Cuzner, echoed those sentiments saying that perhaps more HUNCA DE CONTROL CONTR

Janet Hazelton at the ONA Leadership Conference, London Ontario, June 21, 2013

people would have attended the rally had they not been working within the same seasonal-employment system that is currently under attack.

Representing Nova Scotia Premier Darrell Dexter, MLA Gordie Gosse said workers are waiting longer for their El and the appeals system is no longer there to support them.

It is important for all Canadians to appreciate that this is not a union issue but an issue for all workers in all sectors of the workforce, who may at one time find themselves unemployed, under-employed or temporarily unable to work. This issue is far reaching with more severe ramifications for part-time and seasonal industries. For those of us with full-time employment we should count ourselves fortunate for our present circumstance.

I hope that our Atlantic premiers will take this message to the Council of the Federation meetings in Niagara on the Lake the week of July 22. I will be travelling to those meetings along with my Canadian Federation of Nurses Unions counterparts from across the country, to voice our concerns on nursing and patient advocacy issues to our key decision makers.

As we wind our way into the summer months, I hope that you all have a restful, healthy and enjoyable summer ~ and let's hope that Mother Nature cooperates.

I hope to see you in September when we all celebrate the fruits of our labour at various Labour Day events throughout Nova Scotia.



Janet Hazelton, centre, and other labour representatives at the El Rally in Sydney, June 22, 2013

### On the Cover

Over 50 delegates and Board members of the NSNU attended the CFNU Biennial Conference in Toronto, June 3-7. On June 6, NSNU participants wore their uniforms in solidarity, showing support for the national trend towards nurse identity and visibility in the workplace.



See page 18



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## NSNU Draw for Members-at-Large

Per the policy of the Board of Directors with regard to member attendance at the Nova Scotia Federation of Labour (NSFL) Conference, the Board has determined that NSNU will fund eight local presidents to attend the conference in addition to two members-at-large which are drawn at random from expressions of interest applications.

The NSFL Conference will take place at the Westin Halifax from Sunday, October 27 (starting at 4:00 pm) to Wednesday, October 30 (concluding at 3:00 pm). The NSNU will cover a 37.5/40 hour work week, as well as, expenses for mileage, accommodations, meals and conference registration.

The draw for the eight local presidents to attend the NSFL Conference took place on April 30 at our Annual Meeting. The following locals were randomly selected:

St. Anne Nursing Care, Northumberland Hall, Valley Regional, VON Cape Breton, Dartmouth General, Windsor Elms, MacGillivray Guest Home and Blomidon Court.

The NSNU is now looking for two members-at-large to participate in the NSFL Conference. This draw is open to all members. Interested members are asked to contact Debbie Grady (debbie.grady@nsnu.ns.ca) at the NSNU via email to submit your name for the draw.

The deadline to submit your name is July 22. The draw will be made July 24.

### **Class Reunion**

The Class of 1980 from the Aberdeen Hospital School of Nursing is planning a 30 year reunion. Plans include an informal get together at the Pictou Lodge Resort on Friday evening, September 13th followed by daytime activities on Saturday, September 14th. That day will be capped off with a dinner at the Lodge. The weekend event will end with a brunch on Sunday, September 15th.

A block of rooms will be reserved at the Lodge for people to book. More information can be obtained by contacting Bonnie McCarron by email ~ bonita.mccarron@pcha.nshealth.ca or by phone/text at 902-754-9890. Those interested in attending may also contact Linda MacNeil by email ~ linda.

macneil@pcha.nshealth.ca or by phone/text at 902-754-5076.





## Canadian becomes president of International Council of Nurses

May 20 2013

A Canadian has been elected president of the International Council of Nurses.

Judith Shamian, the past president of the Canadian Nurses Association, will serve a four year term.

The CNA says the results were announced at the international council's congress being held in Melbourne, Australia, June 2013.

In a news release Shamian says she is very "humbled" by all the support from her colleagues in Canada and internationally.

Shamian is based in Toronto and has held a variety of positions including vice-president of nursing at Toronto's Mount Sinai hospital and executive director of Health Canada's Office of Nursing Policy

The ICN represents more than 130 national nursing associations and more than 13 million nurses worldwide.



Judith Shamian, ICN President

The ICN says it has created a variety of multi-media platforms for its members to be involved in political, social and policy decision-making in an evolving health care environment.

## **Canadians identify gaps in LTC**

Canadians have identified two major gaps in long-term care as key problems with the country's health care system, a nationwide survey commissioned by the Canadian Federation of Nurses Unions indicates.

The national poll conducted by Praxis Analytics in May 2013 showed Canadians were particularly concerned by what they perceived as a shortage of long-term care spaces and lack of qualified staff working in long-term care settings.

