



THE HEALTH CARE ACT – WHAT'S NEXT?

In this issue...

EBOLA PREPAREDNESS

FLU VACCINES – THE DEBATE CONTINUES

President's Notebook

By Janet Hazelton, BScN, RN, MPA

Ebola Preparedness

I think Rick Mercer said it best on his self-titled hit show on CBC. Nurses are tough. To summarize his most recent rant, he praised nurses for facing the Ebola crisis with professionalism and bravery.

To nurses, his stylized commentary was certainly complimentary but not necessary. We live with an ever present possibility of contracting illness, risk of injury, and the threat of workplace violence each and every day. We often put ourselves in harm's way but we, as professionals, work hard to minimize risk.

That is also the role of the Nurses' Union and our sister Unions across the country. In concert with the Canadian Federation of Nurses Unions we have collaboratively determined best practice policies like our Ebola Policy Directive with the hope that each province will implement our plan based on our frontline knowledge, expertise and collective voice.

Through dialogue with our Member Organizations, our national network of Occupational Health and Safety specialists and our nursing policy advisors we craft recommendations

that support nurses in various work environments and situations.

As CFNU President, Linda Silas has stated that all prevention preparedness has to begin with the precautionary principle and a commitment to safety first. Given the high risk of transmission with Ebola, it is critical that frontline nurses have the protective equipment to stop the infection from spreading.

The Public Health Agency of Canada has released guidelines regarding this issue and the Canadian Federation of Nurses Unions has been working with PHAC to ensure the safety of front line workers.

The Occupational Health and Safety Committees under the CFNU recently held a teleconference and have developed a position statement on Emergency Preparedness for the Ebola Virus Disease in which the clear message is safety is not negotiable.



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The key points of the CFNU/NSNU Ebola policy statement are:

- Safety is not negotiable when dealing with infection control.
- Workplace Occupational Health and Safety Committees must be involved to ensure the guideline implementation.
- No nurse or health care worker will be in contact with a potential Ebola patient without the proper training and PPEs (personal protective equipment).
- Workers will be fully-trained, tested, drilled and monitored in both patient assessment and PPE procedures.
- Policy directives will be established for how to advise patients on where to go for assessment; how to equip separate rooms for triage and separate isolation rooms when needed.
- PPEs will include at a minimum for low-risk patients, an N95 respirator, face shield, impermeable gowns and gloves.
- For high-risk confirmed cases of Ebola, nurses will be provided with powered air purifying respirators (PAPR), double gloves, leg and feet covers, and biohazard suits that meet a specified standard.
- Staffing will be at a minimum two RNs per patient, due to the acuity and complexities of caring for Ebola patients.
- All health care facilities will implement a communications plan that will provide consistency around national standards and an information number to call.
- Public Health Agency of Canada (PHAC) will deploy a rapid response team to each case of Ebola diagnosed.
- Monitoring and emotional support will be provided to all health care workers in care for Ebola patients, regardless if in direct care or in quarantine as established by PHAC

Although the risk of Ebola presenting in Nova Scotia is low, the Nova Scotia Nurses' Union (NSNU) stands behind the CFNU Policy Directive. The document highlights stronger infection prevention and control methods that will better protect those providing health care. Medical personnel will have to respond quickly and efficiently to a potential case, which means the individuals who have direct contact with Ebola patients must be adequately trained and equipped before a case presents.

The Nova Scotia Nurses Union through the BUGLM committee's and Union Management Consultation Committee's are involved in discussions with the Employer's to ensure all PPE equipment is available and training for use of equipment has begun.

As new cases of Ebola continue to arise internationally, the NSNU is looking to our membership to share perceptions and concerns about Ebola preparedness in their own workplaces by filling out a brief questionnaire on MyNSNU. Input from our members is important, as we speak on their behalf with our stakeholders and the Nova Scotia Department of Health and Wellness.

The Union is committed to ensuring that all Employers provide the necessary education and preparation to ensure the safety of all nurses and healthcare workers.

All documents, including the Nova Scotia policy on Ebola Preparedness, can be found on the homepage of nsnu.ca. As this issue is fluid and may require changes to protocols as we learn more about how best to treat the disease, please visit our site for updates to policy statements.

Standing Committees of the NSNU

The AGM Operations and Nominations Committee (Michelle Lowe, VP Western Region and Committee Chair, Carmella Gellately & Ricardo Garcia) convened on October 3 to select the Standing Committees of the Nova Scotia Nurses' Union. All identifying information on each Expression of Interest application was redacted enabling the Committee to make selections without bias.

