

NURSING IN TH



Safe sleep guideline highlights risks for infants

RNAO's newest best practice guideline (BPG), *Working with Families to Promote Safe Sleep for Infants 0-12 Months of Age*, has been grabbing headlines since its release in late February, particularly for information about the potential risks of swaddling infants. "There is no definitive recommendation against swaddling, but more and more hospitals are not endorsing the practice and are moving away from it," says pediatric nurse practitioner **Patricia Maddalena**, one of the BPG's panelists. Literature shows swaddling, or wrapping infants tightly in a cloth or blanket, may be linked to hip dysplasia and overheating in babies, and may be connected with Sudden Infant Death Syndrome (SIDS). Swaddling decreases arousal, which "may be associated with an increased risk for SIDS, so it may not be the best thing to wrap babies tightly," Maddalena told CTV's *Canada AM*. Because there is currently no evidence on the safe way to swaddle a baby, the guideline recommends health-care professionals caution parents about the risks. (March 5)

Babies are safest sleeping on their back in an empty crib, says nurse practitioner **Elyse Maindonald**, who led the panel. Objects like blankets, pillows and toys could potentially obstruct an infant's breathing, and should be kept away from sleeping babies, she told *The Afternoon News* on Windsor's *AM800* radio station. (Feb. 27)

Private beer sales could be harmful to Ontario's health

Ontario's convenience stores are pushing to stock their shelves with beer, reigniting the debate over private alcohol sales in the province. An Angus Reid poll commissioned by the Ontario Convenience Store Association (OCSA) found 70 per cent of

Ontarians want to buy alcohol in their corner stores, and the OCSA says competition would drive down prices. But health professionals warn this could lead to increased alcohol consumption. With that comes "...increased risks associated with alcohol, such as injuries, drinking and driving, and effects on crime," says **Evan Jolicoeur**, a public health nurse at the Sudbury and



District Health Unit. Though proponents of private beer distribution claim it would increase sales and tax revenue for the province, "the burden on the health system and public coffers would far outweigh increased revenue from taxation on alcohol," says Jolicoeur. The province has said it may "modernize" alcohol sales, but will continue with the current system, where beer is sold by the LCBO and its authorized retailers. (*The Sudbury Star*, March 3)

Nurses warn health care will suffer without more RNs

Northumberland nurses are joining the call from nurses across the province to increase nursing numbers or risk negative effects on patient care. "I think government and policy makers need to consider the impact of the reduction of nursing hours and nursing jobs in this province," says **Cindy Sandercock**, an emergency department nurse at Northumberland Hills Hospital. Ontario

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BY DANIEL PUNCH

has just 6.99 RNs per 1,000 people, as compared to the national average of 8.3 RNs per 1,000. This puts Ontario second-to-last in the country.

“It’s a provincial problem because enough hasn’t been done to protect registered nursing hours since the last nursing shortage,” says Sandercock, referring to cuts by Mike Harris’ Conservative government in the 1990s. The current Liberal government maintains it has increased the number of nurses working in Ontario, but health-care providers say RN numbers aren’t adequate to meet the needs of Ontarians (for more on this, see page 17). “Employers are simply not hiring as many RNs as they are supposed to,” says **Angela Cooper Brathwaite**, policy and political action representative for the Durham Northumberland chapter of RNAO. “If you don’t have the health-care provider to care for the patients...health care is going to suffer.” (*Northumberland News*, Feb. 13)

Exercise classes aim to reduce risk of falls

New exercise and fall prevention classes are keeping Muskoka area seniors active and independent. “We know that keeping seniors healthy, mobile and active will be of benefit to them as well as the health-care system,” says **Ryan Miller**, program manager of the North Simcoe



Muskoka Integrated Regional Falls Program (IRFP). Classes are aimed at reducing the risk of falls by promoting strength and

balance among seniors. IRFP has been hosting classes twice a week in 35 retirement residences and other locations throughout the region since September 2013. The program is provided by IRFP and the Victorian Order of Nurses, and is funded by a provincial initiative to improve seniors’ access to physiotherapy and exercise. Anyone over 55 is eligible to attend free-of-charge and without a referral. “We are really targeting seniors living in the community,” says Miller. “Those who would benefit the most are people living in their home.” (*Orillia Packet and Times*, March 12)

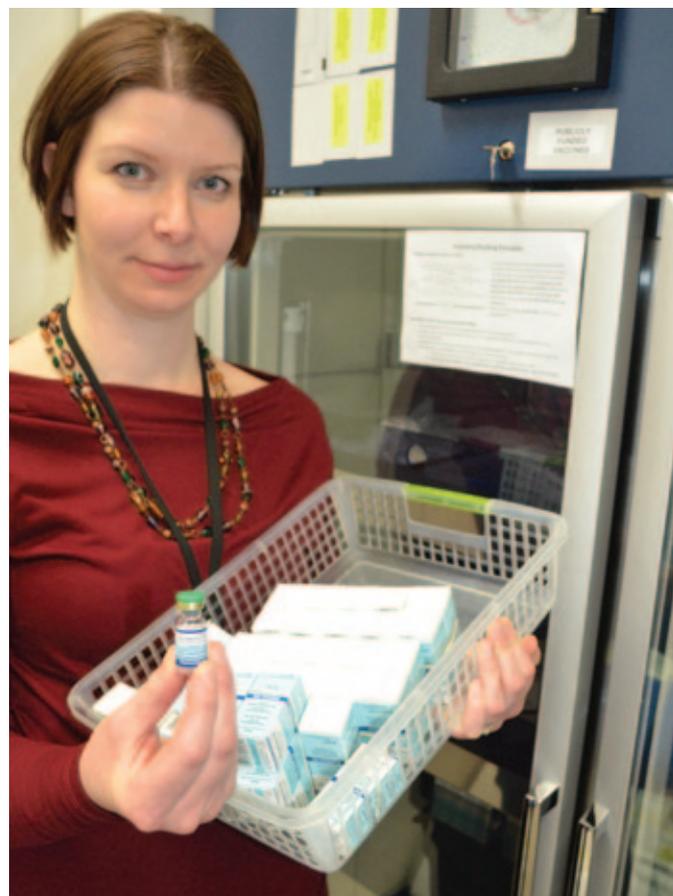
Study finds vaccines rarely cause adverse reactions