However, CFNU President Linda Silas said policy makers need to ensure they don't try to address these gaps by making corresponding cuts to acute care services in Canadian health care facilities.

# Absenteeism and overtime rates impact safe nursing staff numbers in Canada

New figures on rates of absenteeism and overtime worked by nurses throughout Canada clearly illustrate the need for all health care systems to place more emphasis on safe staffing levels at hospitals and other care facilities, says Canadian Federation of Nurses Unions President Linda Silas.

The statistics, compiled for CFNU show that in 2012 Registered Nurses and nurse supervisors working in the health care and social assistance sector worked well over 21.5 million hours of overtime.

"Nurses know from the front lines that the situation is even worse than indicated by these statistics," Silas said.

The Informetrica statistics show that each week in 2012 an average of 18,900 of Canada's 251,500 Registered Nurses and nurse supervisors in the sector were absent from work due to illness or disability.

"These levels of overtime and absenteeism clearly indicate that nursing workloads have reached

"Laying off nurses and other medical professionals in hospitals will not fix the problems in long-term care," Silas said. "That would be like robbing Peter to pay Paul!"

The survey of 934 Canadians found that only 56.4 per cent of respondents who had a close relative use long-term care in the past 12 months rated the experience positively, substantially lower than the 72.6-per-cent who gave health care in general a positive rating.

a point that is not safe or acceptable," Silas said, noting that the connection between heavy nursing workloads and declining patient care and safety has been exhaustively researched and is well understood.

The hours of overtime shown by Informetrica's research to have been worked by nurses in 2012 are equivalent to 11,900 full-time equivalent jobs, Silas noted.

The survey results also showed nearly a third of Canada's nurses worked overtime each week, with the average total overtime worked at 6.6 hours per week – both figures essentially unchanged since 2010.

Total cost of paid overtime in 2012 was estimated at \$746.5 million, up from \$660.3 million in 2010.

But many nurses work overtime without being paid, Silas observed, and the figures compiled by Informetrica indicate the value of this unpaid work exceeded \$200 million.

Close to two thirds of respondents believed there is currently insufficient qualified staff available in both home care (68.4 per cent) and long-term care (63.7 per cent) settings.

The highest rating in the survey, 96 per cent, was given to the importance of having a qualified nurse on duty.

## Nurses Call for Action; Health Care Wait Time Report Shows Progress Stalled

June 12, 2013

Data from the eighth report card issued by the Wait Time Alliance (WTA) clearly shows what nurses have been saying for years, Canadians are waiting too long for care and governments need to prioritize health care now.

"For the July meeting of the Council of the Federation this is a clear wake-up call for all governments," said Linda Silas, President of the Canadian Federation of Nurses Unions (CFNU). "It is not acceptable that as wait time improvements stall, governments are not ensuring adequate investments in quality health care in Canada.

This report confirms what over 800 nurses' union leaders from across Canada discussed during their biennial convention in June in Toronto: social determinants of health significantly impact health care outcomes and positive structural change in the Canadian health care system is urgently needed.

Nurses also noted a shortage of long-term care spaces coupled with an inadequate number of qualified staff continues to burden the system. It is critical that nurses be involved in policy development in order to ensure safe, efficient, and sustainable health systems decisions are made.

"We have a federal government that is effectively cutting transfers to health care and refusing to discuss a new health care accord with the provinces," said Silas. "The response from many provinces is to reduce investments in health care and this is just not acceptable, it is the patient and health care workers who bear the brunt of these cuts or ill-conceived changes."

CFNU members continue to call for National Pharmacare and a National Strategy on Aging which would include, as echoed by the Wait Times Alliance, a national strategy on dementia to address the increasing numbers of Alzheimer's and other dementia-related conditions.

## **Upcoming dates**

Be sure to mark the following dates on your calendar as we prepare for yet another busy period. This is a snapshot of upcoming events. Be sure to check the NSNU calendar at www.nsnu.ca for a more detailed account of upcoming events and meetings, or changes to proposed meetings.

**Council of Presidents** ~ November 18

**Component Meetings** ~ November 20 - LPN Component meeting, November 19 – Community Care and LTC Component meetings (Glengarry, Truro)

**Board of Directors' Meetings** ~ September 6, October 25, November 19 - (Glengarry, Truro), January 6, 2013

**AGM 2014** ~ April 28-May 1, 2014 (Glengarry, Truro)

Eastern Labour School ~ May 25 - May 27, 2014 - hosted in New Brunswick by NBNU

## Patient Safety Indicators Now Publicly Reported Online Health and Wellness

May 29, 2013

New public reporting on patient safety indicators posted online began May 29.

Nova Scotians can learn how often health care workers are seen cleaning their hands and how often patients get ill from the hospital-acquired infection C. difficile, by looking at the department's website.

The province passed the Patient Safety Act a year ago to increase transparency and accountability in the health care system.

