

President's message

The theme of this year's CNA Biennium was *diversity*, with one of the focuses being that of achieving a quality professional practice environment or, in simpler terms, a healthy work environment for one and all. Needless to say, such an environment will not appear on its own. It will take work, effort, and commitment by all to bring it to fruition.

As emergency nurses, we are all too aware of the stresses in emergency departments across the country – overcrowding, gridlock, ambulance diversions and the nursing shortage, just to name a few. Some days, it is so very overwhelming, and just too much to cope with. The atmosphere is one of negativity, with burn-out, exhaustion, and illness being the end results.

Emergency nurses can make a difference to our own work environment. The question is, though, how important is a healthy work environment to emergency nurses in Canada, and are we willing to take up the challenge?


Emergency nurses pride ourselves in being diverse. We are often the entry point for many to the health care system, the foundation of our institutions. If this is the case, then we **must** take up the challenge ahead of us. We cannot expect others to solve our problems if we do not accept responsibility, initiate change, and focus on the quality of our own work environment. We need to start from within and make the necessary changes that we can.

We need to focus on the problem one aspect at a time. It is really rather simple, as straightforward as the ABCs that we deal with each time we assess a patient. Here, however, our ABCs are **Attitude, Belief and Commitment**.

Attitude requires a positive outlook. Dwelling on the negative is so very draining. It wears and tears on us and, if allowed to, will spread and fester in a moment's notice. We must build on the positive, give a pat on the back for work well done by our peers and ourselves. It is surprising that positive recognition can be so very rewarding.

Belief is in knowing and believing that we can make a difference by changing our attitudes. Give it a try, focus on the positives and I am sure you, too, will see and experience a change for the better in your surroundings.

Commitment is ensuring that we come to work with a healthy, positive attitude. Make the commitment to yourself then, as an entire department, make the commitment to each other.

Emergency nurses are a dynamic group! Let's build on our strengths and together we can begin to make necessary changes to our own health and environment. Focus on one aspect at a time. When we succeed with this step, we will be ready to take the next step to ensure a quality professional practice environment and, at the same time, meet the numerous challenges we do every shift that we work. 

Anne Cessford
RN, BA, BScN, ENC(C)

Certification report

Statistics

Number of nurses who have written the emergency certification examination (% difference between years)

1994	301	
1995	233	(-23%)
1996	249	(+7%)
1997	273	(+10%)
1998	165	(-40%)
1999	162	(-2%)
2000	116	(-28%)
2001	192	(+65%)
2002	171*	

(* applied to write)

Total 1,691

Total ENC(C)

The total currently certified ENC(C) nurses is 1,193 as of 2001.

	Due to recertify	Recertified	Renewal rate
1999	244	159	65%
2000	217	112	52%
2001	237	106	55%
2002	240	103 (number applied to recertify)	

Examination information

Next year's examination date is April 5, 2003.

Preparation guide

The **Preparation Guide** is now available and included in the cost of registering for the examination. The guide is also available through CNA publications department at sales@can-nurses.ca or 1-800-385-5881. The cost is \$34.95 (CNA member) or \$43.75 (non-member).

Committee structure

The committee is composed of emergency nurses from the following areas and with the following backgrounds:


Administration: Louanne Kinsella, NF
Helen Grimm, SK

Education: Meg McDonagh, AB
Catherine McDonald, BC

Clinical: Darlene Cogswell, NB
Audrey Dabreo, QC
Margaret Pook, ON

A committee meeting was not held in Ottawa this year, however, questions were reviewed and submitted to Suzanne Maize.

Summary

It has been an honour to work on this committee on behalf of NENA. 

Marg Pook, RN, ENC(C)

Were you aware?


- That Health Canada, following reports of suffocation and strangulation of young children from entanglement in IV tubing or monitor leads while they were patients in hospital, has issued the following recommendations:

1. All hospitalized children could possibly become entangled in a monitor lead or tubing and should be continuously observed by an adult or placed on a monitor.