2015 NSNU Constitution & Resolution Committee

Chair: Gerri Oakley, VP Eastern Region

Members: Mary Dexter, Musquodoboit Valley | Helen Uhlman, HSASS

Alternates: Karlene Pynch, VRH | Kim MacKenzie, New Waterford

2015 NSNU Finance Committee

Chair: Lillian Fynes, VP Finance

Members: Penny Joudrey, Dartmouth General Hospital | Cindy O'Halloran, Guysborough

Alternates: Rhonda Church, Windsor Elms | Teresa Ogilvie, Valley Regional Hospital

2015 NSNU Education Committee

Chair: Cheryl Barker, VP Central Region

Members: Karen Eldridge, Hants Community Hospital | Deborah Doyle, VON Antigonish

Alternates: Darlene AuCoin, Cape Breton Regional | Jen Thiele, IWK

CFNU and Council of Presidents meet in Halifax

The National Executive Board (NEB) of the Canadian Federation of Nurses Unions (CFNU) met in Halifax the week of October 6 to discuss ongoing issues and opportunities in nursing at home and abroad.

The NEB is made up of the presidents and executive officers of CFNU member organizations. All members of the NEB are nurses, and they meet several times a year to examine issues facing nurses working in health care today.

“There is so much happening that affects nursing



The CFNU National Executive Board.

professionals – new challenges like infection control and the spread of disease,” says Janet Hazelton, president of the Nova Scotia Nurses' Union. “The expertise of our NEB members enables our organization (NSNU) and nurse unions under the CFNU umbrella to put issues in perspective and strengthen our advocacy roles.”

Throughout the course of the week, NEB members

discussed issues affecting health care. Some topics included the upcoming CFNU Convention in Halifax in June 2015, international concerns, such as the Ebola crisis, and ongoing efforts in safe staffing and quality of work life for Canadian nurses.

“There is a lot going on locally and internationally that affects nursing,” says Linda Silas, president of the CFNU. “We recently



National Executive Board of the CFNU meets in Halifax, October 6-9.

attended the Council of the Federation in Charlottetown and the Health Ministers’ Meeting in Banff. Our priorities continue to include dialogue around a new Health Accord that will protect Canadians and strengthen our publicly funded health care system.”

On Thursday, October 9, the members of the NEB participated in the Council of Presidents’ meeting hosted by NSNU. This conference is convened for presidents and executive officers from all NSNU locals on an annual basis.

The Council of Presidents meeting was also held in Halifax at the Cunard Centre. The event allowed presidents and leaders from NSNU locals around the province to meet and get to know the leaders of nurses’ unions across the country. The meeting was split into two sections, one led by the NSNU Board of Directors, and one led by the NEB.

CFNU Executive Director Arlene Wortsman updated attendees on recent efforts by the CFNU and its member organizations. An important topic of discussion was the Health Accord,



Janet Hazelton addresses the NSNU Council of Presidents on October 9 at the Cunard Centre in Halifax.



CFNU President Linda Silas speaks at Council of Presidents.

which expired in March, 2014 and has not been renewed by the federal government. The Health Accord, enacted in 2004, determined standards of care and accessibility for health care services across Canada. Without the Health Accord, control over health care falls to the provinces, and standards and accessibility may differ from place to place.

The CFNU will be launching a political awareness campaign – Nurses Know Solutions for Stronger Healthcare – to encourage members to take interest in the decisions being made that impact healthcare and health care workers. Wortsman highlighted the importance for Canadians to learn about issues like the Health Accord before going to the polls for the next federal election.

Following Wortsman, Linda Silas and leaders from provincial nurses’ unions across the country vocalized their support for the NSNU, and shared their own experiences with challenging legislation. Health care unions and nurses have been tested in every province, and it is through hard work and dedication that our sister organizations have continued to flourish.

The CFNU represents approximately 200,000 nurses and student nurses across Canada. They work on a national and international level to improve patient care, working conditions and the public health care system, and they provide support for the provincial nurses’ unions in their ongoing challenges.



NSNU members and staff, as well as Lana Payne of Unifor join Bill No. 1 rallies at the legislature.

NS Health Care Unions Battle Bill No. 1

In 2013 Nova Scotia elected a majority Liberal government. The party, led by Stephen McNeil, ran on a promise to amalgamate nine District Health Authorities across the province into just one, with the IWK as a separate entity. However, changing the make-up of the health care system in Nova Scotia would not be as simple as restructuring the health authorities. Offshoots of the action would cause major changes for unionized workers who as a result would need to have their contracts renegotiated with a new employer.

The government saw the restructuring as an opportunity to reduce the number of health care bargaining units in the province to four. The unions worked together to present an option that would allow for a faster, more comprehensive style of health care bargaining in the province; one that would both reduce the number of bargaining units and simplify the process for employers. The result was to propose a Bargaining Association model which has been used in British Columbia.

Under this model unions representing “like” bargaining units would meet together to negotiate a tentative agreement. A

lead negotiator and spokesperson would be selected by the unions, in all likelihood the representative from the union with majority representation. The Bargaining Association model would reduce the number of bargaining tables to four, and enable health care workers in the province to remain within their own union.

In September, the government declined the Bargaining Association model. Instead, they introduced Bill No. 1 – The Health Authorities Act.

Like the Bargaining Association model, Bill No. 1 would reduce health care bargaining units across the province to four: Nurses, Health Care, Clerical and Service/Support. However, under Bill No. 1, each unit would be represented by just one of the four Nova Scotia health care unions, and a union could only be assigned a bargaining unit if they already represent workers in that group. This provision would cause a shift in union representation.

