

NURSING IN THE

Sarnia RN offers much-needed treatment for Hepatitis C

RNAO member **Sonja Gould** is providing much-needed treatment for Sarnia-Lambton residents with Hepatitis C. Once a week she sees patients who, until last fall, were forced to travel to London for consultation and treatment. Many fell through the cracks because they couldn't find a ride or afford the trip, the nurse manager at the Bluewater Methadone Clinic says. "It's a service that's needed here in this town," she told the *Sarnia Observer* (Feb. 24). Gould began offering treatment to about 30 methadone clinic patients when it was revealed through blood work that a significant number had Hepatitis C. Beyond this group, she says there are hundreds, if not thousands of people living with the virus in her region, which is why she moved to treat patients in the broader community. Treatment includes daily antiviral pills, weekly injections and weekly face-to-face meetings to check progress. Some of the London clinics that her patients used to visit only taught patients to self-inject, and met with them every three months.



RN Sonja Gould has started a Hepatitis C treatment program for people in Sarnia who would otherwise have to travel to London for care.

PHOTO: TYLER KULJA/SUN MEDIA

Task force aims to stop meth use

Public health nurse and RNAO member **Denna Leach** is helping to combat the growing problem of methamphetamine use and trafficking in Grey-Bruce. The Owen Sound RN addressed a community meeting on March 21 to discuss the dangers of the highly addictive, relatively cheap drug. Leach is a member of the Grey Bruce Crystal Methamphetamine Task Force, which is calling for a concerted public effort to stop meth use. The group of police, paramedics, health-care providers and social workers hopes to establish a

Meth Watch program to better control the sale of over-the-counter products – such as cough, cold and allergy medicines – used to make the drug. (*Owen Sound Sun Times*, Feb. 22)

Seniors face roadblocks, financial woes while attempting to access elder care

In February, a *Toronto Star* investigation found that Ontario's \$1.1 billion *Aging at Home* strategy is failing seniors. RNAO member **Cathy Szabo**, Chief Executive Officer for the Central Community Care Access Centre, defended this claim by

explaining that funding limits leave seniors to make tough decisions about their care. "Does every individual resident of Ontario think that they are entitled to have a personal support worker come to their home when they get old, three times a week to get their house cleaned and have a bath?" Szabo asked. "...Does the publicly funded health-care system have the ability to deliver that...and should (it)?" (*Toronto Star*, Feb.19). The *Star* investigation revealed that thousands of aging seniors who do not receive home care are ending up in hospital.

Szabo went on to say that for

each high-needs senior the CCAC serves, another 20 with low or moderate needs are declined. Seniors are also facing long wait lists and backlogs when they search for a retirement home bed. As a result, many are left stranded in hospital. RNAO member **Nancy Jacko**, Vice-President of the medicine care centre at North Bay and District Hospital, said her facility charges the allowable daily fee of \$53.23 to those awaiting a long-term care bed. She adds, however, that the fee is only charged to those who can afford it. In March, several hospitals in southern Ontario

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BY STACEY HALE

were ordered to stop threatening elderly patients with daily charges of up to \$1,800 to free up hospital beds. (*North Bay Nugget*, March 3)

Province must rethink nuclear plans

RNAO Executive Director **Doris Grinspun** joined representatives from Greenpeace to urge Ontario's political leaders to scrap plans for new nuclear reactors in the wake of a disastrous earthquake in Japan that damaged that country's Fukushima Daiichi nuclear power plant and raised health concerns for those living in the region north of Tokyo. During a media conference at Queen's Park in March, Grinspun called on Premier Dalton McGuinty to reconsider plans to invest \$33 billion in the Darlington nuclear station, 70 kilometres east of Toronto. Nurses "are increasingly concerned about the staggering health, environmental and economic costs of nuclear power," she told the *Toronto Star*, CP24-TV, CBL-FM Toronto, *Toronto Sun*, CBLT-TV



PHOTO: SJOERD WITTEVEN/MARKHAM ECONOMIST & SUN

Executive Director of Evergreen Hospice Markham-Stouffville, Jan Pearce, says there's a troubling lack of funding for Ontario hospices.

Toronto, Canadian Press, CBC.ca (March 17). RNAO and Greenpeace also asked the province to indefinitely delay hearings on the building of new reactors at Darlington. For more information on RNAO's stance on nuclear power, see Policy at Work (page 26).

Hospice funding needed

RNAO member **Jan Pearce** spoke out earlier this year about the troubling lack of funding for Ontario hospices. Executive

Director of Evergreen Hospice Markham-Stouffville, Pearce says her facility (along with six others in York Region) hasn't received an increase in funding from the Central LHIN since 2008. The hospice has had to cut staff hours by about 20 per cent. "All of the hospices are in the same boat. None got re-allocation funding," she told *yorkregion.com* (Feb. 14).

Rising C-section rates a growing concern

In March, RNAO member **Deborah Snider** spoke with the *Waterloo Region Record* about Ontario's caesarean section (C-section) birth rates. According to a multi-year study on women's health, 28 per cent of all hospital deliveries in 2007 were done by C-section. The study, referred to as the POWER Study, released its latest chapter in February 2011, which was authored by Echo, an agency of Ontario's Ministry of Health and the Institute for Clini-

cal Evaluative Sciences. "The concern is C-section is a major surgery," said Snider, nursing manager of the women and children's health program at Cambridge Memorial Hospital (March 1). She says rising C-section rates are a concern worldwide, and although they are necessary in certain situations, experts say the rate could be lower to avoid unnecessary risk to healthy mothers and babies.

