Celebrate
NURSING WEEK
MAY 9 - 15, 2016
NURSES - with you every step of the way

BROUGHT TO YOU BY
Registered Nurses’ Association of Ontario
(Association des infirmières et infirmiers autorisés de l’Ontario)

Thanks for your round-the-clock hard work, patient advocacy, continuous learning, teamwork and integrity.

NURSES ARE THE LIFEBLOOD OF OUR HOSPITALS.
National Nursing Week, May 9-15, 2016, is a week to celebrate Canadian nurses and their dedication to patient care and the health of Canadians.

The Canadian Nurses Association has declared this year’s theme “Nurses: With you every step of the way,” celebrating the role of nurses at the forefront of effecting change in the quality of health care.

May 12th is also recognized as Canada Health Day and the birthday of Florence Nightingale - a true pioneer of professional nursing.

In 2014 RNAO released a report entitled Visionary Leadership 2030, which provided a vision of the future in which nurses take on leadership roles to influence change in the health care system and service delivery in Ontario. RNs, NPs, RPNs and nursing students are eager for bold system change and see themselves as catalysts for transformation.

It is with great pride that we present to Hamilton the Annual Spectator Nursing Week Supplement that profiles and celebrates the work nurses do.

In this issue you will have a chance to read some highlights from nurses in our community. The nurses featured in this Supplement are leaders in the nursing community and great examples of the many ways that nurses influence change in their day-to-day practice.

On behalf of the Hamilton Chapter of the Registered Nurses’ Association of Ontario,
Ruth Schofield, RN, MSc(T)
Lisa Richter, RN, BScN, MSc, CCHN (C)
RNAO Hamilton Chapter Co-Chairs

A message from Hamilton RNAO

Happy Nursing Week to all nurses and nursing students in Hamilton and surrounding areas

RUTH SCHOFIELD  LISA RICHTER

On behalf of your professional association and the people of Ontario, we would like to extend a heartfelt thanks to the province’s RNs, NPs, and nursing students.

You have each chosen to pursue a career of knowledge and compassion that has a profound impact on countless lives. Day in and day out, you use your expertise to nurse people from all walks of life during their time of need. Your talents shine in clinical settings, the community, the classroom, and the boardroom, and your powerful voice is helping shape policy in the halls of Queen’s Park and beyond.

As we celebrate National Nursing Week, we congratulate you on another year of outstanding contributions. Take pride and reflect on your positive impact on patients, clients, their loved ones, and on the health of Ontario as a whole.

Thank you for becoming a nurse, and for your continued excellence.

Carol Timmings, RN, BScN, Med (Admin), President, RNAO
Doris Grinspun, RN, MSN, PhD, LLD (hon), O.ONT., Chief Executive Officer, RNAO

A message from RNAO

Happy Nursing Week

RUTH SCHOFIELD  LISA RICHTER

Congratulations to our outstanding award winners!
NURSES in the Pediatric Intensive Care Unit at McMaster Children’s Hospital are a vital part of a dynamic team that cares for very sick children. Patients in the PICU need highly specialized care, and its RNs are responsible for coordinating many moving parts to deliver that care.

To provide the quickest recovery possible for these children, the PICU team, led by physician Dr. Choong and quality and safety nurse Filomena Canci Tavares, launched a “liberation bundle.” The team adapted a series of practices from the adult ICU environment to suit their young patients.

The bundle of practices has been shown to speed up recovery and improve outcomes for vulnerable patients. The goal is to minimize their dependence on machines and medications so they can move out of intensive care and on to a quick recovery. Canci Tavares says, “The PICU nursing team has been crucial in the early adoption of this bundle.”

Examples of practices in the bundle include reducing the amount of sedating medications patients are receiving as their condition begins to improve. This allows the child to communicate their needs and concerns, which is an essential first step in getting better. Another practice is to initiate physical activity to strengthen weakened muscles. This reduces the amount of time a child must be on a breathing machine. Nurses work with families to create daily routines as well as promote individualized sleep schedules to help children maintain a regular day-night cycle. This improves sleep, which plays a huge role in recovery.