Leading up to and during the week of September 29, the unions and their members spoke out against Bill No. 1.

Speaking Out

Friday, September 26

In September it was announced that Bill No. 1 would be introduced on Monday, September 29 – it would be the first bill read and voted on for the 2014/2015 legislative session. In the week prior to the reading, statements were made by the Premier and Minister of Health and Wellness that suggested Bill No. 1 would do more than amalgamate the province's District Health Authorities. It was implied that the bill would lead to severe changes in the way unions represent health care workers in the province.

On Friday, September 26, the four union leaders stood together on the steps of the legislature for a press conference, alongside Rick Clarke, president of the Nova Scotia Federation of Labour. They were joined by dozens of members of the NSNU, NSGEU, CUPE and Unifor. They spoke in favour of the Bargaining Association model, and chastised the government for actions that would gut unions and displace members.

Leaders called on union members to speak out at a rally planned for the following Monday.



Janet Hazelton speaks at press conference regarding Bill No. 1



Janet Hazelton speaking with media during the news conference, September 26, 2014.



Monday, September 29

On Monday morning the Government briefed unions on the details of Bill No. 1 for the first time, prior to the first reading in the legislature. It was during this briefing the government confirmed that Bill No. 1 sought to reduce more than 50 bargaining units to four and assign each to one of the four unions.

That afternoon more than 600 members of the NSNU, CUPE, Unifor and NSGEU arrived outside province house. They wore their union colours and proudly waved their union flags. They marched from Granville Street to Hollis Street and back chanting, “So, So, So, Solidarity.”

They were united. Four unions, standing together, in solidarity. Four unions with a single voice and a single goal: a Bargaining Association that would allow all health care workers in Nova Scotia to stay with their current unions.

Tuesday, September 30

On Tuesday Law Amendments began, which enabled members of the public to speak directly to the Legislative Assembly about Bill No. 1. Numerous health care workers arrived to speak out against the bill.

While Law Amendments were taking place, union leaders were seeking an audience with Health and Wellness Minister Leo Glavine, who spearheaded Bill No. 1. Minister Glavine was unavailable to meet and absent from the Law Amendments.

Although there was no formal rally planned for Tuesday, union members and supporters arrived early in the morning to protest. They were motivated by the efforts on Monday to continue fighting to stay within their unions.

The NSNU joined the rally early and spent the day chanting in and for solidarity.



Janet speaking during Law Amendments

Wednesday, October 1

Wednesday marked the second reading of Bill No. 1, and a continuation of Law Amendments. There was a tremendous turn out of members from all four unions, and the Assembly listened throughout the day and into the evening as member after member sought changes to the bill.

Throughout Law Amendments, the voices of union members and supporters could be heard in the chambers as rallies continued outside.



Thursday, October 2

On Thursday NSNU, CUPE and Unifor planned a second official rally outside of the Legislature. Members attended from locals as far reaching as Cape Breton to march and stand on the side of the unions in support of the Bargaining Association.

Members gathered at the World Trade and Convention Centre, where union leaders spoke about the issue to the room overflowing with supporters. A few moments later, the group of more than 100 marched from Grand Parade to the Legislature, chanting once again, "So, So, So, Solidarity."

When they reached the legislature, they joined dozens of NSGEU protesters already there. The groups joined together to call on the Assembly for amendments to Bill No. 1.



Janet addresses the crowd during Thursday's rally



Friday, October 3

Friday marked the third and final reading, and vote on Bill No. 1. Throughout the amendments, Premier Stephen McNeil had only allowed for one alteration to the bill, unrelated to the unions' demands. The bill was passed with all but five votes in favour. The nay votes were all members of the NDP caucus.

The rally continued outside of the legislature throughout the reading of the vote, and late into the day.

Next Steps

The passing of Bill No. 1 begins the path to amalgamation for the District Health Authorities and the reduction in bargaining units. Unions are now in mediation with the employers, and if mediation is unsuccessful, arbitration will occur.

On October 9 it was announced that the unions had selected a mediator: James Dorsey, a British Columbia-based arbitrator who has worked previously on restructuring in Saskatchewan. The government and employers accepted this option and met with Mr. Dorsey on October 17 and 18.

The unions and employers now have 45 days to agree upon a path forward. The unions have agreed to continue fighting for a Bargaining Association. Additional dates to meet have been set with the mediator and the Unions.

At any time during the mediation process, any of the parties may decide to withdraw and force arbitration. If that happens, Dorsey will become the arbitrator and will decide how the parties move forward.

Bill No. 1 will go into effect on April 1, 2015. On this date the nine District Health Authorities will be merged into one, and the results of mediation or arbitration will be enacted.

The Nova Scotia Nurses' Union and other provincial health care unions continue to stand in solidarity behind a Bargaining Association model that is harmonious and collaborative - the only solution that will enable all members to stay within their unions.