District health authorities and the IWK Health Centre must report hand hygiene and infections from C. difficile to the department and the public on a regular basis.

This is the first time the information is being collected in the same way across the province, allowing provincial rates to be calculated and benchmarks set for improvements.

The provincial C. difficile rate for Jan. 1 to March 31 was 3.17, half the national benchmark of 6.25. The rate means that for every 10,000 patient days, there were 3.17 new hospital-acquired cases.

The provincial hand hygiene rates for the same period are:

- 64.1 per cent of the time health care workers were seen cleaning their hands before contact with patients or their areas.
- 81 per cent of the time, they were seen cleaning their hands after such contact.

Developing a provincial program to track and monitor key infection rates and other patient safety indicators addresses increasing public interest and a recommendation from the auditor general.

Nova Scotia is the second province in Canada to require patient care indicators be reported publicly. Ontario introduced similar legislation in 2008.

Nova Scotians can learn more about the rates at http://novascotia.ca/dhw/qps/

### Nursing Week Celebrations Making a Difference

Submitted by Susan Burgess

On May 10, 2013 a donation of \$200.00 was made to the Matthew 25 Food Bank in honour of Nursing Week by our local of the Nova Scotia Nurses' Union on behalf of our members. Pictured from left to right: Susan Burgess, Local Secretary, Cindy Loane, Matthew 25 representative, Karen Eldridge, Local President and Christine Moreland, NSNU member.



## CFNU Biennium – Toronto 2013

The Nova Scotia Nurses' union is a proud affiliate and member organization of the Canadian Federation of Nurses Unions which represents close to 200,000 nurses and student nurses. Members work in hospitals, long-term care facilities, community health care, and our homes. CFNU speaks to all levels of government, other health care stakeholders and the public about evidence-based policy options to improve patient care, working conditions and our public health care system. The following is a snapshot of the events that took place at the June 2013 CFNU Biennial event in Toronto that united nurses from across the country on matters that impact them both professionally and personally, as we advocate for change in the health care system.



CANADIAN FEDERATION OF NURSES UNIONS



#### President's Address

The much anticipated CFNU Biennial Conference which officially began June 4<sup>th</sup> with two days of workshops at Toronto's Westin Harbour Castle Hotel, was followed by two days of business meetings ending on Friday, June 7.

Linda Silas, president of CFNU, set the tone for the biennial event in her address saying – "We Can Either Go Far Together or Fast Alone" – stressing the importance of team work and its ability to "change the world."

She told conference attendees, over 850 nurses from across Canada attending the national meeting, that nursing has a promising future and that for CFNU changing the fabric of health care was "not just a numbers game." Rather it is about pushing



Linda Silas, right with ONA president Linda Haslam-Stroud at the Biennial Reception, June 3, 2013

the nursing agenda, fighting for fairness and respect in the workplace, advocating for equity in patient care whether that patient is in acute care, long-term care or in the community.

Linda said that it is imperative for nurses to work in healthy workplace environments in order to achieve clinical excellence and that patients also have a right to safe, quality patient care.

She informed everyone in attendance that the next research project CFNU would undertake would be investigating the scientific value of replacing like with like ... a nurse with a nurse, saying, "If you justified the need for an RN then you need to replace her/him with an RN. If the patient acuity indicates you need an LPN then you need to replace that worker with an LPN, not a personal care worker."

Speaking about advancing the scope of the profession, Ms. Silas noted that it's not about "individual advancement ... it should be about meeting patients' needs and that's why we will continue to link quality care with safe staffing,"

In concluding her address, Linda encouraged nurses to participate in member-to-member engagement to make sure nurses understand what is at stake when government meddles in union business. Bringing home her point, she said that this "is about My Union and as the old saying goes ... an injury to one is an injury to all."

She urged members to defend unions, fight to protect Medicare for future negotiations, focus on aspiration, not on jealousy. "My Canada is a place where health care is a human right. My Canada is where labour rights are human rights. My Canada is a place where education is a human right. My Canada is a country where clean water and clean air are human rights," said President Silas.

### Jen Thiele, NSNU

One of NSNU's own joined a panel presentation at the June 4<sup>th</sup> plenary session in Toronto to share her personal account of Equity at Work and in Society.

Jen Thiele, who is originally from Edmonton, Alberta but now calls Halifax her home, accepted a soccer scholarship to The University of Memphis, where she received her Bachelor of Science in Nursing (BSN) in 2003. After working one year in intensive care, Jen found her calling in paediatrics. She has had the unique

opportunity to work in hospitals in both the United States and Canada. including LeBonheur Children's Medical Centre in Memphis, TN, the Stollery Children's Hospital in Edmonton and now currently at the IWK Health Centre in Halifax.

