

President's message



Stepping into the president's shoes is a bit daunting, especially when trying to fill the ones left by our Past-President Landon James.

The NENA Board of Directors worked hard on your behalf under Landon's leadership and my plan is to see that NENA continues that work and moves forward.

As I start my term as president of NENA, I have been in contact with other groups and organizations and continue to dialogue with colleagues such as Canadian Nurses Association (CNA), Canadian Association Emergency Physicians (CAEP) and Emergency Nurses Association (ENA).

Over the summer, I have also been talking to nurses and managers across Canada and I have asked them, "What do you see as the major problems facing emergency departments today?"

It is no surprise that overcrowding, boarding and staffing issues remain at the top of the list. However, many of them are now using words such as *burnout* and *frustration*, and a growing lateral violence and bullying among staff. This is a frightening situation, as I also heard the same while attending the ENA General Assembly and Conference in Tampa, Florida, in September.

It is common knowledge that the emergency nurse continues to work in a situation where the emergency department has become the "front door" of the health

care system and the emergency staff are forced to be the gatekeepers. As the stress and frustration build, so does the resentment, as viable solutions do not appear to be in the near future.

Emergency nurses have always been leaders and I challenge you to develop some suggestions or ideas on how we, as emergency nurses, can take back our departments and make them positive, healthier places to work, regardless of the overcrowding and staffing issues.

As Henry Ford said, "Coming together is a beginning; keeping together is progress; working together is success". I believe nurses have the ability to do this and look forward to hearing from you. ☐

Sharron Lyons
NENA President

Communication Officer's message



While in line for a morning dose of caffeine, I witnessed a most amusing, yet sobering, event. An elderly couple were seated in wheelchairs and headed together to

the counter at the coffee/donuts shop in the lobby of our hospital. They somehow managed to get their wheels tangled and began struggling to separate. It was a visual cacophony of ineffective activity. At one point, one was trying to move forward and the other was struggling to move backwards. As they had two wheels locked, the effect was that the pair of them, as a unit, turned in a circle. Sharp words followed. Dollops of saliva spewed through toothless gums. There

was some slapping of each other's hands and each one was hastily trying to gain traction with the hand wheels of their chairs. Eventually they sorted it out and ordered... separately.

It was one of those epiphanic moments when you know in a flash that you have seen the future of your marriage and your life. That was depressing.

Leaving that scene and going to the emergency department, I saw young nurses gently and compassionately caring for a confused and panicky senior in a hall bed (yes, we have hall beds in Saskatchewan, too) who was asking for the tenth time to talk to "the manager of this hotel." Another nurse was hastening to join a sea of green scrubs responding to a code in

room one. A nursing student was listening attentively to a seasoned nurse explain a medication protocol in the med room. Despite the chaotic atmosphere and constant pressure to catch up, there were quick smiles, light-hearted remarks, and staff rushing to help each other.

It was another unexpected instant in which I felt that I had seen the future: emergency nurses caring for increasing numbers of patients with increasing acuity; nurses sharing knowledge; and nurses supporting each other.

And I knew in that moment that there is reason for optimism about the future of emergency nursing—not because of favourable changes in working conditions, not because of a different *manager of the hotel*, and not because of some new approach to resource management, but because of the character and resilience of the type of persons who choose to be emergency nurses.

Please join me in visiting with others who have chosen to be emergency nurses through the articles of Outlook. The pages of this journal are our forum for sharing who we are and what we do. ☐

Stephanie Carlson
Communication Officer

Calling all instructors

If your students have put the work into a presentation, a case study, a disease process, research, etc., encourage them to write it up into a brief article to be published in Outlook. Our section editors will work closely with them to help in the process, and they can see their hard work in print, help to educate emergency nurses across the country and add a publication to their resume—a win/win situation!

Articles can be submitted to the Communication Officer,
Stephanie Carlson, communicationofficer@nena.ca

Treasurer's report



Another year has come and gone and there have been some wonderful developments within NENA, one being a very successful NENA conference held in Regina, as well as the hopeful joining of Quebec to our national body, and the beginning of some concentrated efforts towards our national conferences in the next few years.