2. Consider treating hospitalized children with oral therapy or a heparin-locked needle if possible.

3. Coil excess tubing when the child is unattended to prevent the infant/child from becoming entangled.

4. Inform hospital staff, parents and other caregivers that young children are at risk of entanglement and strangulation by IV tubing, electronic leads, or cords of any sort. Health Canada asks that the recommendations be posted in a prominent spot for staff and that they be implemented in the interest of patient safety (<http://www.hc-sc.ca>).

- That a recent study done in Sarasota, Florida revealed that fabric stethoscope covers represent a potential infection control problem because they are used for long periods of time, are infrequently laundered, and are contaminated with pathogenic bacteria known to cause nosocomial infection (Milam, M.W. et al., 2001. Bacterial contamination of fabric stethoscope covers: the velveteen rabbit of health care? **Infection Control and Hospital Epidemiology**, 22, 653-655.). 

Celebrate Emergency Nurses Week, October 6-12, 2002, and Emergency Nurses Day Wednesday, October 9, 2002

“Caring, Healing, Educating... one life at a time”

The 2002 annual report submitted to the CNA - National Emergency Nurses' Affiliation Inc. (NENA)

Historical Perspective

The National Emergency Nurses' Affiliation Inc. was formed in 1981.

General structure

There are nine active provincial groups along with independent members from Quebec.

The NENA board of directors meets twice a year, in the spring and fall. The spring board of directors meeting is held in conjunction with the AGM and an educational conference. Odd years are in conjunction with the national conference and even years with a regional conference.

Objectives

The mission of NENA is: “To represent the Canadian emergency nursing specialty”.

The values of NENA are:

- All individuals have the right to quality health care
- Essential components of emergency nursing practice are wellness promotion and injury prevention
- Continuing education and professional development are fundamental to emergency practice
- Research guides emergency nursing practice.

The goals of NENA are:

- Strengthen the communication network
- Provide direction for clinical practice of emergency nurses
- Promote research-based practice
- Support and disseminate education.

Membership

As of February 13, 2002, there are 1,282 members of NENA.

Present special projects and activities (publications, research, conferences, certification, etc.)

NENA and Canadian Association of Emergency Physicians (CAEP) boards of

directors met in November 2001 to discuss common issues and prioritize the issues identified. Priorities for action were identified under three categories:

Improved communications

- web page links
- sharing of board minutes

Present projects to continue

- Canadian Triage Acuity Scale (CTAS)
- emphasis on the pediatric component
- Canadian Emergency Department Information System (CEDIS)

New projects

- pediatric CTAS education project
- violence in the workplace
- re-look at the overcrowding position statement


The policy and procedures have been reviewed and revised along with the position statements. There has been the addition of three new position statements, which are:

- Use of non-registered nurses as health care providers in the emergency department
- Family presence during resuscitation and invasive procedures
- Procedural sedation in adults and children in emergency departments.

The core competencies for emergency nursing have been developed and published and will soon be distributed to all NENA members.

In May 2002, the NENA AGM was held in conjunction with a regional conference in Moncton, New Brunswick. The theme of the conference was “Caring for Others, Caring for Ourselves”.

Issues of concern

- New untrained RN staff;
- Vacancies;
- Retention;
- Nurse:patient ratios;
- Non-RNs in the emergency department, skill mix;
- Overcrowding;
- Emergency department vs. systems problems;
- Potential violence/security risks 

Date: April 1, 2002

National trauma committee report

Well, it's hard to believe fall is upon us and, for some of you it means busy work and course planning, whereas for others it means structure and process. Whichever emergency nurse you happen to be, the national trauma committee wishes you all a safe and happy fall!

The Trauma Nursing Core Course (TNCC) is well on target for this year with 1,700 nurses signed up to date. We expect to exceed, or at least match, last year's numbers of 1,845 participants. The Emergency Nursing Pediatric Course (ENPC) is also on target with 522 nurses registered to date, almost meeting last year's number of 645. The Course in Advanced Trauma Nursing (CATN) is slightly down with no upcoming courses scheduled to date.

Thank you to the instructors who believe in offering educational opportunities to all emergency nurses.