Witnessing Patient Documents



Nurses have asked the NSNU whether an employer can require them to witness documents for a patient, apart from internal documents such as a consent to treatment. This could include financial or legal documents, such as a will, a personal directive, or a power of attorney. Nurses should keep in mind the following guidelines if asked to witness such a document.

1. Can an employer require a nurse to witness an external document?

Management cannot require a nurse to witness a patient's signature for external documents. Management has a general right to assign work to its employees, except where it would breach the collective agreement. The right is limited, however, to assigning work involved with your employer's business or operations. This right does not extend to directing a nurse to witness a document for external purposes that is not related to the patient's care.

If a nurse is asked by management to witness such a document, the nurse may object. If management insists, however, the nurse should generally adopt the "act now, grieve later" approach and comply with the directive, rather than face possible discipline. The matter should then be brought to the NSNU's attention.

2. What information does a nurse need when witnessing a patient document?

If a nurse is directed to witness a document for a patient, or if the nurse chooses to do so, the nurse should exercise caution. Witnessing a document means that you are signing your name to confirm that you saw the other person sign their name to the document. This means that if there is ever a dispute about that person's signature, you could be contacted by a third party to corroborate the signature or called to testify in court about witnessing the signature.

For this reason, it is important that if a nurse witnesses a document for a patient, the nurse only does so with management's direction or consent. If required to testify, the nurse may have to explain how they came to witness the signature, including their relationship to the patient. This would require disclosure that the person was a patient at a particular facility, which is confidential patient information. A nurse should advise management immediately if contacted by a third party or called to testify about witnessing a document.

It is also important that management is aware for purposes of paid leave. NSNU collective agreements typically provide paid leave when a nurse is subpoenaed to testify in court about an employment related matter. If a nurse witnesses a document for a patient without management's knowledge, an employer could take the position that if the nurse is called to testify, it is not employment related and the nurse is not entitled to paid leave.

A nurse should also ensure that he or she is complying with any employer policies or rules about witnessing documents.

In addition to ensuring management's direction or consent, the nurse should also chart all matters related to witnessing a patient document. This includes the type of document, who was present when it was signed, who else signed the document, what was done with the document after it was signed, and the patient's condition at the time of signing. A nurse should also verify the patient's identity if the nurse does not know the patient.

If a nurse refuses to witness a document for a patient, this should also be documented.

A nurse should never witness a document if the patient lacks capacity to sign the document or if there is any indication that the patient has been misled or pressured to sign the document. If the nurse feels uncomfortable about the circumstances for any reason, the nurse should not witness the document.



Nurse's Planner

The popular Nurse's Planner pocket calendars are on their way. The NSNU expects to receive the booklets the first week of November. There was a slight delay in shipping but staff will package and deliver them to our Locals as quickly as possible.

NSNU Welcomes Nurses to Halifax 2015



CFNU Biennial Convention: Where Nurses Shape the Future

By Maddison Wilson, MSVU Co-op student

The Nova Scotia Nurses' Union is very proud to be the host province of the 2015 Canadian Federation of Nurses Unions 17th Biennial Event. This will be an exciting five-day event focusing on nursing advocacy and education.

About the CFNU Biennial Event

Close to 1000 nursing delegates from across Canada and beyond will be coming to Halifax to attend the CFNU Biennial Convention from June 1-5, 2015. The 17th Biennial Event celebrates the 34th anniversary of the CFNU, Canada's largest nurses' organization representing more than 200,000 nurses and nursing students.

This international event will attract participation from Ireland, Australia, the U.S. and other countries. Canadian delegates include nurses who belong to member organizations of the CFNU, the national voice of nurse unions in Canada, including the NSNU.

The event will take place at the World Trade Convention Centre. Two full days of education and plenary discussions as well as two full business days will be offered to registrants. Keynote speakers will be announced in the New Year.

Event Registration

Registration opens on December 3rd, 2014. Members who are sponsored by the Nova Scotia Nurses' Union will register via MyNSNU. Non-sponsored members of the NSNU will register via CFNU's website. More details, information and links will be provided through our social media channels and website as the registration date approaches. Please refer to the CFNU Biennium – Participation Policies document in this edition of What's NU? for further information on sponsorship and registration.

Destination Halifax E-Portal

Our Communications' team at the NSNU facilitated a Maritime-themed photo shoot on the Dartmouth Waterfront. We were very lucky to have a few wonderful members volunteer to be our nurse models. It was a beautiful day and we captured some amazing shots. These photos will be used for our E-Portal which will soon be on Destination Halifax's website. Delegates will be able to visit this E-Portal and browse all that Halifax has to offer for dining, discounts, virtual maps, entertainment, accommodations and more during their stay. A link to the E-Portal will also be provided as the registration date approaches.

CFNU Biennium Event Volunteer Opportunities

We are currently in the process of organizing our volunteer working groups. We will have more specific details on volunteer tasks, dates, expenses and more in the next issue of our newsletter. Details on where and how to sign up to help with various tasks for this event will also be included in the upcoming Newsletter. Stay tuned!

