

ONTARIO CORRECTIONAL NURSES INTEREST GROUP NEWSLETTER

INVITATION

*OCNIG Cordially invites
you to attend our*

2nd OCNIG AGM and Breakfast

Saturday, April 13, 2013

*Come network and enjoy breakfast
with your colleagues and OCNIG
executive at the Toronto Hilton Hotel
to*

Keynote Speaker:

*Dr. Katy Kamkar from CAMH
Stress in the Workplace - Maintaining
Work Life Balance for Correctional
Nurses*

Time: 0800-1130

*Place: Toronto Hilton Hotel
145 Richmond Street West, Toronto*

See OCNIG March 2013 Newsletter for Details

This is your invitation to the 2013 OCNIG Spring Educational Event and AGM.

Come network and enjoy breakfast with your colleagues and OCNIG executive at the Toronto Hilton Hotel to hear Dr Katy Kamkar from CAMH speak on Stress in the Workplace – Maintaining Work Life Balance for correctional nurses!

Date: Saturday, April 13 2013
Time: 0800-1130
Place: Toronto Hilton Hotel
145 Richmond Street West Toronto

Program:

- 0800: Complimentary Breakfast for ALL OCNIG members**
- 0830: The History of Correctional Nursing – Ian Clarke**
- 0900-1000: Keynote Speaker – Dr Katy Kamkar on work life balance issues, mental illness in Canada and how to cope with stress to thrive.**
- 1000-1100: Meet new chair Subaida Hanifa and the OCNIG executive to share your thoughts on the future of Correctional Nursing**
- 1130-1230: RNAO Keynote: Quest for Leadership Expertise and Panel**

Please note that while there is no charge for the above events, to ensure we have enough food and seats you are encouraged to register online at www.MyRNAO.ca

Just log in to the AGM registration online, go to the Saturday Interest Group Meetings List and check off the OCNIG Breakfast. Then we will know that you are coming! The breakfast and meeting is complimentary.

When you get to the Toronto Hilton Hotel, signage will be present to tell you the location assigned for our OCNIG breakfast.

The goals of the Ontario Correctional Nurses' Interest Group are to empower nurses in correctional settings to:

- 1. Co-operate professionally**
- 2. Promote health in incarcerated communities**
- 3. Promote continued education and professional advancement of Registered Nurses working in corrections**
- 4. Mentor new and potential nurses**
- 5. Advocate for the health of nurses working in correctional settings**

Nancy Elliott-Greenwood, RN, BScN Newsletter Editor

Our Correctional Nurses AGM keynote speaker on April 13 2013 will be Dr. Katy Kamkar. She is a Clinical Psychologist at the Work, Stress and Health Program/Psychological Trauma Program at CAMH. Come to our free breakfast with Dr Katy to hear her presentation especially for correctional nurses on balancing life with working conditions and with factors leading to stress at work, mental illness in Canada, recognizing the early warning signs of stress with coping tips, recognizing depression and anxiety, signs and coping strategies.



She provides evidence-based psychological assessment and treatment for Mood and Anxiety Disorders and on psychological distress in the workplace. She also provides multidisciplinary education, consultation, and supervision and conducts research in the area of depression and anxiety disorders. She provides education on mental health in the workplace and she launched a mental health series on television. Dr Katy Kamkar is also a regular Health Blogger for CTV Health News.

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**What is your facility
doing for Nurses in
Nurses Week 2013?**

**Please share photos and events
with your correctional nursing
colleagues by sending a note
about YOUR event to the
newsletter editor at:
nelliott@hurontel.on.ca**

RESILIENCY IN PRACTICE (Part 2)

Working in a practice setting that tends to be negative, with clients (and sometimes staff) that can be verbally abusive, can wear on you. Resilience is paramount to having a fulfilling and successful correctional nursing career.

The following tips on building resiliency are based on recommendations from the American Psychological Association (APA):

1. **Make Connections:** Good relationships with close family members, friends or others are important. Accepting help and support from those who care about you and will listen to you strengthens resilience.
2. **Avoid Seeing Crises as Insurmountable Problems and Keep Things in Perspective:** You can't change the fact that highly stressful events happen, but you can change how you interpret and respond to these events. Even when facing very difficult events, try to consider the stressful situation in a broader context and keep a long-term perspective. Avoid blowing the event out of proportion.
3. **Accept That Change Is a Part of Living:** Certain goals may no longer be attainable as a result of adverse situations. Accepting circumstances that cannot be changed can help you focus on circumstances that you can alter.
4. **Set Goals and Move Forward Toward Them:** Develop some realistic goals. Do something regularly — even if it seems like a small accomplishment — that enables you to move toward your goals. Instead of focusing on tasks that seem unachievable ask yourself, "What's one thing I know I can accomplish today that helps me move in the direction I want to go?"
5. **Take Decisive Actions:** Act on adverse situations as much as you can. Take decisive actions, rather than detaching completely from problems and stresses and wishing they would just go away.
6. **Look for Opportunities for Self-Discovery:** People often learn something about them and may find that they have grown in some respect as a result of negative

situations. Many people who have experienced tragedies and hardship have reported better relationships, a greater sense of personal strength even while feeling vulnerable, an increased sense of self-worth, a more developed spirituality and a heightened appreciation for life.

