

Fall greetings, NENA members

Are you as surprised as I am that it is November 2016 already? It is so true that as each month or year passes, the next one seems to go even more quickly.

I do hope you each had a chance to enjoy a bit of summer—at the lake, beach, mountains or even just enjoying time at home. My husband and I are fortunate to call the Sunshine Coast in BC home—the name alone ensures a steady stream of summer visitors—definitely true this year.

But here we are, continuing to provide the quality care and expertise of care to all those who come through our doors. The same, yet different, every day.

The same is true for NENA—our history and traditions are strong while at the same time, we change in order to meet the needs of all of you, our members. This is what I want to talk to you about with this message.

As you know, NENA went through significant change, resulting in a Letter of Continuance from the Canadian Government, necessary in order to comply with the rules of the Canada Corporations-Not for Profit Act, which came into law October of 2014. A five-member executive was formed, consisting of president, past/elect president, secretary, treasurer and director of education. Assisting the executive was the newly formed President's Council, composed of provincial representatives, NCAC and triage committee members,

communications officer and Webmaster. We soon realized, however, that membership is a key strategy, thus the appointment of director of membership and promotion.

We were not done yet, as it became obvious that an executive of six was simply too small a group to complete the work necessary to keep NENA strong. You have received information recently describing the proposal and selection process used to appoint six additional directors at large, each of whom has written a short biography included later in this journal.

It is my great pleasure to announce the following NENA Directors at Large, their home province and their area of geographic responsibility, ensuring we touch base with all members.

Directors at Large Geographic Area of Responsibility

Janice Spivey, Ontario
Steve Gagné, Quebec
Marie Grandmont, Manitoba
Debra Pitts, New Brunswick, Nova Scotia, Prince Edward Island
Ashleigh Malarczuk, Newfoundland/Labrador
Melanie Fecteau, Northwest Territory, Yukon, Nunavut

Please join me in welcoming these Directors to the NENA Board of Directors. Over the next several months, we will be meeting to discuss governance and representation models. Be assured we will keep you informed of decisions/changes made.

In addition to all the work described above, please know that your Board of Directors continues to work on many other projects—launch of EPICC courses throughout Canada, ENPC/TNCC contracts, liaisons with CNA, CAEP and ENA, budget management and many others. Please do not hesitate to contact me if you have questions, concerns, suggestions, etc. president@nena.ca

I would also like to introduce Wendy Atkinson, new Financial Administrator for NENA. We would not be in the secure financial position we are today without the help of Jim Lashkevich, financial administrator for several years. Jim has decided to retire and was instrumental in recruiting Wendy to take over the role. Wendy lives near Chilliwack, BC, ensuring easy access to Jim, as she learns the role.

In closing, please look at the Save the Date information included in this edition—NENA 2017 is in Charlottetown, PEI, next June. It is Canada's 150th birthday, so what better place to host our conference. I hope to see many of you there—it promises to be great.

Take care, be safe and let us know how we can help. 



**Sherry Uribe, MBA, BSc,
RN, ENC(C)
NENA President**


Treasurer's report

My name is Kitty Murray. I am a clinical nurse educator at Victoria General Hospital in beautiful Victoria, BC. My husband and I have four grown children and two lovely grandchildren. I began my term as treasurer in July of this year.

I want to say thank you to Sharron Lyons (interim treasurer) and Sherry Uribe (past treasurer) for helping me with all the various accounting and policy questions. I would also like to thank Wendy

Atkinson, our accountant, for doing the brunt of the accounting work and keeping our NENA finances in order.

Currently, we are working on taking over the administration of the EPICC courses, which were jointly developed by prn education and NENA. There were some financial costs to NENA in developing this course, but as they are starting to run, we are seeing some revenue. The rest of NENA finances remain fairly stable, which enables us,

as an organization, to continue to fund education and other activities that support emergency nursing practice. I look forward to continuing to serve as your treasurer and am proud to be a member of NENA. 



**Kitty Murray
NENA Treasurer**

CJEN Editor's report

Welcome fall and welcome emergency nurses to the Canadian Journal of Emergency Nursing. This is my last opportunity to speak in this column and I plan to take full advantage to thank all of the many persons who have contributed during my tenure as editor of this journal.

Most readers have little awareness of the many hands that collaborate to bring a journal from nothing to your mailboxes. The most difficult aspect of the task is soliciting for content. Each of the provincial presidents and each of the section editors begin scanning the horizon well in advance of publication for authors who are willing to contribute and topics of import. Emergency nurses tend to be busy people and finding a nurse with extra time is difficult. Often submissions arrive requiring clarification and, of course, we like to include a photo and brief bio of each author. I found out quickly that nurses do not like to send pictures of themselves.

Once content begins to roll in, the task of editing begins with section editors reviewing each item and discussing with the authors. Simultaneously the

provincial presidents provide reports on the activities of their provinces—trends in emergency care, provincial high points and issues. Officers on the board also submit reports to keep members informed of NENA activities.

When all of the content is assembled, it is sent electronically to our publisher where proofreaders work their magic. One of their most important services is ensuring that cited sources are accurate and catching plagiarized material. I was shocked the first time we caught blatant unattributed use of material; I suspect it was unintended. Anyway, I chose to give the author the benefit of the doubt.

The CJEN editor works with layout and design staff to organize content in a way that it is most readable and attractive for readers. We also work together to select an image for each cover. This is my final opportunity to thank Heather and Sherri of Pappin Communications for their invaluable help with this task. When we changed the appearance of the journal several years ago, it was their guidance that led to the development of the more professional appearance.

You may notice a generous amount of advertising in each journal. Those advertisers undergird the cost of publication and distribution of the journal twice a year. Without those agencies and vendors this journal would be a PDF in your email.

Thank you to each and every contributor to the journals through the years, many from outside our discipline of emergency nursing. Thank you to the section editors: Sheila Early (Forensic Nursing), Cathy Sendeki (Geriatrics Matters), Sharron Lyons (Kids' Corner), and Carole Rush and Margaret Dymond (Trauma Corner), whose work as section editors has been invaluable through my tenure as editor.