The "journey" of diabetes

Starting April 13, RNAO members **Trixie Barrow** and **Donna Ferguson** are "setting sail" on an eight-week journey to help Stirling and Belleville area residents learn how to manage their diabetes. The Gateway Community Health Centre nurse practitioners are working together with a nutritionist and RN to educate patients about their chronic condition. Each week, patients will learn health information through "excursions" including: flying to complication prevention; cruising to healthy eating; a sightseeing tour of fat and fibre; and more. "When clients are first diagnosed with diabetes it is overwhelming for them and although we offer an initial education, (that) can be overwhelming in itself," Ferguson told the *Stirling EMC* (March 3). Participants who complete all eight weeks will be given "passports" and information booklets to help them better manage their diabetes.



Speaking to media about nuclear power are (L to R) Greenpeace Energy Analyst Keith Stewart, RNAO Executive Director Doris Grinspun, and Greenpeace Nuclear Analyst Shawn-Patrick Stensil.

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OUT AND ABOUT

STUDENTS WALK TO RAISE AWARENESS ON WORLD WATER DAY

RNAO student members from the University of New Brunswick-Humber College and Ryerson University walked with family, friends and concerned citizens on March 20 to raise awareness of the need for clean water. The Toronto event, which marked World Water Day, took the group six kilometres from Queen's Park to Harbourfront Square and back.



HARTFORD RNs VISIT RNAO

The University of Hartford College of Nursing (Connecticut) is RNAO's first-ever international, academic Best Practice Spotlight



Organization. Katharine Kranz Lewis, Hartford's Director, Center for Public Health and Education Policy (front row, far left), will lead the project from the U.S. She and several nurses from the university

visited Toronto in March to learn more about the association and about evidence-based practice.

ALGOMA CHAPTER FUNDRAISES FOR STUDENT AWARD

RNAO's Algoma chapter hosted a fundraiser for the *Marion Marks Nursing Student Bursary* on Feb. 24. Sault College will hand out the award, valued at \$300, to a nursing student who is also a member of the association. The bursary is sponsored by RNAO and named after a Sault College nursing professor who died tragically in an automobile accident in 2005. (L to R) RNAO Region 11 board member Paul-André Gauthier, and local executive members Stephanie Blaney, Ann Marie Sutherland, Angela Hyden, Jennifer Flood, Tyler Mancuso, Debbie Shubat and Pierrette Brown.



New dress code angers RNs, raises questions about image

Nurses at the Ottawa Hospital were outraged that a new dress code forbid them from wearing scrubs and uniforms with cartoon characters or other prints. RNAO member **Ginette Lemire Rodger**, the hospital's Chief Nursing Executive and Senior Vice-President for professional practice, said "these changes have been made based on the hospital's image, and the patient's need to identify who is working for them," (*National Post, Ottawa Citizen*, Feb. 7). After some controversy, the hospital conceded nurses will be allowed to wear patterned scrubs, but must wear plain, white lab coats on top. The lab coats must clearly state the nurse's title and must be worn at all times when nurses are outside their usual units.

On Feb. 21, RNAO member **Wendy Barkley** wrote a letter to the *Ottawa Citizen* explaining why she supports the new dress code at the Ottawa Hospital. The following is an excerpt from her letter.

Nurses must dress the part to be respected

I was intrigued by the articles in the *Citizen* regarding The Ottawa Hospital's forthcoming nursing uniform policy. As a nurse, I struggle with the public's perceived image of nurses. In the days of Florence Nightingale, the image of the nurse was one of a self-sacrificing saint or servant. Then we progressed to the 20th century when nurses were perceived as sex symbols, as represented by

depictions of Betty Boop or the "naughty nurse." The image of the nurse has moved away from the starched white cap and dress to the complete opposite end of the spectrum with casual cartoon character plastered scrubs or even jeans and a T-shirt on dress-down days at some hospitals. Karen Donelan of Harvard Medical School conducted a study in 2008 of the public perception of nursing careers and found only eight per cent of the public considered RNs professionals. Could nurses be deemed non-professional due to their attire? The Ottawa Hospital is basing the policy on professionalism and is not the first hospital to make the bold move of implementing a uniform policy for nurses. This new uniform policy is an opportunity for nurses to change the public perception of nurses.

Funding for late-career nurses in Cornwall

RNAO member **Lynn Hall**, Vice-President of Clinical Services and Chief Nursing Officer at Winchester District Memorial Hospital, says every penny of her Late-Career Nursing Initiative funding will be well spent. In March, the hospital learned it will receive provincial funding to allow nurses over 55 to spend more of their work time in less physically demanding nursing roles. The goal of the initiative is to retain late-career nurses, allowing them to transfer their knowledge to novice RNs. "We're pretty excited about receiving funding again this year," she told the *Cornwall Standard-Freeholder*. (Mar. 4)