By embracing this bundled approach to care, nurses are supporting team collaboration to enhance communication within their team and with young patients and their families. Their leadership on this initiative is driving the ultimate goal of the best and earliest possible recovery for all children.

Celebrating our nurses every step of the way

Living the Legacy: Compassionate Care. Faith. Discovery.

These characteristics define St. Joe’s, and are exhibited each day by the exceptional nurses across our organization who provide the highest quality care, delivered with dignity and compassion.

As we celebrate National Nursing Week, St. Joseph’s Healthcare Hamilton would like to recognize and thank our outstanding nurses who play a vital role in continuing to live the legacy. After 125 years, their ongoing leadership and expertise continues to make a positive difference in the lives of those we are privileged to serve.

Visit us online for more information at www.stjoes.ca

Registered nurses Shannon Strachan and Christine Metcalfe, and respiratory therapist Cliff Scott, take a ventilated baby for a walk in the PICU.
Personal stories are a gateway for nursing care at St. Joe’s

Written by: Maria Hayes, Senior Public Affairs Specialist, Public Affairs Department, St. Joseph’s Healthcare Hamilton

It is not surprising that a conversation with someone “north of their mid-sixties” often turns into a walk through the past. A reminder of better days, simpler times. What may be surprising to learn is that delving into someone’s personal history is actually a therapeutic technique for care providers to better connect with those living with dementia.

“The better we know who they are and who they were, the better we can provide care,” says Shelley Wright, Nurse Manager of the Seniors Mental Health Unit at St. Joseph’s Healthcare Hamilton.

Eager to provide the best care for this fragile population, her nurses researched the most successful proven strategies and developed their own approach. What they created is a personal storyboard for each patient on the 24-bed unit. At its centre is the person’s photo. In the surrounding space are details about the individual, like the name of a pet, a wedding date, what he or she did for a living, even favourite foods.

“Knowing a preference for something like ice cream might be a way to work with a person. Talk with them about ice cream or have a bowl of ice cream and next thing you know you’re able to get some things done for them in a very supportive way,” says Wright.

In people diagnosed with dementia, the short-term memory is affected first. As the disease progresses, it’s the long-term memories of childhood or as a young adult that remain intact longer. Tapping into a nickname as a kid or a special event in their life can build a connection that advances care, and breaks down barriers more quickly.

It also provides comfort to families that may feel helpless or overwhelmed by the impact of the illness.

“You know when someone takes the time to get to know you, or someone who is really vulnerable that you care about,” says Wright, “that means a lot to people.”

Families are engaged from the outset to help craft the storyboard and provide those meaningful memories that make their loved one unique. In turn, the care they receive is personalized.

“It’s a win for everybody,” says Wright, “for the patient, for the family. And for those of us who are caring.”

Bringing home care nursing ‘back to the future’

Written by: Shirlee Sharkey, CEO, Saint Elizabeth Health Care

When Saint Elizabeth Health Care was created in 1908, visiting nurses made their way to patient’s homes on foot or by streetcar, providing care to the poor, new moms and babies, and others in need. Health care was organized in geographic neighbourhoods, where nurses cared for patients using their specialized skills to treat, teach and support independence.

Fast forward to today – certainly much in the world has changed! Yet the premise of empowered nursing teams, focused on patient care, supported by technology and accountable for results, continues to show great promise. In places where this model is used in a modern-day context, it has garnered an astounding 100% satisfaction rate from patients and families. What’s more, it’s very popular with nurses and has the potential to save the health-care system money over time.

When it comes to care at home, people want more consistent and accessible services that meet their needs and fit into their lives. Simplicity, personalization and consumer empowerment are key – indeed, these principles are revolutionizing many industries, and health care is no exception.