NENA is seeking a permanent CJEN editor but, in the interim, Marie Grandmont from Manitoba and Tayne Batiuk from Saskatchewan have risen to the task for this fall edition. Thank you, ladies. 📧



**Respectfully submitted,
Stephanie Carlson**

Director of Membership and Promotion's report

Pat Mercer-Deadman is from Saskatchewan and graduated from the Misericordia Hospital School of Nursing in Edmonton in 1981. She has been an emergency nurse since 1983, working in Edmonton and England. Pat has had her Emergency Nursing Certification-Canada through the CNA since 1994. A member of NENA since 1994, Pat was the President

of NENA-AB from 2012–2014 and the NENA Conference 2014 Co-Chair. Pat is passionate about emergency nursing and NENA, and developed the Director of Membership and Promotions position for NENA. Pat serves in this position now until June 30, 2017. Along with emergency nursing, Pat works part-time in recovery room at the Northern Alberta Vascular Centre at the Grey Nuns'

Hospital in Edmonton and has developed a keen interest in aortic vascular patients, especially with their presentations and care in the emergency department. 📧



**Pat Mercer-Deadman
NENA Director of
Membership**

Website Coordinator's report

In April 2015, I took on the role of website support for NENA. You may recall we experienced a significant problem in the fall of 2015 when our email server became inadvertently blacklisted by Microsoft and its subsidiaries. Because of changes to our hosting company, the solution for the blacklist problem required changing hosting companies, a process that took about a month and resulted in delays to (and dropped) emails among many of our members. Thank you for your patience as we worked through that situation.

With the blacklisting problem resolved we proceeded to grow the site into a more bilingual platform with the addition of French and English language versions of the Position Statements in the Documents section. We also increased the website's provincial content and optimized its communication capacity. Currently the Board of Directors (BOD) is in the process of establishing a website representative among the executive to interface between the membership, the BOD, and the web support team to ensure the site continues to strengthen its

profile as an educational and professional resource among the emergency nursing community. Looking ahead, website issues for the consideration by the BOD include: updating the design of the site, increasing the information outflow from the site, and making better use of forum functionality on the site. ☒

Regards,
**Norman Carter-Sim, RN, BScN,
MHInf(Candidate), Dip. ER
Nursing, Dip. Comp. Sys. Tech., Dip.
Traditional Chinese Med.
NENA Website Coordinator**

Secretary's report

Dear NENA members,

I am honoured to be your current NENA Secretary. I have been an RN for 31 years now and if I could do it all again, I would. I love nursing! I started my career in the Neonatal ICU in Edmonton, but eventually transferred to a position which spanned 12 years in the pediatric ICU. During that time I had the extreme privilege of being a part of the first physicianless Pediatric Critical Care Transport Team in Canada and all of the amazing education that came with this opportunity. From PICU I moved to a large, tertiary, trauma centre emergency department in Edmonton and become a Clinical Practice Educator. This was my first encounter working with an adult population; I was so scared of these "big people" and emergency—it was intimidating and a big learning curve! I stayed in that ED in the educator role for five years before my family made the decision that we could handle Alberta winters anymore (I know – wimps) and moved to the beautiful wine and lake region of Kelowna, BC. I continued in the ED as

a Clinical Practice Educator for another five years before returning to the transport world. I am currently the Program Leader for ground, hospital integrated, high acuity response teams (we have four bases in total) and continue to be closely tied to the ED.

I started my introduction by saying that I have the honour of working with NENA, because although I have had an amazing nursing career so far (basically womb to the tomb), some of my most rewarding, memorable and humbling experiences have been with NENA. I became the Communication Officer in 2006, and worked with the NENA publication known then as "Outlook". I took a brief leave from NENA, but returned as the CTAS National Working Group (NWG) representative on the National Course Administration Committee (NCAC) in 2010. I transitioned into the CTAS NWG Co-Chair over the following five years. During this term I was extremely privileged to meet nurses and physicians across Canada, teaching CTAS across numerous provinces, and internationally;

Florida, Turks and Caicos, Costa Rica, Hungary, Barbados, Saudi Arabia and Portugal. I was profoundly affected through this; watching RNs become empowered to take ownership of the triage process in a country where there had not previously been access. We shared many tears and hugs with this victory.

At the end of my experience as CTAS NWG, NENA was transitioning into a new era and I wanted to see where this could take this amazing organization. I was elected into the secretary position soon after. My advice to emergency nurses is to "GET INVOLVED". If I had never taken the leap to become involved in NENA, I would not have experienced the amazing people, energy, enthusiasm and dedication that I have on a national level. ☒



**Colleen Brayman, RN,
BScN**

Director of Education's report

The summer has been busy with educational activities related to dedicating resources for those emergency nurses seeking studying materials for the certification exam and the release of NENA's emergency nursing foundations course —EPICC.

Resources for the Canadian Emergency Nursing Exam prep course

This is an online program accessible through the openlearning.com website. A systems-based program has been set up with a question and answer format. The PowerPoint show poses a question with the answer and rationale on the next slide. Canadian emergency nurses can access this program following these steps:

1. Go to openlearning.com
2. Create a student account
3. Log in and search for "Canadian emergency nursing exam prep course" and select course
4. Click on "Join course"

5. Click on "Videos and activities". The modules now show up for you. The modules are loaded in a PDF PowerPoint format. The tool bar at the top has a "View" choice. Select "Read" or "Full screen"
6. This program is free for the launch year and open to NENA members.

Enhancements to the program will be ongoing with a NENA certification design team. Thank you to all who have participated in the program to date.

Canadian emergency nurses exam - prep course in Dubai, October 2016

Canadian Nurses Association (CNA) and The Dubai Health Authority (DHA) in partnership with NENA are sending two Canadian emergency nurses to deliver a three-day education session in preparation for the Canadian emergency nursing certification exam later in 2016 for the Dubai Health Authority. Efforts are underway to develop a template for an emergency nursing certification face-to-face prep course

in Canada for those educators wanting a resource to deliver a prep course for their own emergency nurses preparing to write the Canadian emergency nursing specialty exam in 2017.

Educational resources added to the NENA website under education "Learn More":

1. Links to Allergy education information for nurses, parents, and schools
2. Links to the Canadian Concussion Consortium

Emergency Nurses Pediatric Course 5th edition working team

NENA has a representative on the ENPC 5th edition revision working team. The team is now progressing through development of a 5th edition ENPC course and program development. Stayed tuned for more news in future editions of CJEN, NENA NCAC reps, and ENA. 📧

Submitted by
Margaret Dymond

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 CJEN. 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,
communicationofficer@nena.ca

Care to Be the Best



CNA Certification in Emergency Nursing

"The National Emergency Nurses Association encourages all its members to obtain CNA certification in emergency nursing, as it promotes expertise in the field and helps RNs keep current with current emergency nursing knowledge. Numerous studies have shown that the presence of nurses with their ENC(C) credential contributes to better patient outcomes."

Sherry Uribe

President, National Emergency Nurses Association

Did you know over 1,100 emergency RNs across Canada now have their national ENC(C) certification designation?

