



Nursing Students of Ontario: an Interest Group of RNAO



Registered Nurses' Association of Ontario

L'Association des infirmières et infirmiers autorisés de l'Ontario

Student Vibes



September 2008

Volume 1, Issue 1

Editor: Deep Jaiswal

Inside this issue:

Nursing After Graduation	1
Nursing in Northwestern Ontario	3
Giving My First Injection	4
The Intimidating World of Public Policy Development	4
2008-2009 Executives and Contact Info	6

Upcoming Events:

RNAO Fall BOD Placement
Sept. 24-27, 2008
www.rnao.org

Thriving in the Work Environment:
Leadership for New Grads Regional
Workshop
Oct 16, 2008
8am-4pm
Hart House, University of Toronto

Practical Ethics in Home-Based
Care: A Conference in Honour of St.
Elizabeth Health Care on Its 100th
Anniversary.
November 6, 2008
University of Toronto Campus

Pandemic Planning: Interdiscipli-
nary Perspective (INIG)
Nov 7, 2008
Mt. Sinai Hospital Auditorium
18th Floor
0830 - 1600

President's Message

NSO Members and
Colleagues,

My name is Tim Lenartowych and I am your NSO president for the 2008-2009 executive term. On behalf of the NSO executive it is our distinct pleasure to unveil the inaugural issue of our newsletter. It is hoped that this newsletter will serve to inform our members of NSO events/news; information on relevant nursing student issues and to showcase nursing student's written work.

The Nursing Students of Ontario (NSO) is a provincial interest group of the Registered Nurses Association of Ontario (RNAO). With over 2000 members and growing, we are an active group representing nursing students from all across

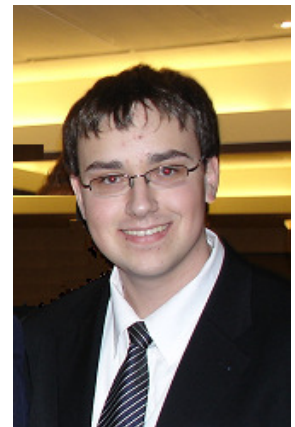
Ontario. We strive to promote nursing student issues at different levels and work in active collaboration with RNAO. Both RNAO/NSO have been an instrumental force on many nursing student issues. As nursing students, we represent the nurses of tomorrow and have the potential to play a pivotal role in both shaping and influencing the future of the nursing profession.

We are very fortunate to have an excellent executive committee that is working hard on projects for the upcoming year. In addition to our newsletter I would encourage you to visit the NSO website at www.nso-eio.ca for regular updates and please feel free to contact me with any ques-

tions or concerns that you may have.

Sincerely,

Tim Lenartowych
NSO President
tlenarto@uwo.ca



Nursing After Graduation:

Wait When Did That Happen?

Work, home, sleep, work, home, sleep...this is what my life has become in the days and weeks since

graduation. You go through 4 years of school waiting for that moment when you can actually call yourself a nurse and when it finally happens you're just too tired and over-

whelmed to realize it! When I got the NSO's email request for a newsletter article the other day, I was almost insulted. I am **NOT** a student anymore, I thought, I **AM** a

a nurse. Wait, what was that?! Me, a nurse, when did **that** happen? That's when I knew I had to write something about this transition.

Upon finishing school, I accepted a position in the Thunder Bay Regional Health Sciences Centre Emergency Department and promptly moved 1500 kilometres away from everyone, and everything I know and love. The start of a new adventure I claimed and that's exactly what it turned out to be. My first day was filled with fear and excitement as I walked into my new home. The place I would make new bonds, new friendships and would learn more than I ever did in school. The place where I would become a nurse!

When I started in the department I was a mess. I didn't know where anything was, I didn't know how to use the monitors, I didn't even know how to turn on the lights! I felt like a complete failure. I wanted to go home and forget about this entire nursing idea. Every time I introduced myself to a patient it was an odd and usually awkward conversation with me trying to explain that I was new, but not a student, that I'd just finished school, but was new to the area. I felt completely unprepared to be calling myself a nurse.

Over the last couple of months, with a lot of help from my preceptors and all the other nurses and staff in the department, finding things and taking an active role everyday has become more natural. I have become certified in a number of things we don't learn in school. I can make better assessments than I ever have in the past and I can even turn the monitors on without too much difficulty. I have become a nurse!