Likewise, the use of digital mobile technology can help us to improve care by sharing information, making good decisions and working together. However, as powerful a tool as technology may be, it is people who bring this vision to life and make it happen.

Home care nurses today are talented, well-prepared and eager to embrace new and energizing roles. Saint Elizabeth nurses are at the forefront of innovation, clinical excellence, and person-and family-centred care. By working together and leveraging the unique strengths of communities, we can both simplify and modernize the home care system to support healthy and sustainable neighbourhoods.

Shirlee Sharkey is CEO of Saint Elizabeth, a national health-care provider and not-for-profit social enterprise that spreads hope and happiness through people-powered care. Find her on Twitter @ShirleeSharkey.
McMaster’s nurse researchers tackle today’s major health challenges head on

The health-care challenges we face today are many - our population is aging, living with multiple chronic conditions is common, resources are tight, and, more than ever, effective solutions are needed to support people to live well, maintain their independence, recover from illness, and avoid preventable readmissions to hospital.

Through innovative methods supported by major funders including the Canadian Institutes of Health Research and the Ontario Ministry of Health and Long-Term Care, McMaster University School of Nursing researchers are tackling some of today’s major health challenges head on. Here’s a look at some of the current research now underway:

**Supporting our seniors living with diabetes**

Drs. Maureen Markle-Reid and Jenny Ploeg are Scientific Directors of the McMaster School of Nursing’s Aging, Community and Health Research Unit (ACHR). Their vision is to work with older adults who have multiple chronic conditions—and their family caregivers—to promote optimal aging at home. Affecting over 60,000 Canadians annually, Type 2 Diabetes Mellitus is high on the priority list. In their current six-month study, older adults living with Type 2 Diabetes (among other conditions) and their caregivers are receiving home visits by a registered nurse and registered dietitian, as well as monthly motivational group sessions at community centres such as the YMCA. The team is examining the impact of this interprofessional, nurse-led approach across four communities in Ontario and Alberta to assess a number of outcomes, including diabetes self-management, quality of life, and use and costs of health services.

**Preventing life threatening complications after surgery**

Tens of thousands of seniors undergo cardiac and vascular surgeries in Canada and the United Kingdom each year, but studies have measured chronic postoperative pain in up to 40 per cent of patients at three months after surgery and hospital readmissions in up to one in five patients. Drs. Michael McGillion, Jennifer Yost and Sandra Carroll, together with colleagues in the School of Medicine, are leading an international team to examine the impact of a new remote monitoring and care system—THE SMArTVIEW—on pain, infection, and other serious postoperative complications (such as heart attack and stroke) after cardiac and vascular surgery. The SMArTVIEW system will connect specially trained surgical nurses to patients recovering at home through tablets and other wireless devices to keep track of their vital signs, provide education and support, and prevent readmission to hospital. The team is working with colleagues overseas to examine the impact of the system both here and in the United Kingdom. The lead technology partner for the project is Philips. Other eHealth companies involved include QoC Health, XAHVE, and mPath. The team’s vision is that SMArTVIEW will provide the basis of a scalable model for reducing the risk of serious complications following cardiac and vascular surgery globally.

Carolyn Byrne, RN, PhD, Associate Dean, Health Sciences; Director, School of Nursing; McMaster University
End-of-life stand brings peace to ICU

When a patient in the intensive care unit at Hamilton General Hospital is dying, a staff member places a podium outside their room. The simple metal stand is adorned with artwork depicting a man paddling a canoe down a winding river. This subtle symbol has made a world of difference for patients, families and staff on the unit.

The idea was born from the End-of-Life Committee, an initiative spearheaded by three nurses to improve the unit’s practices around end-of-life care. The ICU can be a busy place. It can be loud and hurried. Nurses, Edita Hajdini and Grace Houston, noticed that the atmosphere was weighing on staff, especially when someone was nearing death.

With support from Sue DiSabatino (RN), the pair surveyed over 100 ICU staff and physicians to learn what improvements could be made to the end-of-life process. Many who responded said that communication needed improvement and that they wanted more consistency in the way end-of-life care is delivered.