Alberta	109	British Columbia	116
Manitoba	61	New Brunswick	54
Newfoundland & Labrador	50	Nova Scotia	114
Northwest Territories	15	Ontario	551
Prince Edward Island	11	Quebec	53
Saskatchewan	61	Yukon/Nunavut	*

* Information suppressed to protect privacy (1 to 4 candidates)

What distinguishes CNA-certified nurses

- Advanced clinical expertise with a commitment to lifelong learning
- Recognized specialty knowledge, authenticated by exacting national standards
- Dedication to evidence-based care and patient safety

What employers of certified nurses are saying

- Certification confirms an RN's enhanced competency and specialized knowledge
- Certification helps to recruit and retain the best nurses
- Having certified RNs on staff not only fosters safe, high-quality care, it also raises the entire education culture

For more information, visit getcertified.cna-aiic.ca.

A product of the Canadian Nurses Association



NEW DATES FOR EXAMS

Write the 2017 computer-based exam any time between
May 1st - May 15th, 2017.

Submit your online application from January 2nd - March 1st, 2017.

Note: Once CNA certified, your ENC(C) credential is valid for a five-year term.

Avoir l'excellence à cœur



Certification infirmière de l'AIIC en soins d'urgence

« L'Association nationale des infirmières et infirmiers d'urgence encourage tous ses membres à obtenir la certification de l'AIIC en soins infirmiers d'urgence, puisqu'elle fait la promotion du savoir-faire dans le domaine et permet aux infirmières et infirmiers autorisés de maintenir à jour leurs connaissances en soins infirmiers d'urgence. De nombreuses études démontrent que les infirmières ou infirmiers titulaires de la désignation CSU(C) contribuent à de meilleurs résultats cliniques chez les patients. »

Sherry Uribe

Présidente, Association nationale des infirmières et infirmiers d'urgence

Saviez-vous que plus de 1 100 infirmières et infirmiers spécialisés en soins d'urgence de tout le Canada sont maintenant titulaires de la désignation nationale CSU(C)?

Alberta.....	109	Colombie-Britannique	116
Manitoba	61	Nouveau-Brunswick	54
Terre-Neuve-et-Labrador	50	Nouvelle-Écosse	114
Territoires du Nord-Ouest.....	15	Ontario.....	551
Île-du-Prince-Édouard	11	Québec.....	53
Saskatchewan.....	61	Yukon et Nunavut	*

* Information supprimée pour protéger la confidentialité (1 à 4 candidat(e)s)

Qu'est-ce qui distingue le personnel infirmier certifié par l'AIIC?

- Un savoir-faire clinique avancé accompagné d'un engagement envers l'apprentissage continu
- Des connaissances spécialisées reconnues, authentifiées par des normes nationales strictes
- Un dévouement envers les soins fondés sur des données probantes et la sécurité des patients

Qu'en disent les employeurs du personnel infirmier certifié?

- La certification confirme les compétences renforcées et les connaissances spécialisées d'une infirmière ou d'un infirmier autorisé
- La certification permet de recruter et de maintenir en poste les meilleurs infirmiers ou infirmières
- Compter du personnel infirmier autorisé certifié au sein de notre effectif favorise non seulement des soins sûrs et de grande qualité, mais rehausse aussi la culture en matière d'éducation

Pour obtenir plus de renseignements,
visitez obtenircertification.cna-aiic.ca

Un produit de l'Association des infirmières et infirmiers du Canada



NOUVELLES DATES POUR LES EXAMENS

Passer l'examen informatisé 2017 entre le 1er et 15 mai.

Soumettez votre demande en ligne du 2 janvier au 1er mars 2017.

Nota : Dès l'obtention de la certification, votre désignation CSU(C) est valide pour une période de cinq ans.

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northern health

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BC Children's Hospital (BCCH)

Hiring Nurses - Emergency & Trauma Services

The Emergency & Trauma Services department at BCCH treats more than 43,000 children each year across the province. The new Teck Acute Care Centre opening in the fall of 2017 will be the heart of the BCCH and the flagship for the transformation of child health in BC. The Centre will include a state-of-the-art emergency department featuring bright, modern facilities with single occupant patient rooms, access to natural light and rooftop gardens.

Join one of Canada's Top 100 Employers at <http://jobs.phsa.ca/nursing>

For more information call Kuldish Chatha, Nursing Advisor 1-866-744-7363, Kuldish.chatha@phsa.ca

*Relocation assistance up to \$5,000



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Vancouver Coastal Health is world renowned for innovation and a focus on quality care and outcomes, delivering services to more than one million BC residents. VCH is at the forefront of career destination for nurses and health care professionals.

We're hiring experienced Emergency RNs to positions in our facilities on the Central and Sunshine Coast, the Sea to Sky Corridor, plus our cities – Vancouver, North Vancouver and Richmond.

Explore these great West Coast communities and apply today – visit us at careers.vch.ca

NENA Director at Large bios

Janice Lynne Spivey, RN, ENC(C), CEN



Hello/bonjour NENA members and all Canadian emergency nurses. It is both a personal and professional honour for me to have been recently appointed to serve as one of the six new Directors at Large on the expanding NENA Board of Directors.

I have been licensed to practise nursing in Ontario since 1973, as well as having been licensed to practise nursing in New York State, U.S. since 1997. All but my first five years of practice (medicine and CCU) have been in emergency nursing with several years that have included both ED and PACU experience.

I have been privileged to serve as the President of the Emergency Nurses Association of Ontario (ENAO) for several terms, as well as having served as your NENA President. I am ENC(C) certified in Canada by CNA, having just renewed my national certification for the fifth time. I am also CEN certified in the United States.

I have chaired ENAO provincial and NENA national conferences. I am a long-time ACLS and CTAS Instructor. I have previously or am currently serving on various provincial and federal emergency health care working groups and committees.

I have presented on emergency nursing “topics/issues” at various national and international emergency nursing conferences in Canada, U.S., Mexico, Spain, Peru and Brazil. I have been invited to be a speaker at the 2017 international emergency nursing congress in Costa Rica.

I am currently working as an emergency nursing expert for law firms, judges and juries across Ontario, as well as serving as an emergency nursing expert for the College of Nurses of Ontario (CNO). I also continue to serve on the CNA Emergency Nursing exam development committee.

It is a privilege, honour and pleasure for me to serve Canada’s Emergency Nurses on the NENA Board of Directors.

Marie Grandmont, RN, BN, ENC(C)



Hello NENA members!

I am pleased to begin my new role serving on the NENA Board of Directors as a Director at Large. I am currently the Director for the Emergency Department Nurses Association of Manitoba and have held that position since 2013. I have been a NENA member since 1994.

