

Continuing education: STARS Critical Care Academy...What's that about?

By Christine Maxwell, RN, BN, ENC(C)

I remember very clearly the feeling of writing my last nursing exam. It was a feeling of relief, joy, sense of accomplishment... I was finished and, at the time, I believed “school” would be a thing of the past. Little did I know at that time that my career would encourage me to pursue knowledge, continue to learn and challenge myself.

The first challenge arose when I decided to change my career path from palliative care nursing into emergency nursing. That first year was a steep learning curve. It was overwhelming to say the least. Many days were filled with self-doubt, the occasional day of triumph and many, many days of learning. Learning a multitude of new skills, new tasks, new knowledge, new medications, new coping mechanisms and, somewhere in that year, a deep appreciation and passion for emergency/critical care nursing was sparked.

Fast-forward five years into my emergency nursing career and the learning and challenging continues. In those five years I have achieved certifications in ACLS, PALS, TNCC, ENPC and also received my designation as a certified emergency nurse, ENC(C). I have attended many conferences and education days in the hopes of acquiring new knowledge, best practices and meeting fellow nurses who share the same desire to learn more. I have found in my own practice that continuing education improves confidence in your work. It allows you to increase the level of care you provide for your patient by using best practices and acquired new knowledge and also can create more effective communication between health care disciplines involved in patient care. I have come to understand that when you know better, you do better. Education allows us to do better.

Looking for my next challenge, I stumbled across the STARS (Shock Trauma Air Rescue Society) Critical Care Academy program. It is a certificate course offered through the accredited University of Calgary. I applied for the program and was a successful applicant. I was now looking at a 16-week, intensive program geared towards critical/emergency care. Entering the program, I knew that I would gain something, and it is now safe to say that I didn't understand how much I would advance my training, skills and critical thinking. Looking back, it is difficult to put into words the impact this program has had on me, as a nurse and health care provider.

Each week entailed new readings, assignments and postings to complete—all geared around critical thinking and emergency/critical transport care. A residency week during the middle of the course at one of the STARS bases provided many “light bulb” moments and exposure to new skills and knowledge. Each morning we had lectures from cardiologists, intensivists, obstetricians and emergency physicians. Afternoons were immersed in skill labs and simulations with “Stan” the mannequin. Some days Stan would die, some days he would survive. Each simulation presented


valuable learning moments, trained you how to focus on the important information and how to effectively communicate with your team. Teams were comprised of a nurse and paramedic duo. This allowed us to gain a better sense and understanding of each other's role and encouraged us to combine our skills to the greatest effect. “Stan” was getting the best of both worlds and teamwork was of essence in this critical care environment for success to occur. It was incredible watching our team evolve. As communication improved we became more effective, and as we became more effective “Stan” fared better. We decided on the course of action/treatment, differential diagnosis and interpreted labs, ECGs and x-rays as a team. Camaraderie is of great benefit in the emergent care environment. The simulations were by no means easy—they were based around real calls STARS has responded to in the past and success brought a great sense of accomplishment to our team. Skills labs included interpretation of x-rays, percutaneous trans tracheal ventilation, cricothyrotomy, inserting TVP, intubation and many more interesting skills. Although all of these skills are not in our scope of practice as RNs, they were taught so that we could be better support systems for the physicians and staff having to complete the procedures. We would be able to prepare for possible complications and offer suggestions, if needed. I have also found that the knowledge gives you more confidence in assisting with these procedures and the continuing care of the patient once they are completed.



Near the end of the program, we all completed a flight practicum at one of the STARS bases. I had the opportunity to gain hands-on experience with some of the best in the critical care transport field. I witnessed firsthand the skill, intelligence and experience of the nurses and paramedics of STARS. During my three shifts, we were called out for four missions of varying emergencies, including a pre-eclamptic emergency, a sepsis, a central cord shock syndrome and a resuscitated traumatic cardiac arrest. The experience was phenomenal and positive in every aspect. The team was supportive, allowed for many, many questions to

be asked, and also promoted my learning when not on flights. The program, complete with the practicum, made it very evident that education is highly valued amongst the STARS organization and has proved to be the best educational experience I have had to date in my career.