Being a nurse is not about that piece of paper that we all crave at the end of 4 years,

it's a mindset. It's knowing what to do and when. It's being prepared to deal with the consequences of whatever you are doing. Being a nurse is something to strive for, something to reach for and something that isn't granted to you just because you passed. Being a nurse is a lifestyle, one that I'm still trying to figure out. You may have completed nursing school and written the nursing exam, but that doesn't make you a nurse. There is a shift in your thinking that has to happen to take you out of that learning, 'I'm a student' mode and into being a nurse. I can't tell you how to do it, I'm not even sure when it actually happened for me, but I can tell you that one day, all of a sudden, you will introduce yourself as a nurse to your patient and you'll know, you **ARE** a nurse!

Now if I could just figure out all those light switches, I'd be set...

By

Leah Chesney, BScN

Conestoga/McMaster Grad 2008

CNA Student Membership Update

In June of 2008, members of the NSO executive were in attendance for the Canadian Nurses Association (CNA) Annual General Meeting (AGM) held in Ottawa. This was a historic event as a by-law revision was successfully passed allowing nursing students to gain a student membership within CNA. In Ontario to gain CNA student membership, nursing students must be a student associate of both the RNO/NSO and a member of the Canadian Nursing Student Association (CNSA). Congratulations to all involved!



Nursing in Northwestern Ontario:



Could it be for you?

Northwestern Ontario is a very unique and culturally diverse region. It provides a wide range of clinical challenges which require interdisciplinary collaboration among health care providers. The delivery of health care services relies on the partnership of many hospitals in the region. For example, the Thunder Bay Regional Health Sciences Centre (built in 2004) collaborates with over 30 regional centres and clinical partners to provide world class care. Nursing students and other health care professionals face difficult challenges on a daily basis and must work hard to address the population's cultural barriers and varying illnesses. The region certainly feels the effects of the nurse and physician shortage, and continually faces the challenge of code gridlock (where the hospital is at full patient capacity). As well, distance and remoteness of clients can also cause problems. Many clients must travel far distances to receive treatments, which can be exhausting and expensive. Although difficult at times, these clinical challenges do not outweigh the rewarding experience of working in Northwestern Ontario.

As a nursing student at Lakehead University, I have had the opportunity to practice in a variety of placements in Thunder Bay. I will never forget one of my first clients, an Italian woman, who had been living in the care centre for about one year. She did not speak English and at times, it was very difficult to try and create a therapeutic nurse-client relationship with her. She had an amazing view of Lake Superior from her room, and I often found her sitting in

front of the window, watching the lake for hours at a time. One day, I had more time to spend with this particular client, so I pulled my chair up beside her and tried to initiate conversation. After several unsuccessful attempts, I decided that silence would be the best therapeutic technique to use in this case. After about 10 minutes, I quietly sighed and said "just beautiful". She looked at me, patted my hand and smiled. Although we did not have a verbal conversation, I could tell that she really appreciated my presence. I believe this to be a spiritual experience for my client and myself. A quote by Emily Dickinson sums up this experience from my perspective: "Saying nothing...sometimes says the most".

Unique experiences, such as the one previously mentioned, have made me extremely proud to be a part of the emerging health care field in Northwestern Ontario. It offers a unique clinical experience and allows nursing students to grow both personally and professionally. Every day I am surrounded by caring citizens and the beautiful shores of Lake Superior. Thunder Bay is a thriving city, and has so much to offer. I am honoured to call Northwestern Ontario my home.

By

Alyson Hill , Year 2

Lakehead University



"... I decided that silence would be the best therapeutic technique to use in this case. After about 10 minutes, I quietly sighed and said "just beautiful". She looked at me, patted my hand and smiled."

Giving my First Injection:

Bitten By A Shark

As a Nursing Student it can be very scary giving an injection to a patient for the first time. In my case I will never forget the experience I had giving my first injection to a patient. For weeks I can remember practicing on my orange and beginning to feel fairly confident that at the very least, I was not going to miss my patients arm. I always prepared everything I needed and went through each step in my head before actually taking the cap off the needle. Washed my hands,
 Check.....Alcohol Swab,
 Check.....Injection,
 Check.....Right Patient, Right Room, Check.....Okay give injection, check....Yeah right!

So for the first injection I ever gave, I had everything I

needed. Although it was not the smoothest injection ever given, and although my patient said “ouch”, it went well, or so I thought. A few minutes later when I came back into the room, I overheard a nurse talking with my patient about

“Although it was not the smoothest injection ever given, and although my patient said “ouch”, it went well, or so I thought.”

something. All I could hear were the words.... “I feel like I was bitten by a shark!” Well, as a first year student and having just done my first injection ever, I assumed he was talking about the injection I gave! I felt like the worst nurse ever. Then and there I decided that before I ever gave another injection again, I needed to buy a few more crates of oranges to practice on. After telling the other Nurse who was helping to care for my patient about what I had heard, she burst out in laughter. She then contin-

ued on to tell me that my patient had just seen the staples on his back wound for the first time, and thought that it looked like he had been bitten by a shark. Well, I wasn’t sure if I should laugh or cry, but at least I would not have to spend my money on buying more oranges. Now looking back, I laugh at the story but at the time, I felt like I was the worst Nurse ever. So my advice to all Nursing students giving injections, don’t doubt yourself and have confidence in your skills. Although that first injection can be tough, most times your patient will not feel like they have been bitten by a shark.