Using that feedback, Hajdini, Houston, DiSabatino and their team implemented a number of measures to improve end-of-life care in the ICU.

One of the simplest but most impactful additions they’ve made is the end-of-life stand. All three nurses agree that it has been transformative. Now, when someone is near death, a quiet, respectful calm washes over the unit. Hajdini says, “It has changed the atmosphere in our unit to make a more dignified death.”

The team has also implemented a standardized protocol for ordering medications and procedures at end-of-life, and created a cart stocked with tea, Kleenex, pamphlets and journals to bring to the bedside of a dying person.

Houston says, collectively, these initiatives have created consistency in the way their team delivers end-of-life care, which has been beneficial for both patients and staff.

“By supporting our nurses with tools to make their job easier, the patient and family will have an enhanced end-of-life experience.”

Bayshore HealthCare staying involved in innovative and exciting care treatments

Written by Nora Southon RN - wound care consultant, Bayshore Home Health

Bayshore HealthCare is one of the county’s largest providers of home and community health-care services. Bayshore provides nursing and personal support care in the Hamilton community. Recently, Bayshore has been involved in innovative and exciting diabetic wound care management.

Nora Southon has been a registered nurse for 42 years. For the past 10 years, Nora has worked for Bayshore as a wound care consultant. Nora’s passion for wounds began early in her career, first in the hospital setting and now in the community.

Nora has a passion for learning. It was at a Canadian Association of Wound Care (CAWC) conference that Nora was introduced to the gold standard of neuropathic diabetic foot ulcer management. This treatment is known as total contact casting. A cast is applied to the lower leg to reduce unnecessary pressure to a wound to allow for healing.

With physician support, Nora has successfully treated a 59-year-old, insulin dependent diabetic with osteomyelitis (infection in the bone). This client has had a wound on his foot for four-and-half years, despite having worn foot support and managing his blood sugars levels.

In the beginning, this client was very doubtful this treatment would be beneficial to heal his wound. The first cast was applied as directed by a physician and removed as per guidelines 24 hours later to check for any possible complications. A new cast was applied weekly over the next five weeks. Once the final cast was removed, the wound had successfully closed for the first time in four years. The final step to ensure success was two more weeks of casting to protect the newly closed wound.

After only seven weeks of this amazing treatment the wound that has existed for four-and-half years has remaint closed for over a year. This is just one of the many exciting things happening in our community.
Getting close is a risk worth taking for ICU nurses at St. Joe’s

Written by: Maria Hayes, Senior Public Affairs Specialist, Public Affairs Department, St. Joseph’s Healthcare Hamilton

It can be difficult to make an emotional connection with a patient who is too ill to stay awake, or whose speech is hampered by breathing tubes. These are scenarios found every day in the Intensive Care Unit at St. Joseph’s Healthcare Hamilton. All the technology being used can create a distance between patients and the professionals looking after them. But what about the spouse who sits tearfully at the bedside? Or the daughter who raced across four provinces to shore up her ailing parents?

“I went into nursing because I want to know about the patient. I want to know about the family,” says Tammy French, a St. Joe’s ICU nurse with two decades of experience. “I want to be that caring person that we all strive to be.”

It was a palliative care conference two years ago that inspired French, and fellow nurse Neala Hoad, to bring more personalized care to St. Joe’s ICU. For those unable to communicate, it would be up to families to provide the back story, the person’s ‘footprints’ leading up to St. Joe’s. ICU staff came together to help develop a list of questions that would define the person rather than the patient.

“The questions themselves go from practical, like do they need a hearing aid, do they wear dentures, do they need a cane, to something like where did they grow up? Do they have beliefs or practices that are spiritual in nature?” says Hoad.

