Interview with Jan Calnan

Janet Calnan, RN, BSN, ENC(C), is currently Coordinator of the South Island (SI) Forensic Nursing Services Program within Island Health, B.C. She is also an instructor in Forensic Health Sciences Option at the British Columbia Institute of *Technology. Janet has decades of experience* as an emergency nurse and forensic nurse at her facility. She has held many offices in the Emergency Nurses Association of B.C. and National Emergency Nurses Association (president from 2012–2016), as well as being a founding member of the Canadian Forensic Nurses Association (2007). Her *dedication to the specialities of emergency* and forensic nursing has made her an outstanding role model for both new and *experienced nurses in both fields. In the* following interview she gives us an insight into her most interesting and challenging career.

What are your current professional roles?

Currently, I work part-time as the Forensic Nurse Program Coordinator for the South Island (Vancouver Island Health Authority). I also hold a casual position for the Emergency Department at Victoria General Hospital, where up until two years ago I worked full-time as a clinical nurse leader (CNL).

I know you have been an emergency nurse for decades, what took you to emergency and kept you in emergency nursing?

I have always loved emergency nursing. I was very involved in high school with St. John's Ambulance and I guess that was the starting point of my journey in emergency care. When I was in nursing school we had to do a two-month rotation through the emergency department and that is where I was hooked, I knew then that was where I wanted to work. Of course in the 1970s the nurses who worked in the ED had to retire before there was ever a vacancy. There was no issue in those days of retention, so I graduated and worked in medical/surgical units for a few years before I could 'get in the door.' Having those years as a med/ surg nurse only made me better as an ED nurse. I love the variety, the chaotic environment and the unpredictability of the ED, no two days are ever the same. I love to critically think and use all of my knowledge to bring the best care to the patient. I want to give them the kind of care I would want my family to have if ever they were patients in the ED.

You have a varied nursing background; can you tell us how you came to be doing what you are doing now?

I have been an instructor for St. John's Ambulance and was a member for many years and also volunteered as a nursing assistant in a nursing home prior to going into nursing. After my graduation from St. Joseph's School of Nursing I went to the Fraser Valley in the province of B.C. and worked on the orthopedic floor and then returned to Vancouver Island, worked in a variety of floors such as urology and EENT. I finally got into emergency nursing in 1980 after many years of waiting and, while there, I held many positions such as clinical nurse, charge nurse, nurse manager, educator and finally clinical nurse leader before I retired in 2013 from full-time. I then went back to the ED as a clinical nurse on a casual basis. Two years ago a position came up in the Victoria area for a Coordinator of the SI Forensic Nurse Examiner (FNE) Program and I was successful in getting this position. I had been a FNE since 1999 and was helping the coordination of the program 'off the side of my desk' for the last 10 years, so took this position and am there to date. Forensic nursing and emergency nursing are a natural fit. I love being able to meld the legal portion and medical portion together and teaching other staff members to think forensically in everything they do.

Tell us about your latest project: the Victoria Sexual Assault Clinic in Victoria

One of my visions in the last 17 years as a FNE/SANE nurse is to better serve the patients who have suffered from sexual violence. As you know, there are many barriers to this group of patients coming to the ED or reporting and so the Victoria Sexual Assault Centre with collaboration from Vancouver Island Health Authority (VIHA), and local



police departments were able to open a freestanding Sexual Assault Clinic (open 24/7). Now patients no longer have to go to sit in an emergency department (must be medically cleared by FNE) and here they will be met by a FNE and a volunteer from the Victoria Sexual Assault Centre. The patient will receive care and treatment, counselling and police contact can be provided if they so desire. Sort of like a one-stop shop. We are part of the Victoria Community Response Centre.

How do you think emergency nursing links with forensic nursing today in Canada?

I think that forensics and emergency are linked together as we try to mesh the legal and medical systems together. Forensics is not just sexual assault, but we see forensic patients every day in the ED such as MVCs, assaults, gunshot wounds, elder abuse, and child abuse. We need to think forensically.

You work with vulnerable populations, what inspires you to do so?

I want the vulnerable patients to know someone cares and is listening to them. I want to treat people like I would like to be treated. Everyone deserves care and respect.

What do you like most about being a nurse?

I love caring for people and making a difference in their lives. In emergency nursing, we make a difference one patient at a time.

What is your favourite "down time" activity?

I like to garden, sometimes pulling those weeds can be very cathartic.