



LORI LAMONT
Vice President and Chief Nursing Officer

Open Letter

TO NURSES

IN THE WINNIPEG HEALTH REGION

In this issue of the Open Letter to Nurses, I invite you to join the discussion about scope of practice. On a national and provincial level, scope of practice is being discussed and defined. Nurses should work to their fullest potential and provide the best quality care. It's an important issue because one in four nurses say they aren't working to their full scope of practice. The big questions are 'why' and 'how can we change that?'*

It's quite amazing how quickly time flies by. Before you know it, days turn to months and here we are turning another page in this new calendar year. Looking ahead, scope of practice will continue to be an important issue for the nursing profession, for health regions and for government.

Conversations are taking place with nursing colleges, unions, nursing leadership councils and regional health authorities across the country and right here in the Winnipeg Health Region. With changing roles, responsibilities and skills, we need to better understand scope of practice of all three professions of nurses so we're able to make the best decision about which nurse should be assigned based on the needs of the individual.

We all need to engage in this dialogue because it has an impact on how we work together, how we care for our patients, resident and clients, and it influences how we feel about our jobs and the work we do.

Different approaches and models for scope of practice are being used and evaluated in various provinces including Alberta, Nova Scotia and Ontario. The Winnipeg Health Region has been able to benefit from that work and we're able to examine what other places have experienced in terms of clinical care, staffing and job satisfaction. We have individuals looking at how

con't next page





Gus Castaneda

Fatima Quezon

Tasia Mennell



Alanna Payment

some of those existing tools could be modified or adapted to work in our region.

When we look at scope of practice and consider the overall goal, we see it's about developing processes that maximize the scope of all nurses and that ensures the best match between the needs of the person receiving care and the nurse.

That same overall goal has led to the development of a number of other initiatives in the Health Region.

Nurses from the General Surgery Ward at Grace Hospital, are among the first in the province to adopt the Releasing Time to Care (RTC) program. RTC was first established in the United Kingdom and is now widely used in nearly two dozen countries. Saskatchewan and Ontario have already started using RTC so nurses can spend more time on direct patient care.

The Grace Hospital's 'showcase ward' is in the initial stages of the RTC process. Together, nursing staff, management and project leaders are taking a close look at how much time is used on tasks that take them away from their patients. For example, it might be analyzing the amount of time spent looking for equipment and supplies, finding answers for various questions or filling out paperwork.

By making specific adjustments on a unit, like reorganizing the placement of equipment and supplies, or establishing more effective ways of communicating information to help cut down on the amount of time spent

on unnecessary interruptions, nurses can spend more time doing what they're educated to do -- and love to do -- caring for their patients.

The Grace Hospital ward is working through the first of 11 modules of the RTC program. We hope to see measurable and sustainable results from this work over the next 1-2 years.

Another example is the work being done to help support the integration of Registered Psychiatric Nurses into non-mental health settings.

Right now, within the Health Region, the vast majority of RPNs work within Mental Health programs. However, RPNs are also employed in other settings, for example in Personal Care Homes, Rehabilitation and Geriatric settings and Emergency departments.

There's general agreement that other patient populations would benefit from the addition of a RPN to the health-care team. With that focus in mind a working group was established in December 2009, to look at how that can be supported and a tool kit has been developed to provide information, tools and suggested processes to help guide the introduction of RPNs into programs and settings other than Mental Health. The tool kit is now finished and available at: wrha.mb.ca/professionals/nursing/.

As we work toward better understanding and knowledge about scope of practice, there are other important factors to consider like a change in educational standards. For example, education for Licensed Practical Nurses has been expanded to a 20 month diploma program from the 15 month certificate program. And in recent years, education for Registered Nurses

was changed from a two year diploma to a four year baccalaureate degree program.

The nursing profession is evolving as is the need for care and the ways in which we provide health care. That's why as nurses, I encourage you to get involved and talk about scope of practice. Whether you're an LPN, RN, RPN and no matter what sector you're in, be that acute care, community or long term care, your thoughts and input about scope of practice help shape the future.

Your voice is important and I encourage you to get involved in the conversation by emailing me at wrha_nursing@wrha.mb.ca

**Survey by the College of Registered Nurses of Manitoba (Spring 2009)*



Sandra Andrews (on the left)
Carly Patterson (on the right)

DID YOU KNOW?

Nursing interventions have been directly linked to such patient outcomes as functional status, readiness for discharge, symptom management, falls prevention, pressure ulcer prevention and satisfaction

with care. Stay tuned for further discussion of these "nursing sensitive outcomes" and how nurses within the Winnipeg Health Region are contributing to quality care in our next issue.

contribute

In THE Spotlight

**CELEBRATING ONE
OF YOUR NURSING
PEERS EACH ISSUE!**



"Residents we see with dementia are coming into care much later in their illness with more complex issues. This fuels the need for increased support for residents and their families and staff."

~ Arlis Decorte

ARLIS DECORTE Registered Psychiatric Nurse, Clinical Resource Nurse, Deer Lodge Centre

Tell me about your role as a Clinical Resource Nurse

My role is to be a resource to staff, physicians, psychiatrists, residents and their families. As an RPN I'm able to share my knowledge and expertise about the mental health needs of residents on our unit.

What changes have you seen in the way dementia is handled today compared to when you first started your career as an RPN two decades ago?

More emphasis is being placed on individualized care, and the involvement of the resident and family, in care and care planning. We try to find out as much as we can about what the resident was like before admission, to better understand habits, sleep schedules, even their social history. Medication continues to be an important component of treatment to manage the reactive behaviours that can make care difficult and unsafe.

There's definitely an increase in the level of understanding of dementia and approaches to care. There's recognition that additional education and understanding of dementia are important. The PIECES* program and the chance to access five full education days, is an amazing commitment.

After nearly 20 years in the profession, what keeps you motivated? Dementia is an illness that can negatively affect every aspect of a person's life. My goal is to make their life the very best it can be despite their illness and circumstance. Being able to achieve that for the residents and their families is what motivates me.

*Find out more about PIECES at <http://www.wrha.mb.ca/professionals/respectfulworkplace/dementia.php> Scroll down for PIECES info.

EVENTS

ADVANCES IN VASCULAR NURSING CONFERENCE

April 6, 2011
St. Boniface Hospital Research Centre
409 Tache Avenue.
For registration and information call
258-1330
[http://home.wrha.mb.ca/education/
files/VND2011.pdf](http://home.wrha.mb.ca/education/files/VND2011.pdf)

CRITICAL CARE NURSING EDUCATION PROGRAM

Classes start April 26, 2011
Application deadline is March 28, 2011
Get more information or apply!
Call: 926-7084,
Email: recruitment@wrha.mb.ca
Visit: www.wrha.mb.ca/careers

WOUND CARE EDUCATION SESSIONS

Available February 2011 – June 2011
[wrha.mb.ca/osd/clinical_
woundcare.html](http://wrha.mb.ca/osd/clinical_woundcare.html)

NATIONAL NURSES WEEK

It's never too early to start planning
May 9-15, 2011
Theme: "Nursing the Health of
our Nation"
www.cna-nursing.ca