Our team has been incredibly active in preparing for this event to ensure that it is the greatest celebration possible for all attendees. As we continue to finalize details we will provide updates as the event approaches. Be sure to keep up with our emails, Facebook and Twitter pages as well as our website to stay up to date on any event details.

CFNU Biennium - Participation Policies

Provincially Sponsored Attendees:

The NSNU Provincial Union will sponsor one member from each Local to attend the conference in Halifax. Each NSNU sponsored attendee must register for the conference through the NSNU office (MyNSNU.ca) and will be paid salary replacement to a maximum of 5 shifts or 37.5 hours of time off (40 hour maximum for those with pay scales based on 2080 hours). Shifts should be paid to you and recorded as "union time" by your Employer. NSNU will reimburse the Employer for the cost of these shifts. Salary replacement for days off will be paid directly to the member.

In addition to these hours members can claim ONE WAY travel time if they are travelling more than 100 kms to attend the conference. If they must give up a shift to travel to the meeting NSNU will reimburse the employer for one shift.

Registration fees and hotel rooms (if required) will be paid directly by the NSNU office for all sponsored members. Expense forms can be submitted for any meals, and full mileage (both ways) should be claimed at .40 cents per km. Other expenses (taxis, parking, etc.) will require receipts to be reimbursed.

Additional Attendees:

Members attending on their own or who are sponsored by their Local should register on line with CFNU, pay the registration fee themselves and then apply to their Local for reimbursement, if applicable. Hotel expenses, meals and mileage may also be reimbursed at the Local level if approved by the Local Executive. If Locals wish to compensate attendees for their time, the member should complete a salary



replacement form, have the Local Executive sign it and forward it to cindy.wagner@nsnu.ca. NSNU will pay the member, deduct the appropriate payroll taxes and bill the Local for the cost.

Volunteers:

Members wishing to volunteer their time will not receive any salary replacement but can claim meals and kilometer allowances on an expense report submitted to the provincial union office. Hotel rooms, if required, should be booked and paid by the member and can be claimed on an expense report if the cost falls within NSNU policy guidelines (travelling more than 100 km or required to stay past 10 pm). A maximum of \$170 will be reimbursed per night.

Hotel accommodations:

The NSNU Provincial office plans to book sponsored members into double occupancy rooms at the Delta Barrington. If other members require assistance in booking rooms please contact Clear House at the NSNU office. Rooms booked and paid for those members will be charged back to the individual or Local.

NBNU Celebrates 40 Years of Solidarity with Special Guests

The New Brunswick Nurses Union celebrated their 40th Annual General Meeting at the Delta Fredericton from October 20 –23, 2014. More than 225 registered nurses from across New

Brunswick gathered to discuss healthcare and workplace concerns.

Members also debated and voted on resolutions which will set the direction for NBNU in the coming year.

“This is our highest attendance to date,” said Marilyn Quinn, President of the NBNU. “

I think this was a monumental meeting – not only because we celebrated 40 years of solidarity but because we had key stakeholders in both healthcare and labour speaking to our frontline nurses.”

Hassan Yussuff, President of the Canadian Labour Congress addressed the assembly on October 21 and shared campaign



Linda Silas, CFNU president and NBNU president, Marilyn Quinn

updates and priorities for 2015. The CLC currently represents 3.3 million union members nationally. Linda Silas, President of The Canadian Federation of Nurses Unions (CFNU) spoke on October 22 providing an update on the Ebola crisis. In her discussion she reported on how registered nurses and unions across the country are heightening training efforts and safety preparedness.

Newly appointed NB Health Minister, Victor Boudreau brought greetings to the registered nurses. Delegates at the AGM also had the opportunity to hear Olympian Clara Hughes deliver a motivational speech. Clara touched on her personal experience as a gold medal winning athlete and an individual who struggled with mental illness.

Typically, Janet Hazelton would have been in attendance but she was out of the country presenting at a symposium on violence on long term care. Instead, Janet recorded a video message on behalf of the NSNU Board of Directors and our members congratulating the NBNU nurses on their 40th anniversary.



NBNU delegates, executive Staff and leaders at their recent AGM.

Nova Scotia Nurse Practitioners Allowed to Prescribe Monitored Drugs

Source: The Chronicle Herald

As of Saturday, November 1, Nurse Practitioners in Nova Scotia will be allowed to prescribe monitored drugs to patients. The new policy reflects similar legislation in other provinces, including New Brunswick and Newfoundland and Labrador.

Nurse Practitioners who wish to do so can register with the Nova Scotia Prescription Monitoring Program, which tracks the prescribing of monitored drugs, including controlled substances.



Parental/Adoption Leave and Your Benefits

Nurses are advised to check with their employer long in advance to taking maternity/parental leave to discuss benefit payments in order avoid lump sum deductions upon your return to work. Employer policies vary so please contact your benefits department to make arrangements for pre payments or payments while you are off on Leave. There are options for nurses and it is best to know what they are before going on your Leave.