The ‘Footprints Form’ is given to families shortly after arrival in the ICU. They can share as much information as they choose. Key, relevant responses are written on a Footprints whiteboard in the patient’s room for all staff to see at a glance. ‘He prefers Bill over William. He has seven grandkids. He loves fishing.’

Families are also asked to bring a picture for the whiteboard. “It gives us a chance to reflect on them as an individual as opposed to a person with a disease or a person with an illness,” says Hoad. “Footprints has humanized our care, and that was really the goal of the project.”

“It’s made a difference to families, hearing a nurse talk to their loved one about the family dog or playoff standings.”

“It’s made a difference for staff too,” adds French. “I think it’s made me a better nurse.”

From left to right: Tammy French, RN and Neala Hoad, RN.
You're young and you're sweet
So quick on your feet
You play and you laugh
Never let go of that giraffe
But the hospital's new
And Iggy's scared too
You don't know why you're here
And it's causing a lot of fear
See, at the young age of four
You were just trying to explore
You fell to the ground
From your backyard playground
Mom only just looked away
And now doesn't know what to say
Mom's heart came to a halt
She now thinks it's her fault
Mom is just so worried
And the doctors, they're so hurried
Some nurses, they smile,
But then don't come back for a while
So you clutch your stuffed friend
Waiting for this day to end…
That's when a nurse with a grin
Quietly walks in
She crouches to the ground
Her voice, a soft, comfortable sound
She quickly sees that you're stressed
And that issues need to be addressed
She puts her stethoscope on your giraffe
And this makes you laugh
She asks about school
And the things you find cool
By the time she looks at your cast
Mom's more relaxed, at last
She tells you you're a superstar
And reminds you just how brave you are
Then she looks over to mom
Sees there's still a problem
So she lets mom know she's there
By making room to share
City of Hamilton Public Health Nurses supporting and promoting breastfeeding 10 steps at a time

Jennifer Beck RN BSCN IBCLC, BFI Lead
City of Hamilton Public Health Services
Family Health Division, Breastfeeding Resource Team

Public Health Nursing is a diverse field in which nurses work directly with clients, but also behind the scenes to promote practices that lead to optimal health. One such practice seeks to ensure that infants receive nutrition that will promote optimal growth and development. The World Health Organization and Health Canada both recommend that mothers exclusively breastfeed their babies for six months and continue to breastfeed once solid food has been introduced for up to 2 years and beyond.

A team of Registered Nurses that work within the Family Health Division of Public Health Services in the City of Hamilton, ensure that these recommendations are not only promoted, but that mothers get the education and support required to reach their breastfeeding goals. This is available to families via two community breastfeeding clinics (in addition to hospital clinics at St. Joseph’s Healthcare Hamilton and Hamilton Health Sciences - McMaster), phone, email, home visits, prenatal classes, nutrition groups, Ontario Early Years Centres and on our Facebook page – “Healthy Families Hamilton.” Lactation Consultants are available to provide expert assessment and advice for breastfeeding challenges.

City of Hamilton Public Health Services is in the final stages in achieving “Baby Friendly” designation by the World Health Organization. Becoming a “Baby Friendly” organization means that City of Hamilton Public Health Services, along with community partners, will protect, promote and support breastfeeding, and breastmilk as the biologically appropriate food for babies. One important goal is to assist and educate parents to make informed choices about infant feeding. Support is offered regardless of choice. In order to achieve Baby Friendly designation, Public Health Services must implement ten practice outcome indicators or “steps” outlined by the Breastfeeding Committee of Canada and successfully pass a rigorous assessment process. In order to implement the 10 steps, the nurses utilize knowledge and skill in education, data surveillance, community assessment and building partnerships, as well as health promotion and marketing. City of Hamilton Public Health staff is made aware of how to support a breastfeeding mother in City programs, facilities and grounds.

If you would like more information about the Ten Steps or what Baby Friendly means to our community, please visit: www.hamilton.ca/public-health/health-topics/baby-friendly-initiative

To request breastfeeding information or support, please call Health Connections 905-546-3550

Congratulations and thank you to all nurses!