Unfortunately, not all of Jen's early experiences were positive. She faced discrimination and bullying on the job fresh out of school. This negative discourse made her doubt her confidence and ability as a nurse - in short, she felt if her fellow coworkers didn't trust her abilities, how could she. Jen reminded those in attendance at the plenary session that Jen Thiele, RN IWK



a willingness to learn from each other, regardless of age, background, education and other variables, is essential and that we must strive as professionals to treat each other equitably and respectfully.

This was Jen's first CFNU convention and the NSNU is proud of her contribution to our national meeting.

### **Keynote Address: Right Honourable Michaëlle Jean**

Journalist, queen's representative and special envoy are some of the words generally associated with the Right Honourable Michaëlle Jean, but attendees of the CFNU 2013 convention learned a few more – survivor, advocate and principled, just to list a few.

Jean delivered an inspirational and heartfelt keynote address to the nurses during convention. During her address, she paid a special tribute to her late mother- a registered psychiatric nurse who she credits as being the greatest influence in her life.

Along with her mother and sister, Jean came to Canada as a penniless refugee. She spoke of her mother's struggle to provide for her family with dignity.

Jean also spoke of her experience with the Canadian health care system from her mother's nursing, her own work as a hospital orderly, as well as her work with Ouebec shelters for battered women.

"I've seen everything. From overcrowded ERs to violence to having to make do with meager resources and working in degraded conditions," she said. "Nurses have held the system together at the cost of their own health."

She concluded by saying that nurses are on the frontlines of everything that shapes our country, and have a much better assessment of the 'pockets of pain thrown across our country' than any statistics can provide.

"Nursing is a profession steeped in humanity," she said. "The best people giving the best of themselves is heautiful"

### David Foot - Boom, Bust and Echo

Delegates of the 2013 convention enjoyed the studies of David Foot, professor of economics at the University of Toronto who recently authored the book *Boom, Bust and Echo: How to Profit from the Coming Demographic Shift in the 21st Century.* 

The title refers to three generations and population dynamics that society is facing in the 21st century. The boom generations refers to the boomer generation, the bust to generation X and echo to generation Y, who are children of the boomer generation.

It is well known that the boomer generation outnumbers the two succeeding generations, resulting in an "upside down" population pyramid. Foot went on to discuss population trends across the world. He also correlated each generation to specific consumption and investment trends, as future predictors and indicators.

Foot then described the plethora of health issues we can expect as we age. Foot said that our use of hospitals takes off in our 60s and rises dramatically to the late 80s. In our 90s it reaches 12 times the lifetime average because of broken hips, injuries from falls, and pneumonia.

According to Foot we haven't attracted enough of the boomers' kids into health care occupations to meet the need of caring for aging baby boomers, over the next 40 years.

He recommended immigration, including putting a priority on immigrants with teenagers and encouraging those young people to pursue careers in health care, as well as recruiting 45+-year-olds into a second career in the health field as possible solutions to dealing with the health care worker shortage.



### **NSNU to Host 2015 Biennial event**

Halifax presented a video at the 2013 convention promoting Nova Scotia and the NSNU as host to the CFNU 2015 Biennial conference which will take place in Halifax, June of that year.

The NSNU is excited to welcome nurses from across the country. Planning is already underway as we select venues and explore opportunities for nurses to network, learn and dialogue on nursing concerns in our scenic and hospitable province.

NSNU members took time to visit the NS Tourism Lighthouse which graces downtown Toronto as part of our 2015 convention awareness efforts. NSNU members who are interested in volunteering to help prepare for and work at the conference should contact the NSNU at nsnuoffice@nsnu.ns.ca.

## Canadian Views on Prescription Drug Coverage

May 22, 2013

A new poll commissioned by the Canadian Health Coalition and the Canadian Federation of Nurses Unions reveals that a clear majority of Canadians feel that access to prescription drugs should be based on the patient's medical needs, and most would support a universal drug plan to ensure that all Canadians are covered for medically necessary prescription drugs.

When asked about their views regarding access to prescription drugs, a clear majority of Canadians (78%) felt that access to prescription drugs should be based on the patient's medical needs.

Canadians were informed that the price of prescription drugs is, on average, higher in Canada than in all other industrialized countries, except the United States.

When asked if they support a universal public drug plan to ensure that all Canadians are covered for necessary prescription drugs, more than three-quarters (78%) support this idea, and fewer than one in seven (14%) are opposed (8% are unsure).



## **CFNU Biennium Education Days**

By Paul Curry, NSNU Educator/Researcher

On June 4th and 5th, 2013, Labour Relations Representative Lilo Wessels and I had the opportunity to participate as instructors for the Canadian Federation of Nurses Unions Biennial Convention in Toronto. Prior to this, with counterparts from the other provincial nurses unions, I sat on the committee that planned the 15 workshops that were offered.