I have been a nurse for 25 years, graduating from the Misericordia School of Nursing in 1991 and began work there on a medical floor. After two years, I moved to Dawson Creek in northern British Columbia where I began my emergency career working very briefly in the emergency department. This is where my passion for emergency nursing began and I have been hooked since. After returning home to Winnipeg in 1994, I was fortunate to get a position in the emergency department at Concordia Hospital where I continued to work for almost 21 years. I worked both at the bedside and as the ED Educator during my time at Concordia Hospital. In the last year, I have held a position as a Regional Nurse Educator for the emergency program for the Winnipeg Regional Health Authority, where my role has shifted to academic, teaching new emergency nurses.

I completed my Bachelor of Nursing from the University of Manitoba in 2009. I hold a Certificate in Adult Education through St. Francis Xavier University in Nova Scotia, a Certificate in Emergency Nursing from Red River College in Winnipeg, my CNA Certification in Emergency Nursing for the last 19 years, which I have maintained through continuing education. I teach TNCC, ENPC, CTAS, BLS, ACLS, and Non Violent Crisis Intervention (NVC). I am a course director for TNCC & ENPC, as well as an Instructor Trainer for TNCC. I am also an ACLS Instructor trainer with the Heart and Stroke Foundation of Manitoba.

I look forward to bringing a provincial voice to the national table, representing

hard-working nurses who work in emergency departments across the country. Keep up the excellent work that you do!

Debra Pitts, RN, BN, ENC(C)



I graduated from the Saint John School of Nursing in 1977. Over the next 10 years I worked in a variety of areas including medicine, cardiovascular and thoracic surgery, and the intensive care unit. In 1986 I landed a job at Saint John Regional Hospital (SJRH) in the emergency department (ED).

Lifelong learning being a hallmark of nursing, I continued to learn, taking advanced assessment courses, ACLS and triage. In the '90s at the SJRH, I was part of the clinical team that validated the current CTAS course that was endorsed by CAEP and accepted nationally. In 2002 I took a provincially accredited critical care course, which gave me credits toward my Bachelor of Nursing (BN). I graduated in 2006 from UNB Fredericton with my BN while I continued to work in the ED. I wrote my certification exam in 2006, renewed by continuous learning in 2011, and plan to renew November 2016. In 2007, I and five other senior nurses hopped in a van, drove to Antigonish, NS, and participated in the CTAS instructor course, which was facilitated by Val Eden and Deb Cotton. This was the beginning of my role as an educator in the ED. Currently, my role is Nurse Educator for the Emergency Program at Horizon Health Network, Saint John area. My area includes three rural hospitals, one urgent care centre and the SJRH, a level 1 trauma centre. I instruct/teach BLS, ACLS, CTAS, TNCC, and ENPC.

I love emergency nursing, advocating for my patients and I care to be the best. I support the vision to promote education, certification in emergency nursing and making our voice the one to turn to for emergency nursing in Canada... NENA.ca—log on today!

**Mélanie Fecteau, RN
ENC(C), I.A. CSU(C) Clinical
Coordinator Emergency
Department/Clinicienne de
l'unité des Soins d'Urgences,
Acting Clinical Coordinator
ICU/Clinicienne de l'unité des
Soins Intensifs**



Frenchie from Québec, I graduated in Nursing in 1998 in Rivière-du-Loup. I worked in Ottawa as a front-line emergency nurse and in 2003 I decided to

go for an adventure and moved to the Northwest Territories (NT) (first in Inuvik and now in Yellowknife). I am an emergency nurse. I did some flight nursing in the North and was able to travel in all of the NT and Nunavut (NU) (Kitikmeot) communities. I have been the Clinical Coordinator for the emergency department in Yellowknife, NT, since 2010 (I took a two-year break to go back into nursing only... but since July of this year I am back into my Clinical Coordinator position). I am also an instructor for all the critical care certifications given in-house, for ACLS, PALS and BLS Heart and Stroke. Some may say that I am a workaholic... but my real passion is travelling...

Happy to be part of the BOD for NENA and to be able to expand NENA developments into Northern Canada, in our hospitals, as well as community out-post nursing. Expanding NENA nursing knowledge to all areas of emergency nursing in the North is an area that I am extremely interested in.

Thanks, Merci, Mársı , Kinanāskomitin , Mahsi', Quana, ᑭᑎᑎᑎᑎᑎᑎᑎᑎᑎ, Quyanainni, Mahsi', Máhsı, Mahsi

**Steve Gagné, RN, BSN,
CNCC(C)**



Je suis actuellement membre du conseil d'administration de l'Association des infirmières et infirmiers du Québec et depuis les dernières semaines, j'ai le privilège de siéger sur le Comité des directeurs de notre association canadienne.

Je suis un infirmier clinicien depuis vingt ans. J'ai pratiqué les soins infirmiers d'urgence à l'Hôpital Juif de Montréal et depuis 2009, je suis conseiller en soins infirmiers pour l'installation Jean-Talon du CIUSSS du Nord-de-l'Île-de-Montréal. En plus de mon rôle au centre hospitalier, j'entretiens un partenariat avec l'Université de Sherbrooke afin de

superviser des étudiantes en stage et d'assister à certaines tâches d'enseignement. Je suis également formateur CTAS et j'ai eu l'opportunité de me promener à travers le Québec afin de dispenser cette formation.

J'assurerai une représentation à la nouvelle structure nationale de cette association professionnelle. Je tenterai de communiquer la réalité de la pratique clinique au Québec, mais également je tenterai d'être la voix de chaque infirmière francophone de ce pays.

Malgré les temps difficiles et chaotiques, continuez l'excellent travail que vous faites !

**Ashleigh Malarczuk, MN, RN,
ENC(C)**



I am a registered nurse and very happy to be included on the NENA Board of Directors. I currently live and work in rural northern Alberta as a Clinical Nurse Educator. I am passionate about education and have been involved in teaching many courses to nurses and other members of healthcare teams for several years. I look forward to helping promote emergency nursing. ☒

CTAS National Working Group Update

Work continues on the CTAS content revision and development of enhanced education materials. Release of the new materials is expected in early 2017. More information will be available for CTAS instructors prior to the release of the new materials.

Contributions of case studies, (formatted like the case studies in the existing course) would be appreciated and can be sent to ctas@nena.ca

Information about becoming a CTAS instructor is available at: <http://www.caep.ca/resources/ctas/how-become-ctas-instructorinstructor-trainer>

A listing of upcoming CTAS courses is available at: http://www.caep.ca/CTAS_Courses

**Erin Musgrave & Thora Skeldon
CTAS National Working Group Chairs**

NENA Awards, Bursaries and Grants available for 2016–2017

Awards

Excellence in nursing and health care deserves recognition. By celebrating nurses' achievements in the four domains of practice, understanding of nursing is expanded and a positive image is reinforced. The NENA Awards of Excellence Program enables nurses to honour colleagues for their outstanding contributions and for demonstrating excellence in relation to the Standards of Nursing Practice.

