

Building on the RN: ONA Members Thrive in Specialized Areas of Nursing

Across the spectrum of ONA's 55,000 members, including Registered Nurses (RNs), Nurse Practitioners (NPs), Registered Practical Nurses (RPNs), Allied Health Professionals and 12,000 nursing student affiliates, working in hospitals, long-term care facilities, public health, community agencies, industry and clinics, there are numerous nurses working in specialized areas that build on their foundational RN knowledge, skills and practice.

These are nurses who have attained additional education and certification to practice in specialized nursing disciplines.

There are numerous classifications that fall within this category, and this feature section is devoted to spotlighting just a few of them – why they chose to move into specialized areas of nursing, what the challenges and rewards are and what they might advise to ONA RNs who are thinking of moving into specialized areas of nursing.

In the next few pages meet an ONA RN First Assistant, an Occupational Health and Safety Nurse and a Diabetes Nurse Educator. Enjoy!

Are You Here?

The list on page 3 shows some of the many nursing classifications represented by ONA at health care facilities in all sectors across the province.



Valiant Act Moves ONA Member to Rewarding Career

Glenda Hubley, Registered Nurse First Assist
Hubley assists urologist Dr. Anis Aziz.

Inspiring moments and noble acts not only can have a positive impact, but can also dramatically shape and change a person's life.

Such was the case for Glenda Hubley, a registered nurse and ONA member for more than 30 years. When Hubley was 20, she observed a valiant act involving a family member that inspired her to become a nurse.

"It had to do with a critical incident within my family. I witnessed something in the hospital that was quite heroic to me and I thought, my gosh, that's the profession I want to be in," she says.

A 1980 graduate of Sault College School of Nursing in Sault Ste. Marie, Ontario, Hubley has worked ever since as a staff nurse at the Sault Area Hospital (SAH). An active ONA leader as well, Hubley has served as Local 46 Coordinator and Bargaining Unit President since 1996. She currently represents 566 nurses at SAH.

Hubley says when she needed help with a labour relations issue in 1993, ONA was there to help, and that sparked her interest in becoming active as a union member.

"I found myself disadvantaged by the employer and wanted to seek a remedy. When the issue was resolved, I realized what ONA had done for me to rectify the error. It sparked my interest in becoming involved," she says.

Hubley found she not only wanted to represent her fellow nurses, but later in her nursing career, after more than 15 years as an Operating Room RN, decided to pursue her passion further.

"I had a strong interest in the surgical inter-operative component of surgery, and wanted to utilize my skills in another way than what I had experienced as an operating room nurse," she says.

In pursuing that interest, Hubley and co-worker Anita Esson sought to advance their careers and became Registered Nurse First Assists (RNFAs). RNFAs are RNs who obtain a certification through the Canadian Nurses' Association (CNA) to move into the educational component of RNFAs (see story "What is an RNFA?").

"There was a need expressed by our hospital management and our surgeons for assistants," Hubley added. "When we shared with them what a nurse in the operating room was able to do, they supported us in our endeavours to enhance our education and clinical knowledge."

Hubley finished her studies at the British Columbia Institute of Technology to become an RNFA in 2004, and has since worked in that capacity in partnership with Esson.

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"We have a certificate in our clinical specialty. My certification is in perioperative nursing. Only after obtaining this certification can we enter ourselves into a college or university that carries the RNFA program," says Hubley.

"RNFA's are like a second pair of hands who assist the surgeon."

Hubley works primarily with Dr. Anis Aziz, a urologist. Esson works with Dr. Sam Fratesi, a vascular surgeon. Both Hubley and Esson also assist in other surgical specialties such as OB/GYN, General Surgery, ENT and Plastics.

Reflecting on her 31-year career, Hubley says "I think for me nursing has been a very rewarding experience. It is very much like medicine, where you can start off in one area in your nursing career, and through your career you can venture out into many specialties. It's so gratifying, and the opportunities are endless."

The rewards, she says, are performing work that was once "hands off" to surgical nurses, seeing the RNFA program grow, and getting the support she and Esson receive from their Nurse Manager and the surgeons with whom they work.

"It's also tremendously rewarding to see patients a few days before surgery and on the day of surgery, and then having them thank us for spending time with them when they are at their most vulnerable," she says.

While becoming an RNFA can be difficult, the challenges are well worth it, says Hubley.

"I'm committed to ONA, my members and the RNFA program – all are important aspects of my career. If it wasn't for the support of my ONA Local Executive members, who work so well as a team and are so supportive of one another, I would not have been able to achieve all that I have in my past seven years of nursing," she says.

"The challenges are really just bumps in the road if you're on the right career path."



Anita Esson, working in the OR.

What is an RNFA?

RNFA's are surgical operating room nurses with an advanced educational component who provide support for surgeons. The qualifications include being an RN with five years operating room experience and holding a Certification in Perioperative Nursing in Canada (CPN[C]) from the Canadian Nurses Association (CNA).

RNFA's will have graduated from an intensive education program, including hands-on labs and 175 hours of hospital clinical internship with a surgeon mentor.

