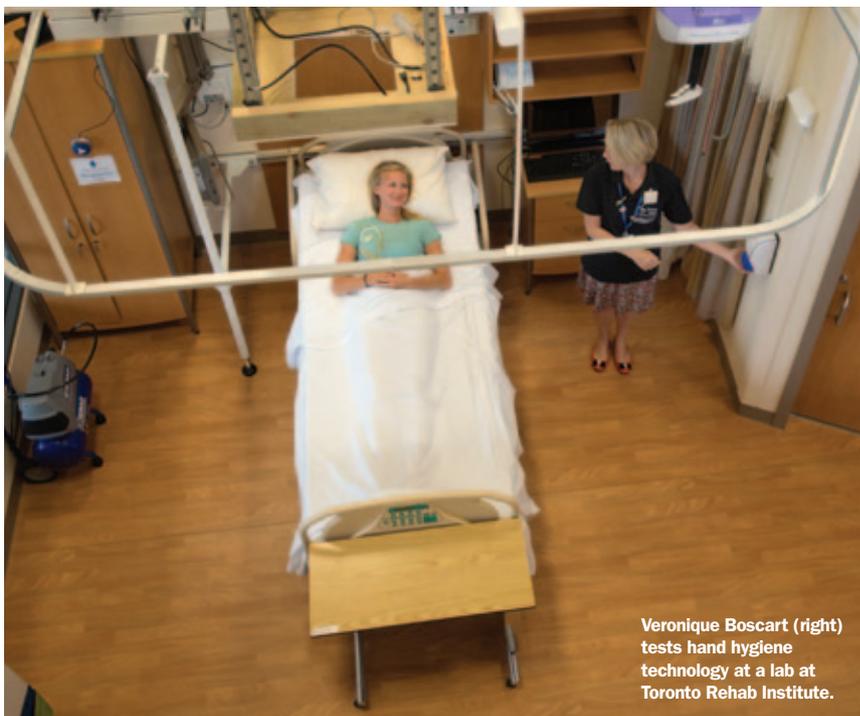


# NURSING IN THE

## Sensors detect dirty hands

Nurses and other health-care providers at the Toronto Rehabilitation Institute were part of a high-tech study in 2012 that involved badges equipped with infrared signals to monitor hand-washing compliance. Initially, the badges simply recorded information about hand washing through sensors in patient areas. Eventually, they were programmed to buzz whenever a health-care professional entered or left a patient area without washing their hands. **Veronique Boscart**, a research scientist at the Kitchener site of Conestoga College, and an RNAO board member, helped to design and evaluate the new monitoring system. “I look at it as similar to a medication error,” she says. “If I don’t wash my hands, it’s the same as giving the wrong drug to a patient. A medication error would be caught...but not (when I’m not) washing my hands. It’s thought of as kind of OK, it’s acceptable.” Although exact numbers are not known, it is estimated infections contracted in health-care institutions account for 8,000 or more deaths annually. Data collected after the devices were programmed to buzz show nurses on average



Veronique Boscart (right) tests hand hygiene technology at a lab at Toronto Rehab Institute.

washed their hands 6.6 of the 9.6 times per hour they should have done so. That’s a slight increase from the data collected before the devices were programmed. Boscart says the badges were created as a motivational tool to encourage better hand-washing practices, not to lay blame or point fingers. (*National Post*, Aug. 29)

## Study of social determinants reveals communities in need

**Andrea Roberts**, Director of Family Health and Health Analytics for Wellington-Dufferin-Guelph Public Health, says priority neighbourhoods in the area need more attention. “We need to reduce the disparity between high- and low-income households in terms of health,” she says, adding “...public health can’t do

this alone. We need our community partners to work with us on this.” Roberts’ comments came during a presentation to the Board of Health in September. Expanding on a report that her unit was commissioned to write by the Waterloo Wellington LHIN a few years ago, Roberts offered a breakdown of vulnerable communities based on eight social determinants of health and four health outcomes. Income, food insecurity,

housing, employment, education, immigration, social and community supports, and healthy child development were evaluated in small geographic areas within the health unit’s boundaries. Those areas appearing in the highest 20 per cent of the overall rank were identified as priority neighborhoods, and Roberts says she and her team will start to customize the programs offered by public health in these neighbourhoods. This,

she hopes, will improve the health and well-being of vulnerable populations. (*Guelph Mercury*, Sept. 12)

## Happy workforce, happy leader

RNAO board member and NP **Tammy O’Rourke’s** leadership style is unique because she doesn’t claim to have all the answers. In fact, she acknowledges other people have expertise that she may not have,

# E NEWS

BY KIMBERLEY KEARSEY

and lets them do their jobs. O'Rourke's experience with unrest and tension at the Belleville Nurse Practitioner-Led Clinic, and her approach to the turmoil as a leader there, were featured in a *Globe and Mail* article about how good leaders are good listeners. The financial crisis of 2008 prompted a change in the way leaders lead, the article notes. Couple this with an influx of younger workers who arrive on the job expecting a more fulfilling work experience, and it's clear a new workplace climate has emerged. Blind acceptance of the way things have always been is no longer tolerable. The catalyst for change at O'Rourke's workplace came about after she returned from vacation to find the place had exploded with animosity. "In nursing school, we learn to listen to our patients, to be accountable to them and to involve them in their plans of care," she says. "I realized that I can apply those same principles to other relationships." Instead of dictating policy to her team members, she asks for input, then acts on it. "It works because they see that they have a voice," she says. (*Globe and Mail*, July 29)

## Public health moves slow and steady with Amish, Mennonite communities

Public health RN **Karen Loney** has been working hard to maintain a relationship with members of the Amish and Mennonite communities of Grey-Bruce.