Nursing Week is an opportunity to celebrate and thank nurses for the contributions they make throughout the year.

Hamilton Niagara Haldimand Brant Community Care Access Centre is committed to putting patients and families first by providing safe, quality home and community care. Our care team members work together with patients, their families and community partners to promote independence for patients, helping them live in their homes safely for as long as possible.

HNHB CCAC is pleased to be recognized as an RNAO Spotlight Organization, using nursing best practice guidelines to support the design and delivery of patient care programs. Thanks to our nurses for your commitment to patient and family centred home and community care!

Melody Miles, RN, MBA
CEO, HNHB CCAC

Looking for Information About In-home or Community Support Services?

We’re Here to Help!

1.800.810.0000
Available 7 days/week 8:30am – 8:30pm
www.healthcareathome.ca/hnhb
Sepsis is a potentially deadly complication of infection. It triggers inflammation throughout the body, which can cause organs to fail. If it progresses to septic shock, blood pressure can drop to fatal levels. That’s why it is so important to detect sepsis early. The nursing team in the clinical neurosciences unit at Hamilton General Hospital has risen to this challenge.

They have been instrumental in implementing the Sepsis Simulation Project to improve early detection and prevention of sepsis. The program was developed by Dr. Alison Fox-Robichaud, a staff physician at Hamilton Health Sciences. Through the leadership of Keisha Jack, an RN and clinical manager of neurosurgery and neuromodulation at Hamilton General Hospital, two cohorts have completed training in early sepsis detection.

The project focuses on simulation training with a mannequin that mimics the real-life symptoms of early sepsis. In a realistic setting, the multidisciplinary team has to identify symptoms, and react quickly to prevent them from getting worse. The scenarios enable the team to work collaboratively to ensure the best possible outcome for the “patient.” After the simulation, the team debriefs with Dr. Fox-Robichaud to discuss how they can implement their new skills in frontline care.

Led by Jack, neurosciences nurses are taking the knowledge they’ve gained to the bedside of patients. As the most frequent point of contact, they are integral to problem solving and communicating concerns about possible sepsis cases. Jack says it, “allows the multidisciplinary care team to recognize, assess, inform and implement treatment early.”

Because of the project’s great success at Hamilton General Hospital, it recently expanded to Juravinski Hospital and Cancer Centre. More sepsis cases are being caught before they escalate which Jack says, “translates to positive outcomes for patients, staff and the organization.”

Nurse Tara MacCallum, clinical manager, Keisha Jack and Dr. Alison Fox-Robichaud demonstrate detection techniques on a sepsis simulation mannequin.

Thank you for spreading hope and happiness every day, through your care, commitment, and clinical excellence.

During Nursing Week, we celebrate YOU and all that you do.

Saint Elizabeth
Well beyond health care

www.saintelizabeth.com

As SEIU Nurses, we consistently deliver quality care and uphold our practice in the highest regard. We are the backbone of our sector, the pulse of our community.

#LoveNursing

HAPPY NURSING WEEK!

ONE GOAL. ONE TEAM. ONE VISION.
Delivering the right care to Patients and Families, when and where they need it

Nurses: With you every step of the way is the theme of this year’s Nurses Week across Canada. Hamilton Niagara Haldimand Brant Community Care Access Centre (HNHB CCAC) is proud to recognize all nurses for their significant contribution to improving the quality of health care throughout Ontario and across the country.

Nurses employed by HNHB CCAC and its contracted service providers ensure that people of all ages get the right care, when and where they need it at every stage of life.

HNHB CCAC nurses and other trained health professionals including physiotherapists, social workers and occupational therapists, serve our patients as care coordinators. Focused on putting patients and families first, they work together with patients to develop care plans to help them stay living at home safely for as long as possible.

With years of training and clinical expertise, care coordinators assess the needs of patients/caregivers and monitor their patients’ progress. With more people requiring home and community care and services, our care coordinators help people get the right care, in the right place, at the right time.