They have advanced skills and knowledge that RNs working in an operating room do not. In the operating room, certain surgeries require two health care professionals, the surgeon and the assistant. The assistant can be another surgeon, a General Practitioner or an RNFA.

RNFA's practice perioperative nursing and collaborate with the surgeon and health care team in performing a safe operation with optimal outcomes for the patient. Activities included in first assisting are an expansion of perioperative nursing practice and encompass the preoperative, intraoperative and postoperative phases of the surgical experience.

RNFA's provide support for general surgeries, urology, gynecology, orthopedics, cardiac and neurosurgery. They can acquire a patient's history and perform a physical evaluation, complete post-operative assessments, observe wound management, and conduct research. They also begin the perioperative nursing plan of care with the cooperation of the patient and their family, provide information or teaching to the patient when an operation is suggested, follow up with the patient to monitor pain, mobility, complications, and assess the overall care received.

There are currently four RNFA educational programs in Canada, provided in French and English: the British Columbia Institute of Technology, Mohawk College in Hamilton, the Centre for Nursing Studies in Newfoundland & Labrador and the University of Trois-Rivières in the Province of Quebec.

A Registered Nurse First Assistant (RNFA) is an experienced perioperative (operating room) nurse who has acquired additional education, knowledge and judgement, along with advanced technical skills, to function effectively as an assistant to the surgeon throughout a patient's perioperative (surgical) experience.

The RNFA functions collaboratively with the surgeon and operating room team to perform a safe operation with optimal patient outcomes.

Most operations require a surgical "first assistant" to help the surgeon. This is in addition to the other health care team members in the operating room (e.g. scrub and circulating nurses, anaesthesiology, etc).

Within the operating room setting, the RNFA functions in a role more traditionally fulfilled by family physicians and/or residents/medical students.

<http://www.rnfa-ontario.ca/>

Linda Bourdeau, Occupational Health Nurse

“People Person” Takes Care of Fellow Staffers

Occupational Health Nurse (OHN) Linda Bourdeau, RN, considers herself a “people person” who likes to be in constant contact with others.

“I was a bedside nurse, but wanted to do something different in nursing yet still be involved with people,” says Bourdeau, explaining why after 25 years of bedside nursing, starting at St. Thomas Elgin General Hospital, she enrolled in an occupational health course at London’s Fanshawe College.

Today, Bourdeau is an OHN at London Health Sciences Centre, ONA Local 100, and this June will be celebrating her 40th year in nursing.

As an OHN, her primary role is looking after her hospital staff colleagues.

“We don’t look after patients that are sick and admitted to hospital. Our focus is staff – we follow any staff members who are off sick, have been injured on the job or who have chronic ailments that impact on their work,” explains Bourdeau.

More serious conditions are referred to the staff member’s physician, and in critical situations, they are referred to the Emergency Room.

“Primarily, we see staff with such chronic issues as foot problems, because obviously we’re all on our feet all day, or nurses who strain their backs from lifting patients. Or there may be sprains and strains that have

happened outside of work, but it can affect how they do their job or their ability to do their job,” she says.

“We also promote a healthy lifestyle, providing information and pamphlets as well as counseling as needed.”

In order to qualify for an occupational health course, a minimum of one-year nursing experience is required. Most Ontario colleges offer the course on a part-time basis.

Bourdeau advises young nurses to have a few years working at the bedside before moving into a specialized area like occupational health.

“It helps to have that practical experience in caring for patients and in learning how to communicate with them. I found it really beneficial to have spent some years at the bedside,” she says.

“One of the biggest rewards in this role is being able to help a fellow staff member get back on track. It’s so rewarding when they come back and tell you they are feeling much better and appreciate what you’ve done for them.”



What is Occupational Health Nursing?

Occupational health nursing provides integrated occupational health and safety services to employers and employees. Occupational Health Nurses (OHNs) work closely with managers, supervisors, individual employees and ONA representatives, to maintain, promote and restore employee health, safety and well-being.

Who are OHNs?

OHNs are Registered Nurses (RNs) with a diploma and/or degree in nursing. They may also have a college certificate in occupational health nursing or a university diploma in occupational health. Nurses with specialized education and/or experience can achieve the designation of COHN(C) awarded by the Canadian Nurses’ Association (CNA). In Ontario, OHNs are regulated by the *Nursing Act* and the *Regulated Health Professions Act*.

What do OHNs do?

OHNs have the knowledge and expertise to help you with: disability management; program management; wellness and health promotion; and business strategies.

How do OHNs help?

Research has shown that employers who provide a positive working environment reap the benefits of enhanced production and decreased absenteeism. By working with management, OHNs help to achieve healthier workplaces.