7. Nurture a Positive View of Yourself and Maintain a Positive Outlook: Developing confidence in your ability to solve problems and trusting your instincts helps build resilience. An optimistic outlook enables you to expect that good things will happen in your life. Try visualizing what you want, rather than worrying about what you fear.
8. Take Care of Yourself: Pay attention to your own needs and feelings. Engage in activities that you enjoy and find relaxing. Exercise regularly. Get some sleep. Eat better. Taking care of you helps to keep your mind and body primed to deal with situations that require resilience.

Developing resilience is a personal journey as everyone reacts differently to stressful and traumatic events. Forming a resilient disposition includes fostering acceptance of others and situations that you cannot control, finding greater meaning in life, building strong relationships with others and reflecting and learning from negative experiences to grow as a person.

Many years ago I came across the motto, *Bloom where you are planted*, words that often come to mind when I find myself in a new situation or difficult circumstances. Each time, I reflect on my options; I can shrink or I can bloom. Working in a correctional environment has afforded me many opportunities to bloom and with the support of coworkers, family and friends, most often I have. I hope you bloom on your journey.

Shirley Kennedy RN
Health Care Manager (A)
Hamilton Wentworth Detention Centre

Coroner Inquest Update

Until recently Coroner Inquests were mandatory anytime a person died in custody. However, the Coroner's office now must investigate any in custody death but has the discretion to not call an inquest if the death is determined to be natural causes. The Coroner therefore has the discretion to determine if it is in the public interest to hold an inquest.

An inquest is NOT an adversarial process. An inquest is an inquisitorial process designed to focus public attention on the circumstances of a death. It is to be a public examination into the facts.

While an inquest is not a criminal court of record, it is nevertheless a court process. Appropriate behaviour, dress, and conduct will be expected of participants, the media, and others attending an inquest.

The inquest jury consists of five persons selected by the coroner's constable from a list of jurors from the community. Service on an inquest jury is a public duty. On the first day of the inquest, the jurors meet and select a foreperson from their group. Jurors are then sworn or affirmed to inquire into the death and must deliver a verdict answering the five questions regarding the death.

The Coroner's jury verdict consists of the following five questions they are required to answer at the conclusion of the inquest.

- Who was the deceased?
- Where did the death occur?
- When did the death occur?
- How did the death occur, i.e. the medical cause?
- By what means did the death occur, i.e. the classification or manner of death?
"By what means refers to the following categories: Natural causes, Accident, Homicide, Suicide, and undetermined.

This verdict need not be unanimous and can be reached by majority. Jurors can take an active role in the inquest and are encouraged to ask relevant questions of the witnesses and raise issues of concern.

Once the five questions are answered, jurors may make recommendations based on the evidence presented to them. However, it is not a requirement that jurors make recommendations. Their role is not to assign blame, to free from blame, nor to state or imply any judgment in their recommendations concerning the death.

An inquest is open to both the public and the media. Coroners preside in a quasi-judicial role over the inquest.

The coroner is usually represented by a Crown Attorney who acts as counsel to the coroner. In addition, the presiding coroner shall allow other persons with a direct interest in the inquest, including persons who may be directly and uniquely affected by the recommendations to take an active part in the proceedings. This participation is called “standing”. A person or party must apply for standing. To be granted standing, the coroner must find that they are both substantially and directly interested in the inquest.

Parties with standing may represent themselves, or have lawyers or agents represent them. Parties may cross-examine witnesses relevant to their expressed interest and may call certain witnesses of their own if the coroner finds that the evidence of such a witness is relevant to the proceedings.

Parties with standing can also present arguments and submissions to the jury after all the evidence has been heard. Although an inquest may have lawyers representing various (and sometimes opposing) interests, no one is on trial and that the jury is not allowed to assign blame in its verdict.

The family of the deceased may wish to seek standing (with or without a lawyer), or may

simply wish to observe the proceedings along with the public. Depending on the circumstances, family members may also be called as witnesses at an inquest. Unless they are going to be witnesses, the deceased's family members are not required to attend the inquest.