Adverse reactions to immunizations are rare in Ontario, according to a report on vaccine safety from Public Health Ontario. The report found just 631 reported adverse reactions out of 7.8 million doses of vaccines given throughout the province in 2012. Of those, just 56 were considered serious and none resulted in death. “That is a low number,” says **Jody Kroepflin** of the Grey Bruce Health Unit. “I think

it is good that we know these numbers because that contributes to vaccine safety and future manufacturing.” Specifically in Grey Bruce, there were 19 adverse reactions reported to the health unit. The total number of vaccinations in the region was not available. “We are trying to educate people that there is always a risk, but then there is a huge benefit,” says program manager of infectious diseases **Karen Sweiger**. “It is for the greater protection of all.” (*The Owen Sound Sun Times*, Feb. 27)

CCAC inefficiencies questioned

Ontario’s Community Care Access Centres (CCAC) are taking heat in the media and at Queen’s Park over the compensation of their executives and inefficiencies in their operations. Multiple news outlets reported that one CCAC executive’s salary jumped 144 per cent since 2006, up to \$288,000 annually. Many of the 14 regional CCAC bosses are paid more than \$250,000 per year. “Who else in any sector makes those increases?”



Jody Kroepflin believes the public needs to know that adverse reactions to vaccines (such as the hepatitis B vaccine pictured here) are low.

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OUT AND ABOUT



HITTING THE TRAILS IN GREY-BRUCE

Members of RNAO's Grey-Bruce chapter make the most of the winter that wouldn't end on March 29, snowshoeing at the 11th Line Trails in Collingwood. Standing left to right are: Erika Haney, Kristien McAleer, LeAnn White (chapter president), Sheri Hatcher (past president) Donna Harkonen, and (L to R, kneeling) Angela Jewell and Samantha Petkou.

CHAMPIONS COME TOGETHER TO CELEBRATE BPGs



Trent University nursing student and Best Practice Spotlight Organization (BPSO) champion Naiema Alam takes part in small group discussions at the Nursing Best Practices Research Centre's annual general meeting (AGM) in March. The AGM was followed by a

BPSO Symposium the next day, where organizations across the province shared strategies on guideline implementation.



HEALTHY LIVING IN HALTON

Halton chapter executive members (L to R) Joyce Salil, Lynn Budgell, Karimah Alidina, Michelle Farah, Opal Robinson, John Balcom, Susan McIntyre and Hazelynn Kinney take a moment to pose at their *Healthy Beginning* event in January, which brought members together for a Zumba class, followed by a presentation on how to make nutritious meals, including kale salad, beet juice and mudslide cheese cake.

It's outrageous," says RNAO CEO **Doris Grinspun**. CCACs are in charge of co-ordinating home care for seniors. With the introduction of Local Health Integration Networks (LHIN) in 2007, critics say CCACs are redundant administration that may actually be hindering access to care. "This extra layer of bureaucracy – that's hugely concerning to us," Grinspun says. RNAO's 2012 *Enhancing Community Care for Ontarians* (ECCO) report recommends transferring CCAC's 3,500 care co-ordinators to primary care. "Just imagine how much more effective they could be working with people in times of health and in times of illness," RNAO President **Rhonda Seidman-Carlson** says. (*London Free Press*, Feb. 20 and Feb. 25, and *Guelph Mercury*, Feb. 28)

Patients provide input on their plan of care

Staff at the Cornwall Community Hospital (CCH) says implementing bedside shift reports (BSR) has improved outcomes by allowing patients to be engaged in their own care. BSRs involve nurses reviewing charts beside the patient's bed, allowing patients to better understand their plan of care. CCH is the first hospital in the region to implement BSRs, and the first facility in Ontario to use them in the psychiatric unit. BSRs "allow for greater communication between staff members, as well as opening the door to input from the patient," says **Gloria Hamel-Lauzon**, RN and professional practice leader. "(This) will ensure that we are remaining 100 per cent transparent." (*Cornwall Standard-Freeholder*, Feb. 1). **RN**

"Barbaric" to force feeding moms to hide

Toronto RN and mother, Penny Miller, responds to a Toronto Star article about breastfeeding in public (Feb. 12)

Mothers and babies just can't win. As health-care professionals, we strongly encourage women to breastfeed their babies. Not only can it be the best nutritional option, but it helps to prevent infections and diseases throughout life, it decreases the risk of infant mortality, and it helps with mother-child bonding.

We often push so hard that women feel like bad mothers if they are unable to nurse or choose not to. With all their responsibilities at home, motherhood can be isolating. But to have others try to isolate mothers further by encouraging them to hide away in dirty bathrooms and closets in order to provide the basic need of food for their babies is barbaric.

I can't help but question how, in this enlightened age, people have sexualized women to the point where they can't remember that the primary function of women's breasts is to make and feed milk to their offspring. People need to get over their own embarrassment and stop brow beating mothers when they are merely doing what is best for their babies.