Nursing Classifications Represented by ONA*

- Assistant Head Nurse
- Assistant Unit Administrator
- Case Manager
- Cardiovascular Triage Coordinator
- Central Supply Nurse
- Charge Nurse
- Childbirth Education, Program Coordinator
- Clinician
- Clinical Coordinator
- Clinical Instructor
- Clinical Manager
- Clinical Practice Coordinator
- Clinical Resource Nurse
- Computer Liaison Nurse
- CV Pacemaker Clinic Nurse
- Clinical Leaders (CL)
- Clinical Nurse Specialist (CNS)
- Diabetic Educator
- Discharge Planning Coordinator
- Discharge Planner
- Education Counselor
- Employee Health Nurse
- Facility Placement Coordinator
- Heart and Stroke Coordinator
- Home Care Case Manager
- Infection Control Nurse
- In-service Coordinator
- Instructor, Instructress
- IV Charge Nurse
- Lactation Consultant
- Maternity/Neonatal Nursing Coordinator
- Mental Health Resource Nurse
- Nurse Case Manager
- Nurse Clinician
- Nurse Educator
- Nurse Practitioner
- Nurse Trainer
- Occupational Health & Safety Nurse
- Occupational Health Nurse
- Operating Room Coordinator
- Operating Room Nurse
- Operations Coordinator
- Patient Care Resource Leader
- Patient Educator
- Patient Flow Specialist
- Primary Care Nurse
- Professional Practice Leader
- Psychiatric Nurse Counselor
- Psycho-geriatric Case Manager
- Public Health Nurse
- Registered Nurse First Assist
- Registered (Staff) Nurse
- Registered Practical Nurse
- Resource Nurses
- Senior Diabetic Educator
- Senior Nurse
- Sexual Assault Coordinator
- Specialist Nurse
- Staff Health Nurse
- Staff Training and Development Assistant
- Supervisor
- Supervisory Nurse
- Teaching Registered Nurse
- Team Leader
- Theater Charge Nurse
- Transfusion Nurse
- Utilization Case Coordinator
- Utilization Resource Nurse
- Unit Clinical Leader

*This is just a sample of the many nursing classifications ONA represents.

Sharon Rouatt, Diabetes Nurse Educator

Family Crises Spark New Direction

About 25 years ago, Sharon Rouatt's first child was diagnosed with Type 1 diabetes. Then two years later her second child was also diagnosed.

These developments led Rouatt to not only an interest in learning more about the disease that affected her two children, but also to change direction from bedside nursing to become a Diabetes Nurse Educator (DNE).

Working at a community hospital at the time, Rouatt saw there was no one on staff involved with diabetes, nor any nursing input into diabetes management. She enrolled in a diabetes management course at the University of Toronto in 1990, and the following year, a certification process for DNEs was introduced by the Canadian Diabetes Association (CDA).

Rouatt received her RN training at the Kingston General Hospital School of Nursing, and now works at Ottawa's Queensway-Carleton Hospital, ONA Local 84, where she helps patients manage their diabetes and learn about the impact of lifestyle choices on their blood glucose control.

"You help people deal with a variety of emotions when they're diagnosed with a chronic medical condition, and assist them with developing self-care behaviours during various stages of their diabetes journey," Rouatt says.

"Once you're diagnosed with diabetes, your needs change throughout your life and throughout the seasons. I help people become educated about their disease and develop different strategies for self-management."

Rouatt describes her job as a completely different kind of nursing, and she has a unique role in assisting and forming relationships with those she sees.

"I have a lot of respect for people with this disease and their daily challenges, particularly people with Type 1 diabetes," Rouatt said.

"It's almost like having a second job for them, dealing with their blood glucose levels on an continuous basis and reacting to them. Many of them I have worked with for over 20 years and have seen them through various stages of young adulthood, parenthood and career growth. It is a very rewarding position to be in."



Sharon Rouatt, Diabetes Nurse Educator at Queensway-Carleton Hospital, Ottawa.

The Role of the Diabetes Nurse Educator

From the Diabetes Nursing Interest Group (RNAO)

<http://www.dnig.org/education.html>

- Provides individualized education and care to patients and family, and allows patients to take direction in self-care behaviours.
- Teaches skills necessary in self-care management.
- May function as the primary contact for patients and family members.
- Plays an important advocacy role in assisting patients and families in communicating with physicians and other team members.

Diabetes Education – A Team Effort

From the Ontario Ministry of Health and Long-Term Care

http://www.health.gov.on.ca/en/ms/diabetes/en/diabetes_ed_programs.html

Education is essential in the treatment of diabetes, and people with diabetes are encouraged to take an active role in the day-to-day management of their own health care. Self-care, however, requires certain skills. These can be learned at one of Ontario's Diabetes Education Programs.

At each program, a team of educators is available to teach people skills that help them care for themselves. This team has a nurse and a dietitian. It may also have a social worker, clinical psychologist, foot care specialist, pharmacist, exercise physiologist and/or physiotherapist. Formal certification of diabetes educators by the Canadian Diabetes Educator Certification Board is encouraged.

Programs offer group classes as well as individual counseling to clients. The programs provide both initial and follow-up education and management.

As well as promoting self-care, the team develops a special management plan for each individual to help them understand how to relieve diabetes symptoms, prevent or treat complications, and improve the quality of life.

Effectively educating those with diabetes accomplishes the following:

- Reduces acute diabetes complications.
- Decreases foot problems.
- Shortens or eliminates the need for hospitalization.
- Improves long-term blood sugar control.
- Reduces and/or prevents the onset of long-term complications.
- Supports self-management.



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