A reminder to all instructor trainers from central and eastern Canada that the national trauma committee is accepting applications up until October 15 for four vacant positions that currently exist, two positions from the east (NFLD, NS, NB, PEI) and two positions from central (Ontario, Quebec). The appointments would be made at the November meeting of the NENA board and the first meeting of the committee would be late November or early December. It is important that instructor trainers know of the commitment needed to assume these positions on behalf of your provinces, however, the reward of networking within this committee is tremendous. Please consider submitting your names! All submissions should be directed to the NTC chair. Address and e-mail address are below.

The NTC has developed a process to manage complaints regarding courses and we welcome feedback from all emergency nurses who have taken one of the trauma courses and who have positive suggestions re improvement, or who have a concern over quality of teaching.

New administrative manuals will be sent to all instructors by the end of September. If you do not receive your

copy, please contact the NTC committee member for your area, or the current chair. To this end, we request all instructors of any NENA program to resubmit their full mailing address, e-mail if available and home number either by e-mail or letter to the NTC Chair, 20 Power Street, Grand Falls-Windsor, NF A2A 2T6, or e-mail: pwalsh@cwhc.nf.ca

This will help update the database and make communications more effective.


Contract negotiations have also begun with the US for the trauma programs for 2003 so feedback from any emergency nurse, but particularly instructors, would be extremely helpful in ensuring we negotiate on your behalf. 

**Pat Walsh, Chair,
National Trauma Committee,
NENA**


NENA 2000-2001 year-end financial report

INCOME	Actual	Budget	Variance
Fundraising	\$814.00	\$100.00	\$714.00
Advertising	\$113.06	\$100.00	\$13.06
Grants	\$1,000.00	\$2,400.00	(\$1,400.00)
Sponsors	\$2,000.00	\$0.00	\$2,000.00
Indirect Fees: ENPC	\$12,250.00	\$8,520.00	\$3,730.00
Indirect Fees: TNCC	\$48,889.41	\$17,880.00	\$31,009.41
Indirect Fees: CATN	\$3,000.00	\$1,200.00	\$1,800.00
Interest Income	\$3.57	\$0.00	\$3.57
Investment Income	\$470.45	\$0.00	\$470.45
Member Fees	\$21,160.00	\$23,140.00	(\$1,980.00)
Misc. Income	\$21,678.48	\$0.00	\$21,678.48
TOTAL INCOME :	\$111,378.97	\$53,340.00	\$58,038.97

EXPENSES:	Actual	Budget	Variance
Awards		\$0.00	\$0.00
Advertising	\$1,198.41	\$0.00	(\$1,198.41)
Bank Charges	\$241.83	\$100.00	(\$141.83)
Board Meetings	\$22,393.31	\$17,700.00	(\$4,693.31)
Bursaries	\$2,750.00	\$3,500.00	\$750.00
CNA Fees	\$200.00	\$214.00	\$14.00
Committee Meetings	\$9,438.41	\$5,500.00	(\$3,938.41)
Gifts	\$242.60	\$100.00	(\$142.60)
Interest Paid	\$0.00	\$0.00	\$0.00
Legal	\$391.84	\$100.00	(\$291.84)
Liaison Meetings	\$1,672.06	\$0.00	(\$1,672.06)
Office Expense	\$11,798.09	\$5,450.00	(\$6,348.09)
Programs		\$12,052.00	\$12,052.00
Promotions	\$1,481.30	\$3,075.00	\$1,593.70
Public Relations	\$7,777.92	\$3,600.00	(\$4,177.92)
Reimbursements: ENPC	\$4,370.00	\$3,000.00	(\$1,370.00)
Reimbursements: TNCC	\$16,749.41	\$5,960.00	(\$10,789.41)
Reimbursements: CATN	\$750.00	\$400.00	(\$350.00)
Misc			\$0.00
TOTAL EXPENSES:	\$81,455.18	\$60,751.00	(\$20,704.18)
INCOME/LOSS POSITION:		\$29,923.79	

Revised Position Statements, Standards and new Core Competencies are available for purchase by non-NENA members for \$20.00 per document. For orders of 20 copies or more, 15% will be reduced from the total cost. Just make sure that you note this when you place your order. Send orders to Jerry Bell, 10 Laval Drive, Regina, SK S4V 0H1 

Did you know?

