Reflections from an Exciting Executive Think Tank!

Staff Nurses & Their Mental Health

Happy New Year to all!
The executive had a very productive Think Tank weekend in Kingston and we identified and decided on the mental health of Staff Nurses.

During our round table discussions we flagged prevalence, impact on individual staff nurses, families and our communities the challenges of

- Anxiety,
- Depression,
- Substance abuse
- Post Traumatic Stress Disorder

Mental health issues need to be addressed by nurses and by the healthcare system.

As Registered Nurses we have a responsibility for own self-care, and we need to be mindful of our vulnerabilities. We bear witness of pain, anguish, and suffering, the cumulative stress affecting our physical and emotional functioning.

So we ask you: Are you Thriving, Surviving or Drowning in your workplace?

We brainstormed about rescue strategies for nurses when they feel they’re in trouble. Think SOS.

- Stop and slow your breathing
- Open your mind to allow you to reach out for help
- Develop a Self-Care plan.

Our AGM will be on Saturday April 21st at 9:00am at the downtown Hilton in Toronto. We are planning a round table on How do you cope with Mental Health Issues in your workplace?

If you are in the Toronto area at this time we would love to have you take part.

Special points of interest:

- 2015 is the year of Staff Nurse Mental Health

“In dealing with those who are undergoing great suffering, if you feel “burnout” setting in, if you feel demoralized and exhausted, it is best, for the sake of everyone, to withdraw and restore yourself.

The point is to have a long-term perspective.” ~ Dalai Lama
While some workplace stress is normal, excessive stress can interfere with your productivity and impact your physical and emotional health. And your ability to deal with it can mean the difference between success or failure.

You can’t control everything in your work environment, but that doesn’t mean you’re powerless—even when you’re stuck in a difficult situation. Finding ways to manage workplace stress isn’t about making huge changes or rethinking career ambitions, but rather about focusing on the one thing that’s always within your control: you.

Your emotions are contagious, and stress has an impact on the quality of your interactions with others. The better you are at managing your own stress, the more you’ll positively affect those around you, and the less other people’s stress will negatively affect you.

There are a variety of steps you can take to reduce both your overall stress levels and the stress you find on the job and in the workplace. These include:

- **Taking responsibility** for improving your physical and emotional well-being.
- **Avoiding pitfalls** by identifying knee jerk habits and negative attitudes that add to the stress you experience at work.
- **Learning better communication skills** to ease and improve your relationships with management and coworkers.

For full article read: [http://www.helpguide.org/articles/stress/stress-at-work.htm](http://www.helpguide.org/articles/stress/stress-at-work.htm)

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**Self-Care Cheat Sheet**

Self-care isn't rocket science. Here's all you need to know:

1. **Get Some Rest**
   - You probably need to sleep more. Who doesn’t? 7-8 hours a night. Nap if you can. Make it a point to tell yourself "I’m resting now" at least once a day. Yeah. For real.

2. **Fuel Your Body**
   - If you’re eating junk, living on caffeine & feeling like a zombie, stop it. Plants. Lean protein. Healthy fats. WATER. Whatever makes you feel vibrant.

3. **Move It**
   - Do what feels good to you. Dance in the kitchen. Jump on a trampoline. Swim, bike, walk, run. You don’t have to sweat it out in a gym. Just MOVE.

4. **Be Still**

5. **Speak Up**
   - No one can read your mind. If you need something, ask for it. If something pisses you off, say so (respectfully). Stand up for yourself. Be the friend you deserve.

6. **Enjoy Yourself**
   - Life’s too short! Do something every day that makes you laugh. Talk to friends. Play. See a movie. Join a club. Take a class. Live your life!
Winter Newsletter

There are also several tools you can use to draw shapes and symbols. Once you have chosen an image, place it close to the article. Be sure to place the caption of the image near the image. This story can fit 75-125 words.

Selecting pictures or graphics is an important part of adding content to your newsletter. Think about your article and ask yourself if the picture supports or enhances the message you're trying to convey. Avoid selecting images that appear to be out of context.

Microsoft Publisher includes thousands of clip art images from which you can choose and import into your newsletter.

The Top Ten Things a New Graduate Nurse Needs to Know

From Andrea Rochon Starting a new career is a significant life change—graduation, CRNE, and the search for the “perfect” job, apprehension can be a factor as you consider what you need to know....

From colleagues across the province, from all areas of nursing practice and novice to experienced, I identified the things a new graduate nurse needs to know. Thank you to everyone who contributed their ideas.