Awards available are:

- Award of Excellence in Emergency Nursing Administration
- Award of Excellence in Emergency Nursing Education
- Award of Excellence in Emergency Nursing Practice
- Award of Excellence in Emergency Nursing Research

Award nomination forms are to be sent to awardsbursaries@nena.ca

Deadline for submission is annually March 31. Awards/Bursaries are announced at the annual NENA conference.

Bursaries

NENA recognizes the need to promote excellence in emergency care and, to this end, will provide financial assistance to its members. NENA will budget for a predetermined amount of monies (up to \$400) for the support of ongoing education within the mandate of facilitating a high standard of Emergency patient care throughout Canada.

All members of the emergency nursing team are eligible for consideration including staff nurses, managers, educators and nurse practitioners.

On April 1st annually, the number of bursaries available to be awarded will be determined based on the number of registered NENA members in each province. One annual bursary will be available to the NENA Board of Directors and one bursary will be available to the registered Independent NENA members.


There is one bursary each for the Margaret Smith Paediatric Memorial Bursary and the Debbie Cotton Memorial Bursary, each with a value of \$500.

NEW—There are five bursaries each for \$100 for NENA members writing their Emergency Nursing Certification of Canada [ENC(C)] through the Canadian Nurses Association (CNA) and five bursaries each for \$100 for NENA members re-certifying their ENC(C) whether through continuous learning or the exam.

Deadline for these bursaries are annually March 31 and September 1.

Grants

A NENA Research Grant is available for application by a NENA member/members participating in current research related to emergency nursing in Canada.

Completed applications accompanied by all required documentation must be submitted to your provincial president and/or awardsbursaries@nena.ca on or before the deadline date. 



Vince Navamete, RN, Regina, Saskatchewan



Sarah Groom, RN, and Tess Comeau, RN, Charlotte County Hospital, St. Stephen, NB

ANIIU Des prix, bourses et subventions disponibles pour 2016/2017

Des prix

L'excellence en infirmiers et soins de santé mérite reconnaissance. En célébrant les réalisations des infirmières dans les quatre domaines de pratique, la compréhension des soins infirmiers est élargi et une image positive est renforcée. Le programme des prix d'excellence d'ANIIU permet aux infirmières d'honorer leurs collègues pour leurs contributions exceptionnelles et pour démontrer l'excellence en ce qui concerne les normes de pratique des soins infirmiers.

Les prix disponibles sont:

- Prix d'excellence dans l'administration des soins infirmiers d'urgence
- Prix d'excellence dans l'éducation des soins infirmiers d'urgence
- Prix d'excellence dans la pratique des soins infirmiers d'urgence
- Prix d'excellence dans la recherche en soins infirmiers d'urgence

Les formulaires de candidature d'attribution doivent être envoyés à awardsbursaries@nena.ca

Date de tombée annuelle pour la soumission est 31 mars

Bourses

L'ANIIU reconnaît le besoin de faire la promotion l'excellence des soins d'urgence et donc fournira l'assistance financier à ses membres. L'ANIIU planifiera une quantité prédéterminée de l'argent dans le budget, jusqu'à 400\$, pour le soutien de l'éducation continue dans le mandat de faciliter un haut niveau de soins aux patients en cas d'urgence partout au Canada.

Tous les membres de l'équipe de soins infirmiers d'urgence sont admissibles aux fins d'examen, y compris le personnel infirmier, les gestionnaires, les éducateurs et les infirmières praticiennes.

Annuellement, le 1 avril, le nombre de bourses disponibles pour être attribué sera déterminé en fonction du nombre de membres inscrits de l'ANIIU dans chaque province. Une bourse annuelle sera disponible au Conseil d'administration de l'ANIIU, et une autre bourse annuelle sera disponible pour les membres indépendants inscrits de l'ANIIU.


Il y a une bourse chacun pour la bourse Margaret Smith Paediatric Memorial et de la bourse Debbie Cotton Memorial. Chaque bourse a une valeur de 500\$.

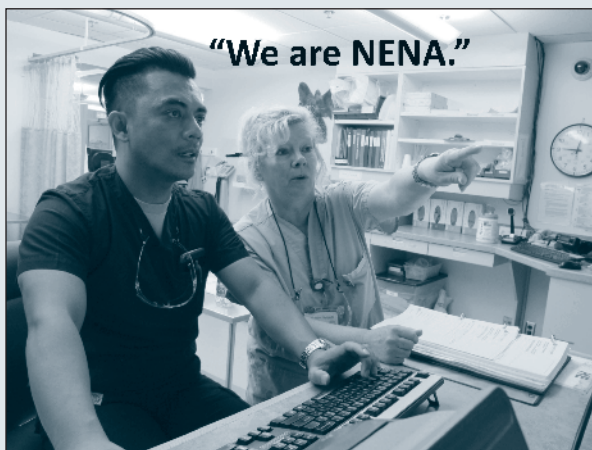
NOUVEAU—Ce sont cinq bourses, chaque pour 100\$, pour les membres écrivent leurs Certifié(e) en soins d'urgence (Canada) [CSU(C)] avec l'AIIC. Ce sont aussi cinq bourses, chaque pour 100\$, pour les membres renouvellent leurs CSU(C).

Les dates de tombée annuelles de ces bourses sont le 31 mars et 1 septembre.

Subventions

Une subvention de recherche annuelle de l'ANIIU est disponible pour tout membres participant en recherche courante en relation aux infirmiers d'urgence au Canada.

Les demandes remplies accompagnées de tous les documents requis doivent être soumis à votre président provincial et/ou awardsbursaries@nena.ca à, ou avant la date tombée. 



Vincent del la Cruz, RN, and Arlene Graham, RN,
Regina, Saskatchewan



Sheila Swerid, RN, Regina, Saskatchewan



National Emergency Nurses Association
Leaders in Emergency Nursing

Save the date: June 2-4, 2017

Find The Edge! NENA 2017

Prince Edward Island

Watch the NENA Website for Registration Info!

- High Fidelity Simulation
- Disaster Gaming
- Rural Emergency Nursing
- Trauma
- Massive Transfusion Updates
- Interactive Activities!
- Ventilators in the ED
- Newest Micro-organism threats
- Pediatric Emergency Medicine
- RCMP Experts on Drugs on the Street

Don't forget to Kitchen Party!