Protection from the Flu

By Maddison Wilson, MSVU Co-op Student

The Nova Scotia Nurses' Union strongly believes in the importance of doing all we can to stay healthy, especially this time of year with the flu season upon us.

The NSNU advocates in favour of influenza immunization. As a profession that works closely with the most vulnerable in our community, it is vital to ensure that health care workers do everything they can to prevent the spread of illness to those in their care. While we understand and respect the choice to get immunized is a personal one, we believe the flu shot is optimal for minimizing the spread of influenza while masks, gloves and hand washing as minimize risk.

On October 8th NSNU President Janet Hazelton participated in a panel discussion on CBC Maritime Noon to discuss if flu shots should be mandatory for health care workers. She was joined by Dr. Robert Strang, Chief Public Health Officer for Nova Scotia and Dr. Scott Halperin, professor of pediatrics and microbiology and immunology at Dalhousie University, head of Infectious Diseases at the IWK Health Centre and Director of the Canadian Center for Vaccinology.

Some listeners to call-in show believe the flu shot should be mandatory for health care workers. However, Janet made it clear that the NSNU does not support that option. Janet reassured the listening audience that nurses are educated and responsible practitioners who always have the welfare of their patients at heart.

On October 21st, members of the NSNU team attended the Flu Immunization launch at the IWK. Several representatives from the Nova Scotia Department of Health and Wellness spoke on the importance of protecting yourself against illness this

flu season, and encouraging Nova Scotians to get immunized before Christmas while the vaccine is still in good supply, and before the height of flu season. At the event several people got



IWK nurse, Karen Green and Janet Hazelton, NSNU President.

the flu shot, including Janet Hazelton.

The flu shot is now easier to get than ever. Nova Scotians can get the shot free of charge by going to their family doctor, local pharmacy or any local clinic that will be available over the next several months. Most healthcare workers can get their shot at their place of employment.

For more information on the flu and where to get the free vaccine, visit www.gov.ns.ca/flu.

CFNU Position Statement on Mandatory Influenza Immunization of Nurses

Unethical and Unnecessary

The Canadian Federation of Nurses Unions does not support any program or policy that requires mandatory influenza immunization for nurses or any other health care worker. The CFNU and its member organizations do not believe that policies that place immunization as a condition of service or employment should be introduced. Further, we do not consider mandatory immunization policies in the workplace to be ethical.



The Canadian Federation of Nurses Unions represents close to 200,000 nurses and student nurses. Together with our member organizations and affiliates, we work to advance solutions to improve patient care, working conditions for nurses, and our public health care system. As key members of the health care team, we know and trust that nurses work very hard to practice within the scope of their Code of Ethics to provide safe and quality patient care, and respect the value of individual choice.

Nurses make decisions and take actions to ensure this many times over the course of a single shift. Mandatory immunization wrongly infers that nurses are not practicing with the best interests of their patients in mind. Of course patients need to be protected against all harm, but we at CFNU trust the highly educated professional nurses that we represent to make responsible, informed decisions for themselves and their patients with regards to infection control.



Janet Hazelton with Dr. Robert Strang, Dr. Scott Halperin and host Norma Lee MacLeod on CBC Maritime Noon.

While CFNU does strongly support increasing overall immunization rates in health care workers, we argue that this should be achieved by increasing awareness, education and access to immunization, not by mandating it. The role of the employer to support access and education is critical, particularly as the evidence regarding immunization efficiency remains up for debate. Further, employers in conjunction with joint occupational health committees, and direct care nurses should develop comprehensive influenza prevention and control strategies that include an evaluation component. Influenza immunization is one element of such strategies but other key components should include hand hygiene, personal protective equipment, adequate staffing and isolation policies.

Health care workers have spoken out on this issue and what they want is a culture of safety, not coercion. It is our view that policies requiring mandatory immunization for health care workers are not rooted in sound evidence and they are unethical.

Get Prescription Drugs off the street

Just one hydromorphone pill, Dilaudid - the potent analgesic drug. That's all it took to kill a grade nine honour student from Cole Harbor. Sadly, in 2014 there were seventeen other deaths in Nova Scotia due to prescription drug overdoses. There were 62 in 2012.

A recent survey on student drug use identified that prescription pain pills are the drug of choice among Grade 7 students who have experimented with drugs.

Tamara Ballard, a licensed practical nurse working in long term care, also lost a child to an accidental overdose of prescription medication. She first shared her story with the NSNU at our Annual General Meeting in May. At that time, Tamara bravely approached a microphone to appeal to her fellow NSNU members to join her fight for education on this serious problem.

On October 2, a new initiative was implemented to help our youth understand that prescription drugs are dangerous when not taken appropriately. The Get Prescription Drugs Off the Street Society (GPDOTS) news conference was attended by Health Minister Leo Glavine, who said children in Grade 7-9 will receive education and information about the risks of prescription drugs. This will now be included in core curriculum across the entire province for grades 7-9.