Witnesses who have relevant evidence to give at an inquest will be summoned to attend. Witnesses will be sworn or affirmed and must give truthful testimony. Witnesses can be cross-examined by parties granted standing at the inquest. Evidence cannot be used to incriminate individuals in other courts unless they commit perjury. Perjury at an inquest is an offence and may lead to criminal charges. Witnesses are entitled to have their own lawyers or agents present to advise them of their rights. Any nurse called to give evidence as a witness may, in some circumstances wish to have a lawyer represent them to advise them of their rights. It must be remembered the lawyer present at the inquest representing the Ministry is not there to represent individual witnesses.

The coroner's constable selects the jury and assists the coroner in maintaining order during an inquest. The constable swears or affirms witnesses, assists the jury and is responsible for handling the exhibits.

Prior to the beginning of the inquest, the coroner may convene a pre-inquest meeting. At this meeting, which is usually conducted by counsel to the coroner, certain matters will be discussed to ensure an efficient and effective inquest. This includes matters such as scheduling of hearing days, issues to be explored, and the sharing of information to be discussed. It is usually at this meeting that the inquest brief is handed out to parties having counsel present. The inquest brief is only distributed after the signing of an Undertaking, which ensures confidentiality of the brief, and the return of the brief after the inquest is completed.

If a party is not represented by legal counsel, special arrangements can be made to obtain access to the inquest brief.

The coroner at an inquest is addressed as Mister or Madame Coroner and the jury

foreperson as Mister or Madame Foreperson. After the jury has been sworn, the coroner addresses the court with opening remarks. Coroner's counsel then addresses the jury and calls the first witness. The Coroner's counsel usually asks questions of the witnesses in a manner to facilitate the story of the death to unfold for the education of the jury. As each witness is called, the other parties with standing have the opportunity to ask relevant questions of these witnesses in cross-examination. Jurors also have the opportunity to ask questions and examine exhibits. Rules regarding evidence at inquests are different from other court processes.

When all the evidence has been heard, lawyers or agents will usually address the jury. These submissions will be a final opportunity to present the jury with interpretations of the evidence and to suggest recommendations. Joint recommendations from all parties may also be considered. Counsel to the coroner will also present closing submissions to the jury including defining points of law.

Following the arguments and submissions of all parties, the presiding coroner will charge the jury. The coroner will describe the jury's responsibilities and limitations and give them instruction regarding the law as it applies to inquests.

The jury will retire with all the exhibits to consider their verdict and prepare recommendations, if they so choose. A jury verdict that assigns blame will not be accepted. The jury must answer the five questions and they may make recommendations. Recommendations are not mandatory but they represent the voice of the community and should be considered in the prevention of similar deaths in the future. Recommendations must be based on evidence heard during the inquest.

The jury will then review the evidence and exhibits. When the jury returns to the court, the verdict is read aloud and the inquest is then closed.

The verdict and recommendations, (if any), are available to the public upon request, from the Office of the Chief Coroner.

The verdict and recommendations, along with a brief explanation written by the presiding coroner, are sent to the Chief Coroner for distribution to agencies, associations, government ministries, or other identified organizations that may be in a position to implement the recommendations. Recipients are asked to evaluate their response to the recommendations and are requested to submit their response to the Office of the Chief Coroner within a year of the inquest.

Members of the public, including the media, may request a copy of responses to inquest recommendations by submitting a written request to the Office of the Chief Coroner.

**This article is adapted from the Annual Report of the Office of the Chief Coroner of Ontario by Ian Clarke, RN BScN.
Ian is Health Care Manager at Maplehurst Correctional Complex**

OCNIG Executive 2012-2013

Chair

Subaida Hanifa

Subaida has recently left a position at Syl Apps

subaida.hanifa@gmail.com

Past Chair

Sheleza Latif

Sheleza is the acting Manager of Health Care at the Toronto Jail

Office 416-325-3986 / 416-325-4444 BB 647-588-6049 sheleza.latif@ontario.ca

Policy and Political Action Officer

Annette Buzdygan (send to both emails please)

Annette is a Mental Health Nurse at the Algoma Treatment Centre

annette.buzdygan@ontario.ca or annettepiche@gmail.com

Communications Executive Network Officer

Nancy Elliott-Greenwood RN, BScN

Nancy recently retired from Health Care at Bluewater Youth Centre

nelliott@hurontel.on.ca home: 519 524-8611

Finance Executive Network Officer

Evelyn Wilson evelyn.n.wilson@ontario.ca

Evelyn is (A) Nurse Advisor at Corporate MCSCS in Toronto

Mentor and Resource

Ian Clarke RN BScN Health Care Manager

Maplehurst Correctional Complex

Tel: 905-876-7325 Fax: 905-878-1435

ian.clarke@ontario.ca (preferred) or: ianclarke@cogeco.ca

Membership Executive Network Officer

- currently vacant