- That work has started on developing a national orientation and preceptor program
- That position statements on ambulance diversions and the responsibility of patients on stretchers waiting placement in the ED are currently being drafted
- That core competencies are complete and are being sent out to all members
- That NENA standards, core competencies and position statements with an accompanying letter have been sent to federal and provincial health ministers, CNA, CAUSN, ACEN, Federal Chief Nursing Officer and all provincial regulatory bodies
- That the Peds CTAS educational program has been developed and will roll out this fall 

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NENA biography




Anne Cessford, RN, BA, BScN, ENC(C)

Anne Cessford is a registered nurse with a BA in psychology and a BScN from the University of Windsor, Ontario (1979). She has been involved in the specialty of emergency nursing since 1988 and has held numerous positions in emergency nursing as a staff nurse, clinical educator, triage nurse, manager, and patient service coordinator. Anne is presently a clinical resource nurse in the emergency department of Surrey Memorial Hospital in Surrey, BC where she also works as a sexual assault nurse examiner.

From 1997 to 2000, Anne was president of the Emergency Nurses

Group of BC (ENGBC) and chair of the Canadian Nurses Association National Emergency Nursing Certification Examination Committee. She has been president of the National Emergency Nurses' Affiliation, Inc. since July 2000.

In her role as president of NENA, Anne's main goal has been to support and promote the specialty and profession of emergency nursing with the focus on communicating with the membership and our partners in health care.

As involved as Anne may be with NENA, her number one priority and passion in life is her husband, Jamie, and their three fantastic, teenage children. 

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Letters to the editor

*This will be a new feature for **Outlook**. I would encourage all of you to send in your letters, questions, tips, ideas. Many of our issues and the problems that we face daily are the same, whether you work in Victoria, BC or Grand Falls, NFLD.*

The sharing of information is powerful. Trying to develop a new policy, looking for a new form? Request it here. This is your journal. It is a vehicle for communication for all of us. Use it.


Please send your letters, etc., to: Valerie Eden, 34 Bow Street, Dartmouth, NS B2Y 4P6, or e-mail at: valeden@hfx.eastlink.ca

Further to your article in the Spring 2002 copy of **Outlook**, I would like to send a bouquet to my daughter, Allyson Shephard. She has accomplished much in her short career. Graduating from Ottawa University in 1996, she began working at the emergency department at Childrens' Hospital of Eastern Ontario (CHEO). Following two years of working in emergency, she was instrumental in developing and implementing the new trauma program in CHEO, which she now manages.

Allyson is a member of ENAO and has made a number of presentations at ENAO conferences. She is an instructor

for TNCC and provides lectures in the emergency program at Algonquin College. At present, she is completing her Masters degree in nursing.

Allyson has been an inspiration to me. She encouraged me to accept a team leader position that I am finding very challenging after working 24 years in emergency at the Queensway-Carleton Hospital.

Allyson is a great asset to nursing and she will continue to advance the very best of what it means to be a professional nurse. 

Wendy Shephard

The Ontario report: FYI across the country

The Registered Nurses Association of Ontario predicts that by 2011, Ontario will need to recruit 60,000 to 90,000 nurses. With current trends continuing, Ontario can only expect 40,000 to 50,000.

The College of Nurses of Ontario statistics indicate the following:

57.5% RNs work in hospitals

13.4% RNs work in the community

12.6% RNs work in long-term care

16.1% work in assorted other fields.

The average age of an Ontario RN is 44 in spring 2002.

51.6% RNs work full-time.

36.2% RNs work part-time.

11.7% work casual.

There are currently 106,305 RNs licensed to practice in Ontario, only 82,788 of them are working in nursing.

The Ontario Hospital Association President, David MacKinnon, was quoted as saying, "Fewer Ontario nurses are handling sicker patients who need longer hospital stays, in fewer acute care beds!"

A recent study done by **The Toronto Star** produced no surprises. "Weekends can be Hell in the ER", was the headline. Public holidays continue to top the list for high-volume days. The seven-year, province-wide study concludes what ER nurses have always known; demand peaks on weekends and holidays when doctors' offices are closed. The year's busiest week is always between Christmas and New Year. The study also went on to say: "The emergency department is the barometer of how the whole health-care system is functioning. If things aren't working well elsewhere, the pressure is felt in the ER." No news to emergency nurses!