NENA's finances have not had many changes in the past two years, but have remained stable and allowed the national body the ability to invest in conferences that will produce revenue and has allowed NENA to become more actively involved in the emergency activities that affect all of us at the front line.


Our last conference held in Regina was a great success and had an overall income

of \$27,000, which was shared between the provincial host and the national body.

Looking to the future suggests that the addition of Quebec to our national body will bring in added revenue. Quebec is a province that has a large population and a very active nursing community. The introduction of TNCC and ENPC to the province will be an added attraction for joining NENA and will really unite our country from coast to coast.

Our last area that has taken on both financial and time priorities has been our website. We realize that in order to bring information to our membership in a timely way, we needed to invest in our website and have made this a priority. We hope that our new look and functionality will bring an added capacity to serve our members well.

All in all from a financial perspective, NENA's funds in have matched NENA's funds out, and this is in keeping with our non-profit status and commitment to use our finances to serve the emergency nursing community.

This will be my final report for NENA, as I step down after our fall board of directors' meeting. My time with NENA has been wonderful—not only have I learned about the business of NENA, but also I have met some wonderfully dedicated emergency nurses who continually strive to represent emergency nurses across the country. Truly an inspiring group of people that I will never forget and a time of learning that I will cherish and reference in my ongoing career. Thank you, NENA board for all you do. 

Sincerely,
Lori Quinn
NENA Treasurer

outlook

NENA at work

Experience in the Hands-On Procedural Cadaver Lab


During the Emergency Nurses Association Annual Conference held in Tampa, Fla., in September of 2011, I was fortunate enough to secure a place at the Vidacare Hands-on Procedural Cadaver Lab. Two of these popular sessions of approximately three hours each were provided by this strategic sponsor of the conference and filled up long before the start.

Led by esteemed employees of Vidacare, 14 generous individuals and families donated their bodies to medical science through the state board organization. Apparently this cadaver lab was the

largest in attendance for Vidacare with 14 cadavers and approximately 250 participants! It was hardly distracting being in the lab with that many people, as our group of eight was mesmerized by the demonstrations and tactile interface of nearly no-risk procedures not limited to intraosseous access.

Our "emergency" interventions and procedures made so much more sense being able to see it from the outside and the inside. There was no comparison to studying anatomy of organs in jars or slides of cells. Pulling at the pericardial sac to feel

how tough it is, seeing a humeral intraosseous infusion come through the subclavian vein and dissecting down to distorted asymmetric femoral anatomy were just a few of the things to note. In my 11 years of nursing, I have not attended such an informative educational session.

One would think there would be a terrible industry bias since Vidacare is the manufacturer for the EZ-IO device, but this was hardly the case. Many emergency departments have these devices already and some seem to be struggling with nursing scope of practice to be able to perform this procedure. Vidacare even has position statements by various organizations supporting nurse-initiated intraosseous access. I have never felt so supported in my practice and continuing education by a business. We should be so lucky one day if, perhaps, Vidacare would be fortunate to enrich our conferences with a cadaver lab. 

Brian Lee
SbStJ, RN, ENC(C), CFRN



Participants at the Hands-On Procedural Cadaver Lab during the Emergency Nurses Association Annual Conference.



National Course Administration Committee (NCAC) Updates

ENPC 4th edition updates

All ENPC course directors should have received an email from ENA regarding the roll-out of the 4th edition ENPC course planned for fall 2012. ENPC course directors can continue to plan ENPC 3rd edition courses until at least fall 2012.

TNCC/ENPC course approvals

A general reminder to all ENPC/TNCC course directors that your courses cannot be approved unless you are current NENA members as of July 1, 2011. Course directors must ensure all instructors in your courses are also NENA members.

TNCC/ENPC courses

All courses must have a special reduced fee for NENA members and a higher non-member price.

CATN-11 courses

This course will be deleted as of December 31, 2011. ENA is working on a new revised program called "Advanced Clinical Education for Emergency Nurses."

Update on French translation of ENPC and TNCC course materials

ENPC 3rd edition course materials have been translated into French. The 6th edition TNCC course slides and exams are also available. Work continues on the 6th edition TNCC manual in a French version. If course directors require translated materials, they can email the NCAC chair at chairncac@nena.ca.