The courses addressed a large range of topics which were chosen based on feedback from nurses from across the country. There was a course for nurses approaching retirement, a course for young nurses taking on leadership roles in their union and another to help nurses lead through organizational change. There were several courses aimed at addressing workplace problems such as violence, bullying, addiction, fatigue and safe staffing. Other courses addressed broader topics such as the history of organized labour in nursing, the sustainability of Medicare, the improvement of our health care system, the use of social media and

union membership engagement. One course even took nurses on a bus tour through inner city Toronto to discuss and witness the social determinants of health.

As an instructor, one concern and challenge was ensuring that our course material was interesting and relevant to nurses from across the country. Within minutes, however, it became clear that the challenges facing nurses are virtually the same across the land, as is too the love for the nursing profession.

I believe one of the most enriching aspects of the Convention was the opportunity for our nurses to engage with their Canadian colleagues. There was an immediate and tangible bond between people who, despite living and working sometimes thousands of kilometers apart, are united by the nursing profession. There was something therapeutic about feeling the strength of numbers – 850 nurses strong! – and to join with other provincial nurse union members to speak to nursing issues at the national level.



NSNU members, Gerri Oakley, Lillian Fynes and Alaine Halliday at a CFNU Biennial Workshop in Toronto, June 5, 2013.

## Sergeant by day, nurse by

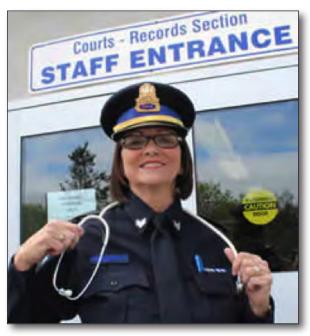
Courtesy of Halifax Regional Police

Sgt. Veronica Henneberry doesn't take a lot of time for herself. When she's not at her day job supervising the Records Section, she's taking care of sick newborns one night a week in the Neonatal Intensive Care Unit at the IWK. She has been a registered nurse for 36 years, and has simultaneously led nursing and policing careers for the past 23 years.

At the age of 19, Veronica knew she wanted to be a police officer. "I felt like I needed more life experience first," she explains. "I decided to go into nursing, live life and acquire more experience so I could offer more assistance and have a better sense of what people were going through."

As a single mom with 13 years of nursing under her belt, Veronica finally felt it was time to pursue her dream of becoming a police officer. She was accepted by the former Halifax City Police and sent to Holland College on Prince Edward Island. She spent every second weekend traveling home to spend time with her two kids, who were both under the age of eight at the time. Twenty-three years later, Veronica is a Sergeant with HRP and a long-standing member of the Colour Guard.

Veronica's experience as a nurse has come in handy many times during her career. Just this past February, while off duty, she came upon a scary scene. A car was pulled off to the side of highway 111 on the Cole Harbour on ramp, near Penhorn Mall. She saw a woman standing outside talking on her cell phone and a man standing by the trunk of the car. "My cop instinct kicked in and I thought to myself – 'this is odd." Had she turned away, she wouldn't have noticed two small boots sitting upright on the trunk of the car. Realizing there was a small child attached to those boots, she pulled over to see how she could help.



As Veronica approached the car, she saw that the child was unresponsive. It turns out the man who had been standing by the trunk was a passerby who had stopped and he immediately stepped aside once Veronica identified herself as a nurse. "The woman, who I learned was the child's grandmother, was very upset and told me the child just had a seizure," Veronica explains. "I told her I was an IWK nurse and that I could help and she instantly calmed down. I could hear her telling the person on the other end of the cell phone 'A nurse just stopped, and she's an IWK nurse!""

Veronica proceeded to check the child's vitals and asked the grandmother specific questions about the little boy's medical history. Since there was no history of seizures, Veronica learned he had been sick with a very high temperature. She explained to the grandmother that children can have a seizure if their temperature goes too high. Thankfully, the little boy had a pulse and was breathing, but he remained unresponsive. It was obvious he needed immediate medical attention. The grandmother told Veronica that an ambulance was on the way. Veronica continued to monitor the boy's vitals and provide warmth.

Continued from page 15

Within minutes, Cst. Ray Quesnel happened upon the scene. "This is funny," laughs Veronica. "The woman told Cst. Quesnel that I was a nurse, to which he replied, 'No, she's a cop,' and the woman said, 'No, she told me she was a nurse.' It was at this point that Cst. Quesnel asked me if I had a sister on the force." Veronica took him aside and said, "Ray! It's me!" She explained that she is both a nurse and a police officer and that she didn't want to confuse the woman with this information. "I needed to calm her down by telling her a nurse was caring for her grandson," says Veronica.