Tidbits, trivia, & truisms

- I have learned that sometimes what my patient needs most is a hand to hold and a heart to care.
- The Fugu fish, also known as the Blowfish or Puffer fish, is a delicacy in Japan. A pinch of tetrodotoxin (fugu fish poison) is 1,250 times more deadly than

cyanide and is enough to kill 30 people. Chefs must take intensive courses and pass exams to be licensed to prepare Fugu dishes.

- You don't stop laughing because you grow old, you grow old because you stop laughing.
- Confidence never comes from having all the answers, it comes from being open to all the questions.
- Sterilize: what you do to your first baby's pacifier by boiling it and to your last baby's pacifier by blowing on it.
- If four out of five people suffer from diarrhea, does the other one enjoy it?
- Whatever happened to Preparations A through G?
- If we say something is "out of whack", what's a whack?
- If it's true that emergency nurses are here to help others, then what exactly are the others here for?

Remember...


Emergency nurses are always there for others, providing the best of care.

You reassure and comfort with the many nursing skills you share.

You make a major difference in everything you do.

All of us are thankful for that special person, "You".

From an emergency patient.


- Caring is such a large part of being an emergency nurse. In order to keep on doing what you do for others, never forget to care for yourself !!! 

Submitted by Janice L. Spivey, RN, ENCC, CEN, ENAO President

Confessions from the Communication Officer - the NENA website

As you are aware, NENA has a website that, for several months recently, has been inactive and then disappeared altogether due to a combination of unfortunate factors. Just prior to my appointment to the role of communication officer, the board of directors had approved a recommendation to have the website redesigned in an effort to make it more visually pleasing and user-friendly. The person who had been asked to redesign the website had agreed to do the work. In the meantime, the company that held the domain name for the website had sent out a renewal notice by e-mail. However, no one received this renewal notice and the website disappeared. The IT people at the Ottawa Hospital were unsure of what had happened to the site and so, after several weeks of e-mails and phone calls, the confusion over the site was sorted out.

The domain name has been reinstated. Unfortunately, the person who had agreed to redesign the website was unable to do the job in the end and we have had to find another company to do the redesign. We have found a company that is willing to take on the job. At the time of writing, the company is doing a mock-up of a new web page.

I wanted to update you and I also wanted to apologize for any inconvenience that the disappearance of the website has caused for any members. 

**Valerie Eden
Communication Officer**

New Brunswick report - the 2002 regional conference

The regional conference of 2002 was held in Moncton, NB, hosted by the New Brunswick Emergency Nurses Association. The title was "Caring for Others, Caring for Ourselves." Emergency nurses most often are the first contact people have with the health care system. It is often a critical event for them, whether perceived or actual. We must be prepared to meet their needs, both physical and emotional, and to

support the family and loved ones. Today's environment of staffing shortages, overcrowding and general lack of resources has compounded the stress on the ER nurse. In order to care for others, we must take care of ourselves. Our goal was to acknowledge some of the issues and offer some strategies that might help in the workplace.

The conference opened with a smash hit, "Survive!!!ER", presented by Sheila Early and Ruth Ringland. It was a sometimes comic and other times thought-provoking look at situations common to ER departments and coping strategies that might be used. Other topics were: "Critical Incident Stress Debriefing" by Rev. R. Maund, "Pediatric CTAS" by Carla Policicchio, "Telecare and Emergency Services, Partners in Quality Care" by Lois Scott, "ATV Trauma" by Heather Oakley, "Adolescent Behavioral Disorders" by Dr. S. Sadiq, "Sexual Assault Nurse Examiners" by Janet Calnan and Sheila Early, and "Staff/Manager Relations" by Carla Policicchio. These topics on Friday were followed by the NENA Annual General Meeting. It was a full and rewarding day.

Saturday began with a presentation by Joan Lutes, "Multidisciplinary Roles in the ER", a look at the changes the nursing profession has seen over the years and now, and the inclusion of other health care providers such as pharmacists, discharge planning, psychiatric nurses, and volunteers. Other presentations were: "Non-urgent patients: Why do they seek ER care?" by L. Scott, "Family Presence During Resuscitation" by Dr. M. Allen, and "Legal Issues in ER" by Joan Allain, all

NENA's "Win a trip to the national conference" contest rules

NENA Inc. will biannually sponsor a NENA member's attendance at the national conference/AGM, for an article published in **Outlook**. The winner will be chosen by lottery.