NCAC projects

The NCAC committee is working on a course approval process for TNCC/ENPC course applications through the NENA website and CTAS course approvals.

Chair: Margaret Dymond
margaret.dymond@albertahealthservices.ca

Western Rep: Monique McLaughlin—BC, AB, SK, MB, NWT
monique.mclaughlin@vch.ca

Central Rep: Brenda Lambert—ON
blambert@stegh.on.ca

Debra Bastone—ON
dbastone@lwdh.on.ca



The NCAC Committee, standing: Monique McLaughlin, Ann Hogan and Traci Foss-Jeans. Seated: Debra Bastone, Margaret Dymond and Colleen Brayman.

Quebec Rep: Ann Hogan will assume responsibilities
Ann.Hogan@horizonnb.ca

Eastern Reps: Ann Hogan—QC, NB, NS, PE; Traci Foss Jeans—NL, NU
Traci.fossjeans@centralhealth.nl.ca



Submitted by Margaret Dymond

Pilot project between B.C. and Washington State emergency nurses

An exciting pilot project between the **Emergency Nurses Association of B.C.** and the **Washington State Emergency Nurses Association** is underway. B.C. and Washington share a boarder and have several large cities that are only a few hours apart. Therefore, it was felt that the two groups could mutually benefit by working together on conference/education days.

This project will see each association mutually supporting the other with attendance at their provincial/state educational event. In 2011, British Columbia will host an education day with speakers from B.C. and Washington. Emergency nurses from both sides of the border will receive invitations to attend. In 2012, Washington will be the host and B.C.

nurses will be invited to travel to the U.S. Networking with our colleagues to the south can only benefit all emergency nurses.

Both organizations have designated an individual to participate in the planning of this pilot project, which will be reviewed following the 2012 educational event.

News from the provinces

British Columbia: ENABC

I am happy to report a great beginning to our membership year 2011, with 102 renewals/new memberships to date. Thank you to our members for the continued recognition of the importance of being a member of ENABC/NENA.

ENPC and TNCC continue to be well-attended throughout the province and we look forward to delivery of the revised ENPC course in late 2012.

Exciting news in B.C. includes two brand-new emergency departments in Interior Health hospitals. Kelowna General Hospital is a busy “small city” hospital in which we see approximately 150 to 180 patients per day and, along with that, the same issues with delays, admits, staffing, etc., as are seen across Canada. To help with our old, tiny, crowded department, Kelowna General Hospital is preparing to move to a new emergency department. It is very similar to Vernon’s tower with many of the new equipment and technologies. In preparation for the move to the new department, staff is busy trying dif-


ferent LEAN strategies to help create more proficient processes in the triage and trauma rooms. This is a big time of change and the staff is amazing. Staff at Vernon Jubilee Hospital have also been busy preparing and packing for the move to a brand-new emergency department in the VJH Polson Tower. Move-in day was September 25, 2011. The new emergency department, situated on the ground floor of the new tower, is four times larger than the old department. The tower includes state-of-the-art technology to assist in more efficient delivery of care. Some of the new equipment includes Vocera, a hands-free nurse-call communication system, Vernacare, a waste management system, a pneumatic tube system, a decontamination room and paired processing for triage and patient registration, just to name a few. Please check it out by searching VJH Polson Tower.

Challenges continue to be just that—challenging us with staffing shortages, overcrowding, holding admitted patients, sustaining care in small rural hospitals, etc., but several creative solutions have

been developed and we look forward to hearing about them at our Fall Education Day in October.

Recognizing the challenges associated with planning a successful Education Day, ENABC has entered into a two-year pilot project with our colleagues in Washington State. They will attend the ENABC Education Day this year and a conference committee comprising members of both organizations will present at the 2012 conference in Washington State.

We look forward to the NENA 2012 Conference in Halifax and even more to our opportunity to host NENA 2013.

Finally, a thank you from me, as I finish my term as ENABC president, turning it over to Sherry Stackhouse. It has been a tremendous experience. 



**Thank you,
Sherry Uribe
ENABC President**

Alberta: ENIG

I cannot believe the fall is already here and harvest has started early or late, if at all, depending on where in the province you are. Our fall is actually turning out to be our summer, which leads me to believe that our Indian summer is here now.