Over the past year-and-a-half, she's been building on the work of colleagues who began making inroads with these communities that are typically suspicious of outsiders. They have "a strong loyalty to their values and beliefs...I think they're very protective, as we all are, of the things that we hold dear," she says, noting she and colleagues have been "...working with them consistently and giving them the sense that we do respect where they're



coming from, and yet we want to see them optimize their health and safety in the community." Through voluntary immunization clinics, many Amish and Mennonite people meet public health nurses and begin the process of building relationships. "It's a matter of moving at the speed that the community's moving," Loney says of establishing trust. You have to "...realize it's going to be consistency and

very much driven by what the community's needs are." (*Owen Sound Sun Times*, Aug. 13, *The Kincardine News*, Aug. 22)

## Persistent wounds problematic for patients

The Canadian Institute for Health Information (CIHI) released a report in August about the prevalence of persistent, compromised wounds in just about every sector of the health system.

a program that identifies risk... and when patients are identified as high risk, we put certain measures in place," she explains. Patients are turned and repositioned regularly, she says, and the team ensures they are resting on an appropriate pressure redistribution mattress. While the experts do their best to mitigate risk factors for pressure ulcers, not all wounds are preventable, Teague adds. (*CBC News* (online), Aug. 29)

## Meddlers test new mom's patience

*This editorial for the Waterloo Region Record (Aug. 6) allows Kitchener RN Jennifer Howell to vent about meddling strangers who questioned her skills as a new mom...*

It started before the baby was even born, when I found that having the occasional cup of coffee was met with a lot of judgmental side-eyeing and at least one full-on rant from a Tim Hortons employee after having the gall to order a cup of regular tea. Fast forward to when I actually had the baby in my arms. The concerned passersby certainly stepped up their game when there was more to police than such trivial details as caffeine consumption. Irritatingly, the commentary was most often in the form of seemingly innocuous questions like, "Isn't the baby too warm?" "Is she too cold?" Comically, I once heard both on the same day. And, "Are you sure those things are

# NURSING IN THE NEWS

## OUT AND ABOUT



### RETIRED RNs TOUR SOUTH MUSKOKA

Bev McFarlane, Muskoka Algonquin Healthcare's chief quality and nursing executive (centre, in purple), and Mary Boyer, the organization's manager of inpatient services (in lab coat), greet a group of nine retired Toronto General Hospital nurses who paid a visit on Sept. 11 to the South Muskoka Memorial Hospital site in Bracebridge. They toured the emergency department, the medical/surgical floor, the family centred care unit, and the complex continuing care unit. The retired nurses were gathering in Bracebridge to celebrate the 60th anniversary of their graduating class.



### SCARBOROUGH NP-LED CLINIC OPENS

Claudette Holloway, RNAO Region 7 board of directors representative (second from right), and Maria Tse, communications representative for the association's Toronto East chapter (second from left), host the opening of the Hong Fook Nurse Practitioner-Led Clinic on Sept. 16. The clinic provides health services to the Asian community in the Scarborough-Agincourt area of Toronto. Holloway and Tse are joined (L to R) by: Soo Wong, RN and Liberal MPP (Scarborough-Agincourt); Beth Cowper-Fung, president, Nurse Practitioners' Association of Ontario; Health Minister Deb Matthews; RNAO President Rhonda Seidman-Carlson; and Poonam Sehgal, lead NP.

even safe?" was popular when I brought her out in the baby carrier. More perplexing to me was hearing, "Where are her shoes?" all the time (as an aside, is a shoeless baby some sort of red flag for inept parenting? I mean, I'm the first to admit I am far from an expert, but I can't be the only one who had no luck keeping those adorable shoes on my kid's feet). Even more insufferable were the ones who passive-aggressively voiced their concerns to the baby, "you should tell your mommy to put your hat back on."

The worst part about the comments wasn't the remarks themselves but my lack of

confidence in dealing with what I now can accurately peg as intrusive meddling. At that time, I would feel instantly anxious, wondering if maybe I was royally botching this whole mom thing. I mean, there I was, the woman who forgot to feed her goldfish more often than she'd be comfortable admitting, in charge of the care and feeding of this vulnerable human I had known only weeks, but already loved beyond my wildest imagination. Oh how I wish I had a snappy comeback for the Tim Hortons lecturer. Instead, I just let her change my order to a decaf and, feeling humiliated, hurried out the door. **RN**

## It's membership renewal time at RNAO

RNAO is 35,000 members strong. We believe every RN should belong to their professional association. Do you know a new nursing grad who isn't a member yet?

### First come, first served: limited number of free new grad memberships available

Encourage them to take advantage of our free membership offer. New grads can join RNAO for 2013-2014 at no cost, thanks to the generosity of HUB International Ontario Limited, RNAO's group home and auto insurance program since 1995. Don't delay: there are a limited number of sponsorships, and each is worth more than \$150.

To find out more, visit [www.RNAO.ca/newgradoffer](http://www.RNAO.ca/newgradoffer)

To join now, visit [www.joinrnao.org](http://www.joinrnao.org)



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