1. Contest will be advertised in **Outlook**
2. Provincial representatives are encouraged to publish the contest among their membership.
3. Articles must be submitted directly from the author. Provincial newsletters forwarded to the communication officer for selection of items to include in **Outlook** will not be considered in the lottery. Please refer to the submission guidelines included with this issue.
4. Primary author's name will be entered into the draw (in the event of multiple authors).
5. Names will be entered into the draw beginning with the winter 2001 edition of **Outlook** and ending with the winter edition of 2003.
6. The communication officer will maintain a record of names entered into the lottery.
7. The NENA president will randomly draw the name of the winner.
8. The NENA president (or delegate) will notify the winner and will communicate with the winner to ensure conference registration, hotel booking at the convention rate, and travel arrangements are made at the most economical rate to the maximum value of \$2,000.00.
9. The draw will occur in January prior to the national NENA conference to allow the winner to arrange their time off to attend. In addition, this allows time to obtain the best fares and booking of a hotel room at conference rates.
10. The winner of the lottery will have three weeks in which to accept their prize. In the event the winner is unable to claim their prize, a second name will be drawn. The prize is non-transferable.
11. The winner will make his or her own travel arrangements.
12. The winner's name will be published in **Outlook**.
13. The winner must be a NENA member at the time of submission.
14. NENA board of directors and **Outlook** section editors are exempt.
15. Articles are published at the discretion of the communication officer
16. NENA board of directors has approved the contest rules.

The next National Emergency Nurses Conference is in Saskatchewan in 2003.



followed by another superb session, "Stress" by Mrs. A. Lepage, a family therapist who kept her audience captivated with her humorous reflections on human behaviour.


Thank you to all those who attended and made our conference the success it was. One of the comments on an evaluation form said it very well, "Excellent conference, great opportunity to network with excellent, motivated, dedicated emergency nurses!!"

Thank you to all the presenters. We appreciate the time and the effort you gave. Comments, again received with the evaluations, say it well, "Excellent speakers! Great topics! Great reminders!" and, "Excellent. All the speakers were incredible. I have not been to a conference where every session was led by dynamic speakers. All very informative."

We would also like to thank the conference's major sponsor, Hoffman-La Roche, as well as other corporate sponsors whose support and recognition are so important.

As president of the New Brunswick Emergency Nurses Association and chairperson of the planning committee, I wish to thank those who put so much thought and effort into the planning of this conference. There were many hours devoted to the preparation of this event and your dedication is very much appreciated! Thank you to Nancy Ashley, Alison Bulmer, Patti Davis, Nancy Douthwaite, Carol Frizzell, Karen Gallup, Nadine LeClair, and Jeannine Michaud.

One comment was especially appreciated by the conference planning committee and might encourage anyone who is contemplating a conference in the near future, "This was my first NBENA conference. I wish to compliment the

committee on their hard work. You've done an excellent job. The conference was interesting and informative. The opportunity to choose topics of personal interest showed insight into your diversified membership...." 



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Bouquets

- * **Eileen Denomy**, for her appointment to the Certification Advisory Committee
- * **Lucy Rebello**, for being a strong patient advocate
- * **Retiring NENA Board Directors**, for their work, their time and their energy
- * **Marg Pook**, for her work on the Certification Committee
- * **The Planning Committee of the NB Emergency Nurses Conference**
- * **Members of Saint John Chapter NBENA** - Sue Benjamin, Haidee Goldie, Lynn Thom and Nicki Hamburg for achieving certification in emergency nursing

"Bouquets" is dedicated to celebrating the achievements of NENA members. If you would like to send a bouquet to a NENA member, contact the communication officer, Valerie Eden, 34 Bow Street, Dartmouth, NS B2Y 4P6 (H) 902 461-1897; (W) 902 465-8340; fax: 902 465-8435; e-mail: valeden@hfx.eastlink.ca.