As Albertans and nurses in Alberta, we have been through many different disasters over the years. This year we almost lost a whole town and a hospital due to wildfires in the northern part of the province. I cannot tell how proud we are of our nurses who stayed by patients and moved them to safer areas at a minute’s notice, knowing they may never be returning to

their homes. The strength of our members never ceases to amaze me.

Alberta membership remains steady and, as an executive, we continue to come up with new ways to encourage membership. Throughout the province we continue to offer educational opportunities for our membership and at all times encourage non-members to join us.

Also, this spring Alberta Health Services started posting emergency department wait times on our public website in an ongoing effort to be transparent with the public. There are many views on this initiative, but we continue to wait for

ongoing analyses of this initiative, which we hope will give us all important information from the public and how they decide to seek emergency care.

Lastly, in Alberta we are preparing for another election, so stay tuned for the next change in health care in Alberta. You can always count on surprises during the election year. 



**Dawn Paterson
ENIG President**

Saskatchewan: SENG

Hello NENA members and welcome to the fall *Outlook*! For me, the fall has always felt like the start of a new year, a time for new beginnings. Here in Saskatchewan, we are having a new beginning of our own. My name is Raegan Gardner and I am pleased and honoured to be taking over the role of SENG president. The amazingly dedicated Mari-Elena Guerrero has completed her term as president and will be dedicating her time

to pursuing her career as a nurse practitioner in rural Saskatchewan. On behalf of the members and executive of SENG, we cannot thank Mari-Elena enough for her commitment to propelling emergency nursing along an exciting path in our province. You will be greatly missed, but we are lucky to have you sitting next to us still as the past president!

Saskatchewan also had a very exciting spring, hosting the 2011 NENA National Conference. The conference was a great

success and enough thanks cannot be said to the board and volunteers for all of their hard work! I truly look forward to representing the nurses of Saskatchewan on a national level and to making our voices heard! Thank you for this opportunity! ☛



**Raegan Gardner,
RN, BScN, ENC(C)
SENG President**

Ontario: ENAO

HAPPY 40th ANNIVERSARY, ENAO! ENAO was founded in 1971 and we are celebrating 40 years of representing the emergency nurses of Ontario in 2011. The “renewed” ENAO has an updated association logo, as well as a special 40th anniversary logo. ENAO has changed publishing companies and has acquired increased corporate sponsorship for our publications. Our “Name the New ENAO Publication” contest for members resulted in the transformation of the biannual ENAO newsletter into the *Journal of the Emergency Nurses Association of Ontario* (JENAO) with the expectation of publication three times per year. This celebratory year has also seen the creation of “ENAO Chronicles”, ENAO’s new electronic newsletter. The members who submitted the winning titles will both receive complimentary 2011–2012 ENAO/NENA memberships.

ENAO strongly supports CNA ENC(C) certification in our nursing specialty. The ENAO board of directors has proposed that CNA consider adding membership in a nurse’s professional organization to the requirements to qualify to write the specialty certification exams. The NENA president has committed to discuss this proposal with the CNA Associates and Affiliates Group.

ENAO was involved throughout the creation of the Emergency Department Asthma Care Pathway (EDACP), which is now used in most Ontario EDs. This work is being adapted into a net learning program, which will be available on MacHealth through McMaster University. The Canadian Medical Association will be granting physician CEUs and ENAO will be granting nursing CECH hours to all who participate in this online educational course. Along with other key

stakeholders, ENAO is currently a member of the steering committee for the creation of the Emergency Department Asthma Care Pathway—Paediatrics.

In the wake of SARS and H1N1, the Ontario Ministry of Health has recently established an Influenza Pandemic Working Group, whose mandate is to learn from the past in order to prepare for the future and the next pandemic. Recognizing the front-line position of emergency nurses, ENAO is honoured to have been invited to provide a representative to participate in this necessary and important work. ☛



**Jan Spivey
ENAO President**

Nova Scotia and Prince Edward Island: NSENA and PEIENA

It has been a busy few months over here in the Maritimes. The former president has moved and I am stepping in to make sure things are kept in order. I am excited to say that there are two people who have expressed interest in stepping up to the president’s position—one in PEI and one in NS.