1. Time management, organization, and setting priorities are all invaluable skills.
2. Never stop asking questions. It is always better to ask questions than to make assumptions. It will also demonstrate to your colleagues and mentors that you are willing to learn.
3. Never be afraid to ask for help and always be willing to help others. TEAMWORK!
4. Your confidence will improve as you gain experience.
5. Advocate. For your patients, for your profession, for your colleagues, for yourself
6. Take a deep breath and know that everything will be ok
7. Trust your instincts. Also, trust your assessments, skills, knowledge, and abilities
8. Take care of yourself. Take time for yourself. You need to keep yourself healthy in order to provide patients and their families with the best care possible
10. Do not ever forget the reason you went into nursing – the patients. You will see them at their most vulnerable, you will see them as they heal. We are honoured and blessed to support people through many significant life events. Take pride in this wonderful profession you have chosen. Nursing is an incredibly challenging and rewarding profession.
In order to look at a transformation of the Westernized healthcare system here in Ontario and Canada nurses will need to avail themselves of some of the information and education on CT. In 2009-2010, I had the opportunity to do a RNAO Advanced Clinical Fellowship on the “Introduction and Integration of Complementary Therapies in Acute Care.”

My focus included looking at the current CT literature and research; the current practice/integration of CT in Canada and around the world; providing treatments to patients, staff and their significant others, and to determine how we need to disseminate this information to contribute to this change. What I learned first was the best way to teach nurses about CT was to have them experience them. For those who were not willing to actually experience it, I let the impact on the patients they serve to convince them of their value and place as an option of care.

Overall the nurses and doctors I had the opportunity to work with during this time, including some who were very sceptical at the start, were not only moved by the work I did and the outcomes that were achieved, many started to refer patients to me, and still do today. Many of you may have tried a massage, herbs, or seen a chiropractor (types of CT) though I encourage you to go a step further and try one of the many other types that are available and mentioned in the Part 2 article; you may be surprised at how it may contribute to your well-being and that of your patients.

Many organizations (hospitals, hospices, long-term care, etc.) have CT being provided by volunteer services. To date this author has not found a CT program in an acute care setting where it is an integral part of the care plan or pathway, or where staff is hired to provide the therapies as we can see in a variety of programs in other countries, such as the United States. One example in the USA is occurring in Minnesota with their ‘coronary bypass’ patients where three Healing Touch treatments are being provided (day before, day of and day following their procedure).

Due to the positive outcomes found through the Level I research done at that facility from 1999-2003 (such as a decreased length of stay by one day, and statistically significant decreased anxiety scores), they ultimately employed two full time Healing Touch practitioners. In 2003, they reported a savings of more than $500,000 due to the impact of a decreased length of stay.

This is only one of many examples in the world today. Our local Hospice in Windsor, ON has a strong program lead by volunteers that incorporate the use of Therapeutic Touch and The Radiance Technique, both types of biofield therapy, for use with their patients at home, at the hospice or within hospital; they cannot keep up with the requests given the positive outcomes clients report. The Hospice also utilizes a holistic approach with a variety of modalities, such as art therapy.

So you ask, what can be used within the hospital? First, you have to know the standard from which your own organization will allow various CT to be incorporated, if one exists. If it does not then it is time one is established; at least start the conversation.

Within my own practice as a RN, I have used my skills to help alleviate pain and anxiety with patients through the use of Healing Touch, Reiki and/or Therapeutic Touch. I recall one evening years ago where I had an elderly patient who sustained a fall and had subarachnoid hemorrhage. The Neurosurgeon was in the OR, and he requested we try to not sedate the patient so he could effectively evaluate him once he completed his present case.

The patient was confused, agitated and occasionally aggressive. Medications were being used frequently and his sedation level was not consistent with each use. With permission from the ED Physician, and he requested we try to not sedate the patient so he could effectively evaluate him once he completed his present case.

Many who had not been exposed to energy work were surprised when I was able to avoid using any medications through the next 2 hours by
providing a biofield therapy. It did require me to do a short treatment (5-10 minutes) about every 30 minutes, which was effective overall. At first my colleagues shook their heads as I seemed to gently touch him and wave my hands over him; though the evidence of its effectiveness was in my being able to keep the patient relatively calm. Since then I have provided treatments throughout the hospital when requested, though some nurses still remain sceptical.

Another RN who is a CTNIG member and our Niagara Liaison, Robert Gouldstone, has frequently used acupuncture or acupressure points to ease his patient’s pain and/or nausea and vomiting while working.

Given the introduction of Bill 50 in 2006, RNs are allowed to practice independent Medical Acupuncture and are supported by the College of Nurses of Ontario. Medical acupuncturists are trained in the use of 360 points, with the advanced knowledge of anatomy and physiology for precise location. At McMaster Hospital, Hamilton acupuncture has sometimes been used as the only anesthesia for minor surgery. Are there instances that you could see acupuncture useful for analgesia or antiemetic use?

Here in Canada we are just in our infancy of truly transforming to a holistic integrative healthcare system, though we have begun the change, this we cannot deny. It is at this time I ask all nurses to investigate, experience and ask the questions on how we can move to this approach and be open to the ways it will help us in the healing of the patients we serve.