The ambulance soon arrived, but was on the exit ramp to Woodside. Veronica carried the little boy through the snow to the ambulance and provided the paramedics with the information she had gathered. She later learned, while following up with the child's mother that she had been correct and the little boy had had a seizure brought on by a high temperature. Luckily, he was doing fine. Just another life experience to add to Veronica's evergrowing list!

## It's time for a change

In order to maintain the integrity of our website the Nova Scotia Nurses' Union periodically reconfigures logon credentials for all our members. A postcard containing your new username and temporary password will be mailed directly to your home before the end of July. This mail-out will coincide with the launch of the newly formatted and redesigned website (www.nsnu.ca). Your credentials are required when accessing information on MyNSNU.ca and when voting on contracts. Please retain this information in a secure location. We hope you enjoy the new look and feel of the site as well as the user-friendly credentials



## **NSNU Discount list**

Special rates or discounts on goods or services are offered to NSNU members. The listing can be found on our website at www.nsnu.ca under the Advocacy and Promotions tab on the homepage. Offers may vary depending on the season and existing discount offers. Be sure to present your Union card at all discount patrons as well as other retail and service outlets not listed on our site, as you may be awarded benefits or discounts that the NSNU has not been made aware of.

If you do receive a discount from a retailer or business not listed below, please let the Nurses' Union know and they will be added to our list. Businesses and service organizations interested in offering discounts to NSNU members should contact the NSNU at 469-1474 or 1-800-469-1474, or visit our contact page online.

## ICN Conference -Melbourne, Australia



The International Council of Nurses met May 18-23 in Melbourne, Australia. This event attracts thousands of nurses from around the world to engage in dialogue on nursing issues of global concern. Representatives from the Canadian Federation of Nurses Unions, including NSNU's president, Janet Hazelton attended the event.

Janet was among those who submitted an abstract in 2012 to the ICN Scientific Programme Committee and was chosen to present at a concurrent and a symposium session. Janet was selected to speak on the topic of promoting the value of nursing through

nurse uniforms and the identity campaign. This is a very familiar message for Janet as the NSNU has been a leader in this growing movement.

Her sessions examined the problems associated with taking nursing work away from nurses and assigning it to assistive care personnel. The presentation described the introduction of the information campaign and a distinctive nurse uniform in Nova Scotia, implemented as a means to emphasize nurse identity and value and to help the public recognize nurses available to meet their needs.



# IWK Celebrates Nursing Week with prestigious award presentation

The Local Executive of the IWK once again hosted a time-honoured tea in celebration of National Nursing Week. A big part of their celebrations include the presentation of the Fran Harper Memorial Award.

Fran Harper was a dedicated and caring nurse who worked at the IWK Grace Health Centre until her retirement in 2001. Working in the MABLE program enabled Fran to work with mothers and families, ensuring a healthy transition to home during the postpartum period.

Fran understood the importance of continuing education, as evidenced by her graduation from St. Francis Xavier University, shortly before her retirement. Her community service showed that she was committed to improving the health of women having babies.

Fran also served proudly in the Nova Scotia Nurses' Union and was actively involved with her Local.

The Fran Harper Memorial Award is presented to a nurse who has demonstrated a commitment to improving the lives of women, children and families. The successful candidate must also show an eagerness to continue with education and be an active member in good standing of the NSNU, employed at the IWK Health Centre.

This year, the award was presented to Grace McConnell.

Congratulations to Grace from her co-workers at the IWK and the NSNU.



Grace McConnell, far right, the 2013 Fran Harper Memorial Award recipient with Fran's granddaughter Jasmine and daughters Kim and Angela



Grace McConnell, the 2013 Fran Harper Memorial Award recipient

Karen Green, IWK Secretary, Deana Dixon, IWK President, Shannon Wark, IWK LRR, Dwayne MacKinnon, NSNU LRR, Linda Hutt, IWK Vice President

### NSNU Nurse receives Excellence Award from Cancer Care Nova Scotia

Cancer Care Nova Scotia recognized a head and neck cancer surgeon, a tobacco control advocate, a volunteer group that supports cancer patients and families financially and emotionally, and a palliative care nurse who enhances quality of life for patients and families.

The annual Excellence Awards in pioneer, leadership and patient care were presented Thursday, June 13, to people who have helped further cancer prevention, treatment and care for Nova Scotia cancer patients and families.

The Excellence Awards were introduced in 2009 to mark the 10th anniversary of Cancer Care Nova Scotia.

"Singling one person or team out of a group of talented and dedicated health professionals and volunteers is no easy task," said Agar Adamson, Cancer Care Nova Scotia advisory board member and chair of the 2013 Excellence Awards selection committee. "Of the 21 nominations we had to review, all were worthy of recognition. Still, with the help of a good evaluation tool and some insightful discussion among our committee of volunteers, we were able to make thoughtful decisions."