We are facing the same challenges as the rest of the country: nursing shortages, overcrowding, long ED waits and the restructuring of nursing units (RNs, LPNs, CCAs). In Nova Scotia some of the walk-in clinics are having their hours decreased to help save money. This is going to impact on the care that people receive and it will increase the wait times in the ED.

On a positive note, the NENA conference is going to be Halifax next year! This is

going to be a fantastic time, getting to experience Halifax’s culture and spend time with other colleagues from across the country. I hope as many people as possible can come and experience Maritime hospitality. ☛



Cate McCormick

NENA is turning 30 years old in 2012!

As the president-elect, I have been going through old boxes of NENA material and I have come across archives with interesting reading material.

Excerpt from NENA Vol. #1 Newsletter titled: “**Emerging**” 1982:

During the past two years, Emergency Nurses Group of B.C. and Emergency Nurses Association of Ontario have encouraged emergency nurses from across Canada to consider the concept of a national affiliation. At Interphase '81 in Vancouver, the concept became a

more concrete idea and a steering committee was formed. Members were: Pat Kaspro, B.C., Chairperson; Bonnie Bates, Ontario, Vice Chairperson; Lorraine Wuori, B.C., Secretary; Louise LeBlanc, Ontario, Treasurer.

Board meeting observer policy

NENA board of directors' meetings are open to NENA members on a pre-arranged basis.

The objectives of open board of directors' meetings are to enhance the board's accountability to those who have an interest in the affiliation's affairs and to facilitate member understanding of the board's governance of the emergency nursing specialty.

Observer policy

- Those wishing to observe a NENA board of directors' meeting will contact the NENA president with their wish to do so at least 30 days prior to the board meeting, when possible.
- Number of observers allowed will be at the discretion of the board.
- If the request is less than 30 days in advance of a NENA board of directors' meeting, it will be at the discretion of the NENA executive whether permission will be granted.
- All observers shall be identified at the beginning of the meeting.
- A review of observer expectations will be outlined at the start of the meeting and is as follows:
 - i. Observers, prior to the start of the meeting, must agree to confidentiality of matters discussed.
 - ii. Observers will not be allowed to attend in-camera sessions.
 - iii. All observers will have non-voting status.
 - iv. Observers may not enter into the discussion of the business of the board.
 - v. The observer may comment in writing to their official representative while the meeting is in progress.
 - vi. Observers cannot be elected to chair a standing committee.
 - vii. Observers will be placed in a row behind the table where the meeting is held, depending on the number of observers present.
 - viii. NENA, Inc. will not be responsible for any expenses incurred by the observer attending a NENA board of directors' meeting (i.e., meals, accommodation, travel, etc.).
 - ix. If any observer becomes disruptive, they will leave the BOD meeting immediately at the request of the president.

NENA
Policies & Procedures
5.6.0

The next meeting was held in conjunction with the Ontario Assembly of Emergency Care in Toronto with representatives from British Columbia, Alberta, Ontario, Nova Scotia and New Brunswick in attendance. The steering committee consisted of the above executive members from B.C. and Ontario emergency nurses who then came up with draft objectives and proposed bylaws.

In May 1982, a national NENA meeting was held at Interphase '82 in Regina, at which time a national NENA executive was formed. Members voted in were: President—Bonnie Bates, Ontario; Vice President—Pat Kaspro, B.C.; Secretary/Treasurer—Donna Rae, Saskatchewan; Editor—Betty-Lou Kindlemann, Alberta; Consultant for Emergency Nursing Standards—Gina Dingwell, B.C.; and NENA representative—Accreditation of Education Programs for Emergency Medical Attendants—Sandra Easton, Ontario.

Questions:

1. What did membership cost in 1982?
2. Who was the first group/company to approach NENA for endorsement?
3. With whom did NENA hold their 1983 annual meeting?

Find out the answers and see some of the suggested NENA logos in the next issue of *Outlook*!



Sharron Lyons
NENA President



outlook Bouquets

✂ **Sheila Early.** Congratulations to Sheila Early of Surrey, B.C., for winning the Ruby Award, presented annually by Soroptomist International of the Tricities for her “tireless efforts on behalf of women and girls.” She went on to win the Western Canada Award. Congratulations, Sheila.