Remember an integrative approach is more than just providing a type of CT to a patient, it involves a paradigm shift in how we see and care for that patient and their families, as well as ourselves. We need to collect the evidence to show us how to do this.

“Evidence-based practice should involve the use of evidence derived from a broad array of sources – the patient, the patient’s significant others and caregivers, all types of studies from the research literature, the nurse’s experiences, and the nurse’s clinical judgment” (Jackson, 2012).

So as you care for your patients, be open to the ways in which they care for themselves, and their families without judgment or ridicule to ensure our patients trust us with their information...

Attending a presentation on complementary therapies is an opportunity I have provided nurses within my community over the last few years. I have had the help of various CT practitioners in my area who provided mini-treatments to the nurses who attended, then I provided various talks related to CT, such as ‘Being the Next Big Thing In Healthcare’ or ‘Research on CT Today.’

We also had various booths for the nurses to visit of various modalities, resources or businesses. If you are interested in having a talk in your area, please contact me and perhaps the CTNIG can arrange one in your city or workplace. Until you get to attend a presentation or workshop, there are also some very good textbooks and journals that are now available for nurses to learn more about CT and a holistic integrative approach to care, you only have to start to search for them.

I was pleased to see that the Canadian text we used when I taught Complex Health at the University of Windsor (2009-10) had incorporated various holistic approaches to care, including a chapter on complementary and alternative medicine.

It is through a holistic approach we will have a larger perspective on how to serve our patients and our healthcare system as a whole. To further serve your needs in learning more about various modalities be-
Part 3 cont’d

You do not have to practice complementary therapies to belong to one of these groups, you only have to support their vision and mission. If you are interested in research, the place to start is with the National Center for Complementary and Integrative Health (http://nccam.nih.gov), a branch of the NIH (National Institute of Health).

IN-CAM is the Canadian affiliation for them. One document I can recommend you start with was published in 2014 by The Ontario Society of Physicians for Complementary Medicine called “Safety First. Dispelling Myths About Complementary Therapies.”

It includes various articles by various practitioners about different types of CT. It is available for free at People’s Right to Integrative Medicine (PRIM) at www.peoplesrim.org. It is time, so be proactive and avail yourself of the information available out there, that likely your clients already know about.

If you require any other information, do not hesitate to contact me: Kim M Watson, RN, MScN, Holistic Practitioner at T.O.L._Services@Outlook.com.

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She is the President of the RNAO-CTNIG ~ Complementary Therapies Nurse’s Interest Group www.mao-ctnig.org; the Ontario Representative for the CHNA ~ Canadian Holistic Nurs-

May You Find...

May you find serenity and tranquility in a world you may not always understand. May the pain you have known and the conflict you have experienced give you the strength to walk through life facing each new situation with courage and optimism. Always know that there are those whose love and understanding will always be there, even when you feel most alone.

May you discover enough goodness in others to believe in a world of peace. May a kind word, a reassuring touch, and a warm smile be yours every day of your life, and may you give these gifts as well as receive them. Remember the sunshine when the storm seems unending.

Teach love to those who hate, and let that love embrace you as you go out into the world. May the teachings of those you admire become part of you, so that you may call upon them. Remember, those lives you have touched and whose have touched yours are always a part of you, even if the encounters were less than you would have wished. It is the content of the encounter that is more important than the form.

May you not become too concerned with material matters, but instead place immeasurable value on the goodness in your heart. Find time each day to see beauty and love in the world around you.

Realize that each person has limitless abilities, but each of us is different in our own way. What you feel you lack in the present may become one of your strengths in the future.

May you see your future as one filled with promise and possibility. Learn to view everything as a worthwhile experience.

May you find enough inner strength to determine your own worth by yourself, and not be dependent on another’s judgment of your accomplishments. May you always feel loved.

By Unknown
Recipe Submitted by Brenda Hutton
For about the last three years I have more or less followed the low carb, wheat free diet based on the book “Wheat Belly” by William Davis MD.

**Basic Cheesecake**

**Crust**
1 ½ cups ground pecans or walnut
4 tablespoons butter or coconut oil melted
Stevia or Splenda to desired sweetness

**Filling**
16 ounces cream cheese at room temperature
¾ cup sour cream
3 eggs beaten
1 teaspoon vanilla extract
Splenda (about ½ cup) or stevia ¼ teaspoon

**Topping**
Unsweetened Berries or bittersweet chocolate

**Method**
Crust – mix ingredients and press into 8 by 8 pan. Bake 10 minutes
Filling – Mix, pour onto baked crust. Bake 40 minutes at 350 degrees. Cool and add topping.

Read our blog: [www.lifeofanurse.com](http://www.lifeofanurse.com)
brought to you by SNIG’s own storyteller
Paula Manuel