### The Excellence Award recipients are:

- Patient Care for a Health Professional:
   Lynn MacDonald, Antigonish, palliative care nurse, Guysborough Antigonish Strait Health Authority
- **Pioneer:** Dr. Mark Taylor, Halifax, head and neck surgeon, Capital Health,
- Leadership: Mohammed Al-hamdani, Halifax, PhD candidate, Saint Mary's University
- Patient Care for a Volunteer: the Rosalin Nickerson Care Fund Society, Barrington, South West Health



Throughout her 34-year career, Lynn has helped keep patient-centred care as a top priority and has worked to ensure patients get the best care possible. She was a keen advocate for the care of persons with disabilities at end-of-life, bringing about policy changes, and was instrumental in developing a symptom-relief kit for palliative care home patients.

## NSNU members wear uniforms to CFNU Biennial and encourage nation-wide conversation about professional image



Nurses from the NSNU delegation who attended the CFNU Biennial Convention this past June in Toronto decided to wear their white and black uniforms on the first official business day of the conference. NSNU nurses stood strong and proud amongst nearly 850 nursing colleagues from across Canada, and were awarded many compliments on their professional look. Thank you to NSNU member, Anne Jamieson, from St. Martha's Hospital in Antigonish for the great idea to wear their uniforms at convention, and to Katherine van Nostrand of Belmac Uniforms for supplying each nurse with a new uniform.

NSNU President, Janet Hazelton, presented at the International Council of Nurses conference in Australia this past May on the subject of NSNU's distinctive uniform and was met with rave reviews.

### **New Brunswick Nurses Union**

Nurses in New Brunswick have initiated the change to white and black as well. Nurses at the Saint John Regional Hospital have taken the leap and are demonstrating great leadership as they have collectively volunteered to transition to white and black uniforms. Currently there are over 1000 nurses at that facility wearing white and black when they work, with more joining the change every day.

### **United Nurses of Alberta**

A June 14 post on the United Nurses of Alberta Facebook page from their president, Heather Smith, talks about taking back the nurse's professional image:

"TAKING BACK THE WHITE!

This week the Negotiating Committee discussed actions and activities that can support contract negotiations and demonstrate our opposition to workforce changes (position eliminations, layoffs and staffing substitutions) that compromise patient and staff safety.

We believe at this time the priorities should be engaging members, providing information and overt workplace advocacy activities. Build advocacy for our profession and ourselves.

One action that the Negotiating Committee is encouraging members to participate in is "Taking Back the White." We encourage members to wear white uniforms, or at least white tops. We have additional ideas for RN, RPN, and LPN pins and more to come.

Pass on the word. Help build the momentum.

For us, our profession and our patients, residents and clients WEAR WHITE!

Heather Smith, President, UNA"

Continued on page 22

### Saskatchewan Union of Nurses

After seeing the NSNU nurses in their uniforms at CFNU convention, a Nurse from Saskatchewan contacted NSNU directly for more information on the uniform policy, colour choice, etc. They would like to take the initiative and pilot a distinctive uniform on their unit at their facility.

### **Newfoundland and Labrador Nurses Union**

NLNU's Clarity Project is an ongoing identity campaign in the province. They encourage their nurses to proudly identify themselves as a Registered Nurse to their patients, residents and clients. NLNU has been discussing a nurse uniform for some time now; on May 14 they posted this message on their Facebook page:

"Wouldn't it be great to have everyone know you are a Registered Nurse before you introduced yourself? Moving forward with uniforms will greatly increase our visibility in the health care system - something we believe is vital to the future of our profession. We want the public to know when Registered Nurses are present and when Registered Nurses are being eliminated or cut."

NLNU President, Debbie Forward, also presented on the Clarity Project in Melbourne, Australia at the International Council of Nurses conference.

### Expanding education opportunities is key

LPN Maria Langille is a staff nurse in the restorative care unit at Sutherland Harris Memorial Hospital in Pictou. She is also the vice-president, representing LPNs, on the Nova Scotia Nurses' Union board of directors. She has seen her share of tensions between LPNs and RNs over the years.

"I've had RNs say to me 'Oh, the LPNs think they're RNs now.' Well, no, we don't."

Langille believes that education is what's needed to help RNs and LPNs understand what LPNs can and can't do.

Five years ago, she and a physician at her hospital began organizing monthly in-service sessions; they bring in experts to discuss whatever topics are appropriate for the patient population. The events are open to all who are interested, rather than just a specific profession or specialized group; one of the goals is to ensure that RNs and LPNs attend the sessions together.

"The best thing about the sessions is that they help us become aware of what everyone else can do," Langille explains. "For example, we brought in someone to go over central lines. LPNs can't access them, but they can do the dressings. Some of the RNs didn't know that."

It's a progressive way of teaching that has really caught on.