✂ **MariElena Guerrero.** Thanks to Mar for her years of service to emergency nurses in Saskatchewan in many avenues. Raegan Gardner will join the NENA board as Saskatchewan Emergency Nurses’ Group President.

✂ **Jan Spivey.** Congratulations to Jan Spivey for her selection to serve on the CNA ENC(C) exam committee for a six-year term.

✂ The ENAO Board of Directors wishes to acknowledge **Mr. Motsi Valentine**, ENAO Webmaster, for his creation of the new ENAO website www.enaome.com. Motsi’s tireless dedication, hard work and creativity over countless hours have produced an informative and professional new website for the “new ENAO” and the membership across Ontario.

✂ Thank you to **Mr. Humberto Laranjo** for entering the Name the ENAO Journal Contest and submitting the winning name for the new ENAO Journal, Journal of the Emergency Nurses Association of Ontario (JENAO). Bert wins a complimentary ENAO/NENA 2011–2012 membership. Congratulations, Bert!

✂ Thank you to **Ms. Yvonne Gayle** for her submission of the title “ENAO CHRONICLES,” as was chosen to be the name for the new ENAO electronic newsletter! Yvonne wins a complimentary ENAO/NENA 2011–2012 membership. Congratulations, Yvonne!

✂ Thanks to **Sherry Uribe** for supporting emergency nurses in British Columbia and representing them on the NENA board. Welcome aboard to new B.C. Director Sherry Stackhouse.

✂ **Cathy Fewer.** Thank you, Cathy, for your contribution to emergency nursing in Newfoundland and Labrador. Cathy has passed her gavel to Todd Warren, new director.

The following persons were recognized publicly for their work and service to emergency care in Canada:

- In recognition of a career marked by service in pediatric emergency care, Lori Lonergan, right, won the Marg Smith Award for Excellence in Pediatric Emergency Nursing
- Colleen Brayman of British Columbia for an Award of Excellence in Emergency Nursing Education
- Paula Mayer of Saskatchewan for an Award of Excellence in Emergency Nursing Administration
- Denise Kudirka of Quebec for an Award for Commitment to Excellence in Emergency Nursing
- Claire Thibault of Quebec for an Award for Commitment to Excellence in Emergency Nursing
- Gary Pronych of Saskatchewan for an Award for Service to NENA and to Emergency Nursing
- NENA Bursaries were awarded to David Conroy of British Columbia and Heidi Krahn of Alberta



What was overheard at the NENA 2011 Conference

- Nova Scotia nurses union has approved a policy to have all nurses dress in black pants with a white top. Practical nurses will wear the same with a yellow armband.
- “Code White” training includes wearing riot gear and includes the riot training.
- Rural Saskatchewan emergency departments are closing, as their doctors are leaving. EHS and hospital security have started wearing “flak jackets.”
- Ontario Lung Association is footing the bill for the roll-out of the provincial asthma protocol. As well, it has an on-line education package and is working on the pediatric protocol.
- B.C. interior is developing HART teams (High Acuity Response Teams) to work with the ambulance teams.
- People are making plans for NENA Conference 2012 in Halifax, Nova Scotia!

Awards of Excellence

Do you have an idol? Someone who helped you through that long day, evening, or night shift in ER?

Well, NENA wants to hear about them!

NENA is looking for applications for Awards of Excellence in emergency nursing.

There is no limit to the number of awards that are awarded in four categories:

- Emergency Nursing Practice
- Emergency Nursing Research
- Emergency Nursing Administration
- Emergency Nursing Education

The application form is on page 26 of this issue.



**National Emergency Nurses' Affiliation Conference 2011
Hosted by Saskatchewan Emergency Nurses' Group**

**Emergency Nursing!
Pioneering Change... Impacting the Future**

April 29–May 1, 2011



ENA President Anne-Marie Papa.



The 2011 NENA Board of Directors.



Above, Landon James and guest, Valerie Pelletier of AIUQ, on Pandemic Response. Below, Cate McCormick and Landon James at the NENA Board of Directors' meeting.



NENA and the Saskatchewan NENA 2011 Conference Committee wish to acknowledge and thank the sponsors who made the Regina conference successful. Without their support this conference would not have been possible.

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