**2017-Canada's register for the East Coast 150th
at the birthplace of Confederation!**



NENA Conference 2017

Fellow Emergency Nurses,

NENA-PE is delighted to be hosting the NENA 2017 National Conference. The theme is 'Finding the Edge.' Emergency nurses were challenged to present abstracts containing cutting edge topics in emergency care. Indeed, the challenge was accepted and the conference committee has an amazing choice of presenters. The conference presenters will give insight into our diverse nursing practice and ignite (or re-ignite!) enthusiasm and love of the best job in the world.

Have you lost your passion for emergency nursing? Are you a new grad struggling in a busy environment? An educator or nursing leader who wants to connect with front-line nursing? This is the conference to attend.

Don't forget to register for the East Coast Kitchen party! An evening with emergency nursing peers in a fun and engaging environment, and one never knows where a lobster may show up!

2017 is the 150th anniversary of Confederation. Charlottetown is the birthplace of Confederation and there will be a lot of activities in the province. Watch the NENA website for special activities and links to the celebrations.

We have some great topics planned including Ventilators Made Easy for ED Nurses, What's New for the Hemorrhaging Patient, Disaster Plans Gone Well-Tales from the Boston Bombing, New Techniques and Theory in Trauma, Pediatric Emergencies, Various Mental Health Topics, Medical Simulation, Disaster Gaming, Rural Emergency Nursing, and more! We have an expert from the Chief Public Health Office, Experts in Disaster Medicine, Royal Canadian Mounted Police, Nursing Leaders, Frontline Nurses, Educators and Physicians and a few surprises!

Watch the NENA website for the registration materials and register early if you are interested in one of the limited simulation seats.

See you in June!

April Mills, BScN, RN, ENC(C)
NENA Conference Chair 2017
NENA-PE Director of Education

Provincial reports

Hello from BC!

Fall has crept in with crisp air and buzzing emergency departments. Volumes continue to increase and congestion remains an ongoing issue.

With rising congestion, ambulance off-load wait times have hit the radar in a big way for many communities. Many EDs in partnership with our BC Ambulance partners have been tasked with finding creative solutions for offloading our ambulance patients in a more timely fashion. While incredibly challenging at times, we know the payoffs are also incredible when we can get our paramedics back to the streets where they need to be.

Fentanyl has sustained its position as a leading health crisis in BC with numbers of deaths continuing to mount, as the year progresses. In response, many EDs have started or are trialing Take Home Naloxone programs. This crisis has challenged personal belief systems and our society stigmas around issues of homelessness and mental health, but has also crept into the centres of our homes, affecting our children, friends and families. Kudos to all the ED nurses who are meeting this difficult challenge head on.

Electronic Medical Records have been rolled out successfully in many BC EDs, including EDs across Island Health and now Interior Health. Vancouver Coastal and Providence Health are also now working towards a similar model.

Our ENABC board looked forward to a shared conference with our Washington ENA partner that has, unfortunately, been cancelled, so we are now working towards alternate plans for our annual AGM.

Work also continues in recruitment of members and emerging ideas for the year. The board has several positions turning over this fall. We are so grateful for all the work our outgoing board members have done and are looking forward to welcoming our new board!

**Kind regards,
Cassi Gray, BSN
ENABC President**

NENA-Alberta

As we move into the cooling season of autumn our 324 members continue to be represented at the provincial level by nine regional representatives. These regional reps have done a remarkable job of keeping the NENA-AB executive informed of the needs and accomplishments of Alberta emergency nurses and they faithfully spread the information about NENA to their respective areas. Most emergency departments are moving into the fall getting ready to gear up for continued educational opportunities for the staff, such as ENPC, TNCC, ACLS, and PALS, plus a variety of conferences around Alberta.

Our annual AGM/Meet in the Middle Conference will happen in Red Deer (pretty much the middle of Alberta) on October 21. Our theme this year is “Change with the Times” with presentations on Changing Perspectives—a nurse speaks about being a patient; Leaders as Change; Sexual and Gender Minorities in Healthcare and skill stations in the afternoon. We are all looking forward to nurses from all over Alberta coming together.

The NENA-AB executive is excited to present at the AGM our proposal for a “Disaster Relief Fund” and the plan to “Adopt a Village” in a developing country where our own NENA-AB nurses are already present. Our vision is that NENA-AB would have an expanding appreciation for global nursing and healthcare.

November 21–23 will be our first EPICC “train the instructors” and EPICC course. We have had an overwhelmingly enthusiastic response from the membership resulting in a full course and a waiting list. PrnEducation will be giving us support and leadership as we do our first round of training the instructors. We invited nurses from all areas of Alberta to be part of the instructor training so that we will have a good base of instructors in all areas of the province. We are very excited for the launch of EPICC in Alberta.

I feel honoured to be the voice of such a dynamic and committed group of nurses that make up NENA-AB.



**Respectfully,
Jean Harsch
Provincial Director
NENA-AB**

Greetings from Saskatchewan!

My name is Tayne Batiuk and I am the current President of the Saskatchewan Emergency Nurses Group (SENG). I am really excited to be part of this group, as we are working on revitalizing it once again after being dormant for a number of years. We have an active working group of emergency nurses from the province who are committed to being part of this initiative, and to seeing SENG grow in membership so that nurses from across Saskatchewan can link together to discuss challenges, concerns and successes of our members! We are really excited to have the opportunity for our Education Day and Annual General Meeting (AGM) here in Regina, on October 20, 2016. We have an exciting line up of topics and speakers for this session and are looking forward to getting together with emergency nurses for a day of learning and networking. As fall begins, we start to see increasing numbers of requests for courses for TNCC, ENPC, ACLS, PALS and CTAS. There continues to be much interest from our membership in ongoing education initiatives.

Some of the major governmental initiatives for this year include looking at barriers to reduce challenges to moving patients through the emergency department (ED). There is commitment from government to try to address things like mental health and addiction gaps, as well as hospital overcrowding, through a more systems-based approach. The concern of lengthy ED wait times, bed blocking, and high capacity are not new knowledge to ED nurses, however, there is interest from the province in attempting to work to assist with change going forward.

One of the most exciting educational opportunities on the horizon is the introduction of the new Advanced

Certificate of Emergency Nursing that is being offered through Saskatchewan Polytechnic! This program is for registered nurses who want to expand on their current knowledge base and skill set to be able to work with varying health issues in the high-paced world of the ED. This program takes place over 15 weeks. It begins with 10 weeks of online theory courses building on current knowledge base regarding necessary concepts. Following the theoretical components is one full week of lab simulation scenarios, followed by four weeks of clinical practicum. The online theory portion of the emergency nursing program allows for the practical application of knowledge and technical skills in a simulation lab preparing the nurse for the practicum clinical experience. There will be four intakes each academic year for registered nurses to apply.