Nova Scotia is the first province to require doctors to do a drug profile on a patient who presents for emergency or urgent care before prescribing pain killers. Nova Scotia closely monitors doctors who prescribe a high ratio of painkillers, while the medical examiner's office is drafting guidelines for



Tamara Ballard, LPN



the collection of information in drug-related deaths.

In recognizing the admirable work being done by GPDOTS, the NSNU has made a donation to the campaign through Tamara. Too many lives and families have been destroyed because of this increasing problem.

For more information, or to get involved visit

www.gpdots.com.

Privacy and Confidentiality – More than an expectation, it's a Patient's Right

Cheryl Barker, RN – NSNU VP Central Region



Patient confidentiality is one of the most important pillars of medicine. Protecting the privacy of a patient is not just a matter of moral respect, it is essential in retaining the bond of trust between the healthcare provider and the patient. Without it, patients would hesitate to reveal information about themselves, their family or community for fear it could be disclosed and affect their reputations, lifestyle, employment or personal relationships.

It benefits a patient's ability to recover, heal and get proper treatment if they are able to disclose information about themselves without fear of repercussion. In order for patients to provide a frank account of their health and their history, they must feel secure in the environment in which they seek care.

Patients have a rightful expectation of privacy when it comes to their personal information, especially in a health care setting. We, as nurses have an obligation of confidentiality which prohibits us from disclosing information about our patients to others without their consent. This obligation demands that we take precautions to ensure that only authorized access occurs.

Appropriate care often requires that information about patients be discussed amongst members of the health care

team, all team members have authorized access to confidential records about the patients they care for and assume the duty of protecting that information from those individuals who do not.

In the Code of Ethics for registered nurses, one of the primary values is maintaining client's privacy and confidentiality. Licensed practical nurses also have an ethical and legal responsibility to maintain the privacy and confidentiality of patients and their families.

We must take every preventative measure to safeguard our patient's information obtained in the context of the nurse/patient relationship.

Though no nurse would deliberately want to jeopardize his or her license by violating this code or condition of employment, in crowded work spaces we sometimes lose sight of the fact that not all conversations are private.

The Canadian Nurses Association has guidelines on Nursing Values and Ethical Responsibilities, outlining ten key responsibilities of the nurse to protect privacy and confidentiality.

Ethical responsibilities:

1. Nurses respect the right of people to have control over the collection, use, access and disclosure of their personal information.
2. When nurses are conversing with persons receiving care, they take reasonable measures to prevent confidential information in the conversation from being overheard.
3. Nurses collect, use and disclose health information on a need-to-know basis with the highest degree of anonymity possible in the circumstances and in accordance with privacy laws.
4. When nurses are required to disclose information for a particular purpose, they disclose only the amount of information necessary for that purpose and inform

only those necessary. They attempt to do so in ways that minimize any potential harm to the individual, family or community.

5. When nurses engage in any form of communication, including verbal or electronic, involving a discussion of clinical cases, they ensure that their discussion of persons receiving care is respectful and does not identify those persons unless appropriate.
6. Nurses advocate for persons in their care to receive access to their own health-care records through a timely and affordable process when such access is requested.
7. Nurses respect policies that protect and preserve people's privacy, including security safeguards in information technology.
8. Nurses do not abuse their access to information by accessing health-care records, including their own, a family member's or any other person's, for purposes inconsistent with their professional obligations.
9. Nurses do not use photos or other technology to intrude into the privacy of a person receiving care.
10. Nurses intervene if others inappropriately access or disclose personal or health information of persons receiving care.

RECEPTIONISTS
ELEVATORS
LUNCHROOMS
SOCIAL MEDIA
GOSSIP
NURSING
STATIONS
DOCTORS
NURSES
WHISPERS
HALLWAYS

NSNU Attends Career Fair at the CNSA 2014 Atlantic Regional Conference

By Maddison Wilson, MSVU Co-op student



NSNU Board Member AnnMarie Murdock joins St. FX nursing students and CNSA Regional Conference event organizers Timothy Harnish and Meagan Cameron at the CNSA Career Fair.

The Canadian Nursing Students Association (CNSA) held their Regional Conference and career fair at St. Francis Xavier University (St. FX) on Saturday October 25th. Representatives from the NSNU attended to set up a table and talk to future nurses. We were very appreciative to have AnnMarie Murdock by our side as well, helping us answer students' questions. AnnMarie is a member of our union and continues to work part-time in maternity nursing at the Aberdeen. She is also a member of the NSNU Board of Directors and teaches maternity nursing part-time at St. FX. Her wealth of knowledge and understanding of the industry made her a valuable addition to the team.

Several tables were set up at this year's CNSA career fair, all of which showcased great information and opportunities for up-and-coming nursing students to explore. It was a fantastic opportunity to meet nursing students and talk to them about their futures working as nurses working in Nova Scotia.

The NSNU table had a great turnout. Students ranged from first to fourth year, representing the University of Prince Edward Island, University of Cape Breton, Dalhousie University, St. FX and more. We were pleased to have so many students approach us and ask great questions about the union and their options after graduation. It was very refreshing to see students so eager to learn about our Union. Students' seemed to gain a much better understanding of what unions do for their members, and they were pleased to learn about our efforts ensure they have a great quality work life as a nurse.