Overall, this program has given me a chance to network and collaborate with 13 other incredible academy students comprised of ICU and ER nurses, paramedics and a GP from across Alberta, Saskatchewan and Manitoba. It has provided me with a greater depth of critical care knowledge and increased respect for my colleagues. I really am changed for the better. The level of knowledge, experience, dedication and commitment of the instructors and classmates has left an everlasting impression. Everyday I will strive to be better, do better and teach better. I encourage those who have a few years of emergency nursing

experience and are interested in advancing or improving your critical care practice to apply for this program... you will not be disappointed. To learn more about this program, please go to www.stars.ca. 

About the author



Christine Maxwell, BN, RN, ENC(C), is a registered nurse, practising for the past five years in the emergency department of the Grey Nuns Hospital in Edmonton, AB. She received her nursing diploma from Grant MacEwan in 2007 and her degree in 2011 from the University of Athabasca. When not at work, she enjoys travelling, spending time with family and her newest addition... training to run a half marathon.

BOOK REVIEW

Forensic Nursing: Evidence-Based Principles and Practice

Authors: Rose E. Constantino, Patricia A. Crane, Susan E. Young

Publisher: F.A. Davis Company, 2013, ISBN 978-0-8036-2185-5

One of the newer books on forensic nursing, this text addresses the science of forensic nursing from the perspective of evidence-based principles applied to practice settings. The authors state their goal in writing the text is “to provide a roadmap to forensic nurses nationally and globally as they continue to make a difference in their specific area of practice” (page vii). There are 30 contributing authors for this text including one Canadian: Catherine J. Carter Snell, RN, PhD, SANE-A, ENC-C.

The text is divided into four units with each unit having several chapters on the unit topic. Each chapter begins with a list of competencies and key terms relevant to the chapter. Case studies are included throughout the text, focusing on providing the reader with the opportunity to gauge their knowledge in relation to the content for each chapter. At the end of each chapter is an evidence-based practice question with selected references to answer the practice questions posed by the authors. There are chapter review questions in the form of multiple choice questions, as well.

Unit titles are:

1. Introduction to Forensic Nursing Practice

2. Forensic Nursing in Interpersonal Violence
3. Forensic Nursing in Special Areas of Practice
4. Forensic Nursing in Collective Violence


After reviewing the textbook, I found it to be a very well written, coordinated text reflecting current practices for the forensic nurse and others in clinical settings. It is not a text filled with photographs of injuries and crime scenes—in fact, there are very few photographs in the entire text. There is a very nice timeline of events in forensic nursing’s history, dating from 1948 to the present (page 6).

Chapters of interest to emergency nurses

Chapter 9: “Violence: Sexual Assault and the Forensic Nurse” describes the role of the sexual assault nurse examiner, the effectiveness of the role and legal outcomes. The chapter describes the assessment techniques of a forensic examination, the physical examination process and evidence preservation and collection.

Chapter 16: “Evidence: Forensic Nursing in the Emergency and Acute Care Departments” is of particular interest to the emergency nurse. It covers the development of health care-based violence intervention programs and sexual assault nurse examiner/forensic nursing programs within the ED. It identifies

screening issues and barriers to conducting assessments in busy EDs. There are two assessment tools provided in this chapter. One is for abuse assessment screening and the second is Jacquelyn C. Campbell’s danger assessment for women and men. The types of injuries commonly seen in the ED are described (abrasion, avulsion, bruises, laceration, cut, ecchymosis, patterned injury, petechiae, slap injury, firearm injury, bite mark and strangulation). There is a short section on the importance of documentation, as well.

Chapter 18: “The Forensic Nurse and Human Trafficking”. This chapter highlights an aspect of violence that has not been prominent in forensic nursing until the last decade. Human trafficking is a global issue. Health care providers including first responders, nurses and physicians must understand the dynamics of human trafficking in order to provide the best care for victims of human trafficking. The chapter provides a background on human trafficking, trafficking definitions, risks and causes of human trafficking, identification of the trafficked person, and health concerns of trafficked victims, as well as planning interventions, interventions and implications for nurses as first responders. A simple set of screening questions is also provided. 

**Respectfully submitted,
Sheila Early, RN, BScN
President International Association
of Forensic Nurses**