Emergency nursing is thriving in Saskatchewan, and we will commit to continue to invigorate and enhance SENG to meet our current members' needs and attract even more members to join.



**Tayne Batiuk,
President
SENG**

Emergency Department Nurses Association of Manitoba

The winds of change are happening in Manitoba, as fall breezes in and the leaves on the trees change colour. Emergency nurses across the province continue their dedicated work making a difference for patients 24/7 no matter what the weather or the season.

After many years of NDP leadership, a new Progressive Conservative government was elected in Manitoba in April this year. During the provincial election campaign, the new government was clear that an immediate priority would be to undertake a sustainability and innovation review to improve the efficiency and effectiveness of the health system in Manitoba and to identify opportunities for improvements to ensure the long-term viability of the system into the future.

Last month, the government issued a Request for Proposal to identify an external consultant to undertake this review. The review will assess spending against three criteria: economy, efficiency, and effectiveness. In the first phase of the review, the consultant will establish a framework for evaluating spending and will consult with leaders within the health system to assist in identifying opportunities for improvement. A number of areas will be identified through this first phase for further investigation. In phase two, those areas of further investigation will be the focus. The consultant will provide concrete recommendations with implementation plans, timelines and estimates of the savings projected as a result of successful implementation. This process will undoubtedly bring some significant changes to segments of our current healthcare system in Manitoba.

Rural facilities across the province continue to struggle to staff emergency departments with physician coverage. During times that lack physician coverage in these rural EDs, ambulances are diverted to other rural or urban centres where there continues to be physician coverage. Emergency department nurses become the sole providers of care during this time. They initiate care through Nurse Initiated Standing Orders to patients who present in order to manage their care until there is physician coverage. Many facilities no longer have telephone access to a physician providing 'remote direction' to nurses during those times when there is no physician on site, therefore sporadic closure of several of the Interlake-Eastern RHA facilities has been necessary during those times. Nurses must assess patients who present during these hours of closure and call 911 if necessary. Rural emergency nurses continue to be the backbone of the rural healthcare system within the province of Manitoba.

The Winnipeg Regional Health Authority (WRHA) continues to work on targets for patient flow and wait times in the ED. According to the CIHI data, the WRHA continues to lag behind the EDs across the country in terms of these indicators. The WRHA senior leadership is committed to working towards goals to change this; incorporating regional, site, and program level operating plans and addressing fundamental system-wide issues that affect emergency department workflow.

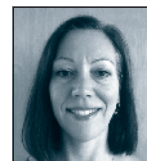
Susan Alcock, RN, BScN, Manitoba Stroke Strategy Acute Care Coordinator, has established TeleStroke-Hyperacute in Thompson, The Pas, Dauphin and Brandon. TeleStroke brings the stroke expert to the patient in rural and remote areas of Manitoba by accessing the neurologist via TeleHealth. The goal is to establish TeleStroke-Hyperacute at every rural hospital in Manitoba that has a CT scanner. Implementation of hyperacute stroke care has been made possible by developing stroke protocols and providing education for medical and nursing staff.

Holly Bekkering, RN, BN, presented to EDNA members in June for the spring meeting on "Stress in Emergency Nursing" held at the College of Registered Nurses of Manitoba. The spring meeting was available to rural members via WebEx and Teleconference lines to enable attendance without travel. Stay tuned for a fall meeting. Publicity for EDNA meetings is sent out to members via email through the NENA Webmaster. If you have not been receiving email notification of spring and fall meetings, please contact mbdirector@nena.ca

TNCC, ENPC and CTAS courses continue to be offered in all areas of the province, including many northern communities. TNCC will now be offered six times per year, as part of the WRHA Emergency Orientation for nurses new to emergency practice. ENPC will be offered twice per year within the WRHA. TNCC courses continue to be offered frequently in many of the RHAs throughout the province thanks to the dedicated course directors and instructors in all areas of Manitoba. Thank you for all of your hard work and commitment to educating emergency nurses ☺

The Emergency Department Nurses Association of Manitoba will be host to the NENA conference in Winnipeg in spring 2018. We will be looking forward to seeing you in Prince Edward Island for the next NENA conference in June 2017.

In the meantime, stay warm Manitoba Emergency Nurses! Winter is around the corner...



**Respectfully
submitted,
Marie Grandmont,
RN, BN, ENC(C)
Manitoba Director**

ENAO

Hello from Ontario to all of Canada's emergency nurses! The ENAO Board of Directors and ENAO 2016 conference committee have been completely involved with creating a 2016 educational event for emergency nurses that will meet and surpass their current learning needs. The excellent variety of speakers and topics will include the ED patient experience, Organ Donation & Recovery, chronic pain patients' treatment consequences, infectious disease challenges on our horizon, the challenges of working with refugees, ED overcrowding still? YES, bleeding disorders, best practices in blood collection, young stroke patient successes and the legal chronicles of a nurse accused.

TNCC, ENPC, ACLS and PALS continue to be readily available throughout our province. While the administration of CTAS courses in Ontario will change somewhat this fall, this important education for ED nurses will remain accessible and consistent with Canada's national standards for triage education and practice.



Yours in Emergency Nursing,
Janice L. Spivey, RN,
ENC(C), CEN
ENAO President

NENA-NB

Where did summer go? It seems to fly by a little more quickly every year.

As I write this note, I reflect that the busy season is starting, but it seems to be starting a little earlier this year... sick patients, the elderly, waiting more than 24 hours to be transferred to an inpatient room. EMS calls in, our stretchers are full, patients are pulled out into the hallway and new patients go into the room for assessment... on it goes. Providing quality care for acute admissions, as well as the patients presenting to our emergency departments is very challenging and stressful.

How and when are we going to fix the overcapacity issues in our facilities? The talk is of patient-focused care... The overcrowding is not only an ED problem, it goes deeper. It is more complex

than we realize. We need the government at the table, speaking with primary health care providers, understanding that nurses and nurse practitioners, through collaboration and teamwork, can ease the burden on the health care system, provide patient-focused care and improve the health of patients.

Education

TNCC is offered throughout the province on an ongoing basis. Trauma New Brunswick with Horizon Health Network and Vitalité support this initiative.

ENPC is offered two to three times per year in Saint John and Moncton.

CTAS is offered around the province in French and English, as needed, as well as CTAS instructor courses as needed.

NENA NB continues to promote emergency nursing as a specialty, challenging and encouraging ER nurses to write their certification exams.

Education through simulation is starting back after the summer break. Education is provided to RNs, RTs, LPNs and MDs in our rural hospitals through case-based simulation. It is great to see positive outcomes from the collaboration between MDs, RTs and nursing! Education through simulation improves skills, communication and processes.