We were very excited to hear that a variety of students are interested in remaining in, or coming to Nova Scotia after graduation to pursue their nursing career, and to be an active member of the NSNU. We look forward to welcoming some of these very determined and intelligent nursing students to our union in the near future.

No Fall Component Meetings

No fall component meetings have been scheduled for this year. However, the Council of Presidents went forward on October 9th, gathering together all local presidents or their representatives.

No dates have been set for the next meetings of the sectors.

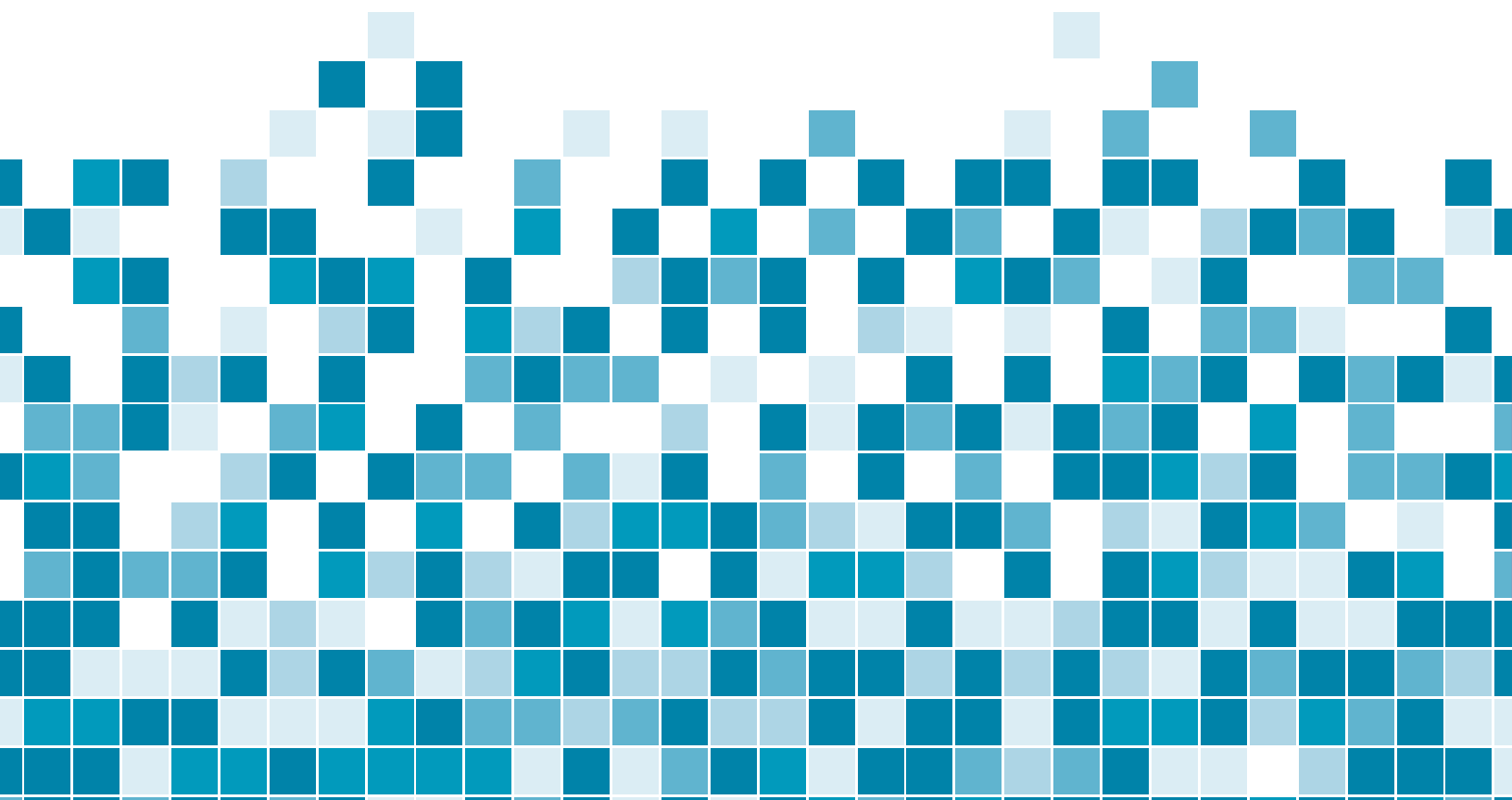
Once the mediation process to determine the structure of the bargaining units in Nova Scotia has been determined, the NSNU will look at comprehensive plan for meeting options.

In the next issue of What's Nu?

*An update on the mediation to amalgamate the DHAs, streamline bargaining

*NSNU presents on the issue of Violence in Long Term Care at an International Conference in Miami

*Clinical Capacity Report – Success Stories from across the province





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"Coming together is a beginning; keeping together is progress; working together is success"
- Henry Ford



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