Care coordinators help people understand their options and connect them with safe, quality, community-based health care and resources.

As a person’s needs change, care coordinators work with patients, their families and care teams in many ways such as:

• Helping them transfer safely from hospital to home, convalescent care or rehabilitation
• Anticipating future care needs by providing information about options for assisted living, supportive housing, or long-term care
• Working in schools with children who have complex needs, allowing them to attend classes safely
• Collaborating with family physicians and other health and community services agencies to support people with age-related challenges, chronic health conditions and hospice palliative care
• Assisting people who need a family doctor and helping them access health information and services.

To our devoted nurses and other health professionals, HNHB CCAC expresses our sincere appreciation for your continued practice of putting patients and families first, and your strong advocacy of health promotion, education and health system innovation. We celebrate the nursing profession and thank all nurses for their dedication and commitment to delivering safe, high quality patient care!

Congratulations! You are a BScN Graduate!

This is the most expensive piece of paper I’ve ever been handed in my life. Now I just have to shake the Chancellor’s hand without tripping over my high heels. I am finally a nurse. Well, almost a nurse. I first have to pass my NCLEX (National Council Licensure Examination), and pay my membership to the College of Nurses of Ontario, and I will finally be able to write the coveted RN title at the end of my name.

Many have been saying that this is a troubling time for nursing. People are saying it is important to find a network and to find a mentor, a fellow nurse that can help you chart the waters of the abyss. I have done everything I need to - at least I think I have. I have been involved, I have networked with professors, I have learned so much in clinical, and here I am searching for a job.

At a time like this, many would feel alone in this process. Some graduates may feel overwhelmed or deterred from what looks to be unpromising prospects or a poor prognosis. However, as graduates we cannot see ourselves as alone in this profession where we care for people. If we look, there are nurses that care for their own. Whenever I find a fellow nurse, I am enthusiastically welcomed into a family that share so many things in common even if we do not know anything about the other nurse. As nurses there is a commonality threaded between all of us, the want and the vocation to care for those who cannot care for themselves.

When I attended my first RNAO Hamilton Chapter meeting a couple weeks ago, that is when it really began to feel like I was going to be a real registered nurse. As I sat around the table surrounded by incredible nurses who have careers spanning multiple decades, I felt honoured that I would be soon sharing the same title as them, Registered Nurse. As a New Graduate Nurse, I have come to realize that I am now part of a family of Registered Nurses. As I join this family, I know they will be there for me during my successes, during my tribulations, and through my greatest moments in care. This National Nurses Week I am celebrating the welcoming into the Registered Nursing family. I am so excited to begin my career!
Hamilton Chapter

Speaking out for Nursing. Speaking out for Health.

Thank you … to all the Hamilton Chapter members for your support and involvement in RNAO events and for continuing their memberships.

OVER THE PAST YEAR YOUR HAMILTON CHAPTER HAS BEEN ACTIVE:

• Meeting with Members of Provincial Parliament in their local offices
• Participating in “Take Your MPP to Work” days
• Hosting educational events for members
• Collaborating with and supporting nursing students at various student events
  • Representing its membership at the RNAO Annual General Meeting
  • Representing RNAO at our local hospitals’ Annual Reviews
• Hosting its 12th annual dinner in celebration of Nursing Week
• Recognizing exemplary nurses through chapter bursaries
• Queen’s Park on the Road

When you join RNAO, you join forces with over 41,000 registered nurses, nurse practitioners and nursing students in Ontario who support RNAO’s ongoing political activity. Membership benefits include legal protection, educational opportunities, current nursing and health-care information, and networking with diverse groups of RNs, NPs and nursing students, and provide their support to RNAO’s Strategic Directions.

Contact Us: 1-800-268-7199 or visit the RNAO web site www.RNAO.org

To contact your local chapter, visit: http://chapters.rnao.ca/hamilton/ and follow us on Facebook and Twitter.