New Brunswick Health Authorities, Horizon Health Network and Vitalité with the Department of Health in collaboration with University of New Brunswick and Université de Moncton support a provincial Critical Care Nursing Program, which offers two streams: Emergency care and critical care. The program is three months in length and is offered four times per year. It provides opportunity for continued professional development to nurses across the province in both French and English. This program is open to the novice nurse who wants to work in the emergency or critical care area. Applications are received through UNBCEL and Université de Moncton. This initiative has been in place since 2002 and is an excellent example of collaboration.

Membership

Our membership has increased to 62 members. We continue to promote membership at all educational courses! We have 54 nurses in NB who hold their ENC(C).

NENA NB is sponsoring two ER nurses to attend the 2017 NENA conference in Charlottetown, PEI. We hope to see a large number of NB nurses attend!

As NENA's voice grows, hopefully we can increase awareness of the problems faced by ER nurses. These issues impact patient care! These issues impact nurses! Emergency Nurses make a difference!

Looking forward to the 2017 NENA conference!



Respectfully submitted
Debra Pitts, RN, BN,
ENC(C)
NENA-NB Director

SANE Programs in Horizon Health in NB

The Sexual Assault Nurse Examiner Program is a nursing-based approach to caring for victims of sexual assault and intimate partner violence. The program is part of the emergency department and provides care to all ages. The primary purpose is to ensure consistent, uninterrupted care and supportive treatment to the victim and their families. Horizon Health has established programs in Moncton (2004), Saint John (2006), Fredericton (2014), and Miramichi, which opened a program this year.

A Sexual Assault Nurse Examiner (SANE) is a registered nurse who has received special training so that she/he can provide comprehensive care to sexual assault victims. Saint John has nine SANE, Fredericton and Moncton both have six SANE and Miramichi has five SANE. Training for more SANE positions has been scheduled for October 2016 for Fredericton, Saint John, Moncton, and Miramichi.

With the development and implementation of the programs across Horizon, a new standardized approach is being taken. Policies and procedures are being developed at all locations and levels. The support of hospital

administration and staff facilitates the success of these programs by assisting with the legal and medical protocols. The Sexual Assault Response Team (SART) is a community-based team that coordinates the response to victims of sexual assault. The team may be composed of SANEs, sexual assault victim advocates, law enforcement, prosecutors, social workers, and any other professional with a specific interest in assisting victims of sexual assault. SART teams are playing an important role by supporting the development of the SANE programs in Saint John and Fredericton.

The SANE program is open 24 hours a day in Fredericton and Saint John, with Miramichi and Moncton planning to achieve 24/7 coverage by early 2017. The program has reduced the workload for the emergency department physicians, has decreased treatment delays, and has created a safe environment for victims. Emotional, physical and psychological care is provided, while completing medical and forensic examinations. Fredericton works in collaboration with the Fredericton Sexual Assault Crisis Centre. An advocate from the centre is notified when a patient presents to the emergency department. They provide support and comfort during the examination and throughout the process. Saint John pediatricians are active in providing support and additional resources for pediatric cases. The SANE role advocates for the patient by presenting them with information, while giving them the power to decide how they wish to proceed. All patients have an option to receive medical and/or forensic care and they decide whether they report to police. Our commitment to providing best patient care will continue to grow with program development.



**Laura Astle, BN, RN,
Interim Sexual Assault
Nurse Examiner
Coordinator for
Fredericton and Saint
John**

NSENA

Hello from beautiful Nova Scotia. We hope that everyone had a lovely summer and we are looking forward to getting back into the swing of routine and education that the fall brings for our province. The QEII Emergency Nursing Education Committee is holding its education day on October 21 this year, along with the IWK Education Committee having its pediatric education that day, as well. Both of these events are held in Halifax and I know they will excel in their topics presented. I have been lucky enough to attend both of these events yearly and they are sure to never disappoint. This year I will be attending the QEII education day and we plan to draw from our NSENA members who are attending the education day to cover the cost of registration for the NENA Conference 2017 in PEI. We are very excited that the conference will be on the east coast this year and hope to have many in attendance. NSENA is looking forward to what hopefully will be an exciting year in the world of emergency nursing and working towards building a healthy community amongst our emergency nurses in the province.



**Respectfully
submitted,
Mary Spinney, BScN,
RN, ENC(C)
Director NSENA**

NENA-PE (formerly PEIENA)

Prince Edward Island is the host for the NENA 2017 Conference. Yeah! We are very enthusiastic about the conference that will be held at the Rodd Charlottetown on June 2-4, 2017. Strategically dated during the spring lobster season? Perhaps! Springtime is beautiful in PEI, and it will be especially fun in 2017, the 150th Anniversary of Canada. Where else to celebrate than at the birthplace of Confederation? NENA-PE members are very enthusiastic about hosting our Canadian colleagues, showing off our beautiful landscape and hopefully recruiting you to our East Coast Kitchen Party, a social event during conference days.


Change seems to be the theme for this biannual report from NENA-PE members. PEI emergency departments have

undergone a model of care transition. Leaders have chosen a registered nurse primary care model with support from pharmacy technicians, the cardio-respiratory departments and, in some facilities, dedicated persons for stocking and a re-focus on the basics of nursing care. The RNs struggled with the loss of the team nursing model. The members believe they have risen to the challenge and have been continuously learning and refining the art of primary nursing in the emergency observation units.

TNCC, CTAS, ACLS, NVCI, Basic Coronary Care, and BLS-C continue to be offered on a regular basis. Provincial workshops will be offered this fall including a Trauma Laboratory Day, a Forensic and Health Law Study Day, a Specialty Workshop and the Emergency Respiratory Workshop. Mental Health First Aid will be offered specifically for emergency care providers, including nursing, security, respiratory therapists and ECG technologists.

Earlier this year, the province elected to provide standardized scoop stretchers and pelvic binders for the emergency departments and EMS units. The transition from long spine boards for transport was smooth. The standardization has made for simpler training exercises, as education resources with EMS can be shared and continuity of care transition is simplified.

Our departments have made some amazing gains, including standard processes for the automatic delivery of blood products during hemorrhage, revision of trauma team activation plans, a provincial project for early recognition of sepsis and a provincial plan for medical simulation. At the heart of the changes has been our strong and dedicated nursing staff.

NENA-PE members can't wait to meet more of our nursing friends at the 2017 conference. Lots to see and do in PEI—come early or stay late—there may be a whale or a sandy beach awaiting your attention! 

**Respectfully,
Dawna Ramsay
Provincial Director NENA-PE**