"Management didn't support the



Maria Langille, LPN

sessions at first because they didn't understand the need for them," said Langille. "But since they've seen how this approach creates a stronger knowledge base for both the RNs and LPNs, they've come around."

"It's a lot of work to put the sessions together, but it pays off in creating a better work environment," said Langille.

From an interview with Sue Cavanaugh, Canadian Nurse – June 2013 Volume 109 Number 6

## Communities know best when it comes to health care

June 19, 2013 - Editorial Content

### by Dave Wilson

Health 'super boards' have been the topic of many conversations I've had lately. A super board is the result of merging several district health authorities into one centralized 'super board', usually located in the provincial capital. This model, as seen in Alberta, is what Liberal leader Stephen McNeil is proposing for Nova Scotians. McNeil plans to dismantle the nine district health authorities located throughout Nova Scotia and leave just two boards, one for the IWK and one for the rest of Nova Scotia.

There are several reasons why a super board would not work for Nova Scotians. First of all, stripping communities of their ability to make health care decisions is a bad idea. Local people know best what issues are facing their community and their voice is vitally important to ensuring Nova Scotians receive the best care possible. They know where dollars need to be spent and where extra dollars might be found. A recent survey in Alberta found that people living in rural areas were significantly less happy with their access to quality health care than those in Edmonton, where the super board is based.

We also know that shifting to super boards leads to more expensive administration costs. Alberta saw an \$80 million increase in administration spending after implementing a super board in their province, over and above the cost of making the initial switch. That is the exact opposite direction of where the NDP wants to take Nova Scotians. Over the past four years we have reduced administration spending more than any other province in the country while at the same time providing unique solutions like collaborative emergency centres to ensure better care.

The Alberta example also proves that super boards do not lead to better care. Recently, Alberta's entire super board was fired by the Minister of Health for voting to give 99 health executives \$3.2 million in bonuses just months after making cuts to frontline services, freezing wages for nurses, doctors and other health staff. Since implementing the super board, Alberta has seen an emergency room crisis with patients calling 911 from inside ERs, reduced staff morale, unreliable ambulance response times and widespread intimidation which resulted in a number of doctors leaving the province.

The last thing Nova Scotia needs is fewer doctors or longer emergency room wait times. Instead, we have been working to attract more doctors through the province's first ever physician resource plan and collaborative emergency centres which give doctors more flexibility.

It's clear from the Alberta example (and others) that super boards are not the answer to better health care in Nova Scotia. The NDP will continue to find ways to save money by promoting efficiencies in the health care system and will continue to work with health care professionals from communities around the province to find real solutions to health care issues facing Nova Scotians.

If you have any further questions about super boards or any other issue please contact me by phone at 864-0396 or email, davidawilsonmla@eastlink.ca.

### Nurses' votes count

With a provincial election on the horizon, it is important to be prepared and informed to vote.

### Why should you vote?

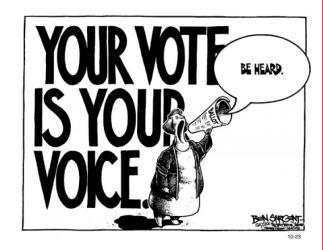
Plain and simple – voting is important. In Canada we have the right to freely vote in any election, be it municipal, provincial or federal, and as Canadian citizens we should exercise this political freedom.

Voting helps you become a part of your community and a part of the conversation. Priorities are often placed based on those who are politically active. Choices have to be made by politicians and your voice needs to be heard.

There is power in numbers and when you cast a ballot in Canada, your vote is counted. Many countries around the world do not have this right and we should not take voting lightly.

### Be prepared to vote on Election Day

Before the Election Day it is important to talk to your manager to arrange for time off to vote. All eligible voting citizens are entitled to a period during their work day to which they are able to cast their ballot. Begin by consulting your manager and potentially prearrange hours for you to leave work to vote. It is also important to ask if they will have replacement staff booked in advance. If you feel like you are not being accommodated in your requests, talk to your Local Shop Steward, or NSNU LRR.



#### Be informed

Take the time to get educated on the political parties and how their political platforms could affect you, your family, your community, your work, etc. Prior to an election there will be many articles in the newspaper, stories on the evening news and candidates on talk radio shows. Listen, read, watch and learn about the parties and their leaders.

There are three political parties running for leadership in Nova Scotia: NS New Democrat Party, NS Liberal Party and the NS Conservative Party. Each of these political parties have web pages that the NSNU strongly urges you to visit prior to casting your vote:

**NS NDP** - www.nsndp.ca Led by Darrell Dexter –Nova Scotia Premier

**NS Liberal Party** - www.liberal.ns.ca Led by Stephen McNeil

**NS Conservative Party** - www.pcparty.ns.ca Led by Jamie Baillie



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