By

Ashley Harrison, Year 4

University of Western Ontario



The Intimidating World of Public Policy Development:

Where do we begin?

As a student in an accredited collaborative nursing program, I have learned a great deal of information over the past 3 years of my student attendance. Health assessment, practical skills, nursing theory and abstract learning, but none of this would prepare me for the fear I encountered when I arrived at my first community clinical placement at the local health unit and was confronted with this daunting word—“POLICY”.

Throw a blood pressure reading at me, the pathophysiology of heart failure, medication admini-

stration, piece of cake, but participating in the creation of an alcohol policy for a local community college, I had no idea where to begin!

What is a policy anyways? Nurses are involved in the creation of policies? Since when? I was baffled.

In doing research regarding healthy public policies and consulting the various theories of the mystical “Upstream Approach” to promoting population health, it all started to make sense. Nursing goals and actions and the development of healthy public policies are a perfect fit. Public policies are aimed at reducing risk and increasing the safety and health of groups, communities and populations. They include recommendations, regulations and sanctions that set out behaviours and actions that are acceptable and healthy, and those that are not. Nurses can be an instrumental piece in advocating for their community leaders, key stakeholders and coalition partners to adopt and strive towards creating healthy public policies.

Creating policies is not a walk in the park. Some opposition can usually be expected (occasionally conflict and public debate even emerge). Whether it be creating healthy public policy and ultimately a law regarding seat belt use, workplace violence policies to ensure the safety of workers, no-smoking policies to promote the health of communities or alcohol policies on college campuses to keep students and others safe, policies can be created for a variety of purposes. As you can see, they can very well be controversial, with some even being played out in the eye of the media. However, nurses can affect not just one person, but hundreds and thousands, even entire populations when collaborating on introducing healthy public policies. Nurses can help influence the health and well being provincially and nationally because policies are far reaching and influential documents.

We as nurses and nursing students are in a perfect position to promote the health of individuals, families, communities and populations. Helping facilitate and empower communities and groups to implement healthy public policies can be a first step in a comprehensive macro level approach to health promotion. To my surprise there is not much emphasis in literature, text or in nursing curriculum that introduces policy development as an avenue nurses can traverse to affect populations as a whole. Perhaps many do not consider policy development to be pertinent in their professional nursing realm. There needs to be more emphasis and education regarding policy development and implications to prepare students as the leaders of tomorrow’s healthcare. Nursing curriculum should emphasize and explain how policy development works, who is involved, the type of work that is involved and the roadblocks that one may face. Policy affects all health sectors, from institutions and hospitals to public and community health. It makes perfect sense that in addition to equipping students with practical and theoretical skills regarding patient care, that there should be attention given to education regarding influencing the larger healthcare picture.

The future nursing trail blazers and public activists will no doubt be involved in policy development, aiming their sites at making the environment we live in safe and healthy and ensuring that we are all able to live our lives to the fullest. Healthy public policy is the right medicine at just the right dose and precisely the right route to help ensure the wellness of our communities and populations. Are you in the know?

Author:

Meghan Wigle, Year 4

University of Windsor



RNABO

Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario

NURSING STUDENTS OF ONTARIO

2008-2009 NSO Executive

President Tim Lenartowych tlenarto@uwo.ca	Vice President Anton Leung a29leung@ryerson.ca	Student Affairs/Newsletter Ed. Deep Jaiswal djaiswal@ryerson.ca	
Academic Affairs Brandon Douglas bldouglas_87@hotmail.com	Charitable Foundations Elizabeth Heelam eheelam@uwo.ca	CNSA Liaison Alison Helmer alley.helmer@gmail.com	
Northern Rep Alyson Hill avhill@lakeheadu.ca	Southern Rep Nathan Kelly nk06cn@brocku.ca	Western Rep Ashley Harrison aharri45@uwo.ca	Central Rep Titus Lo t2lo@ryerson.ca
Secretary Tina Aditya taditya@ryerson.ca		Executive Assistant Sara Saleh ssaleh@yorku.ca	

Nursing Trivia

- 1) According to the CNO, approximately how many RN's practice in Ontario?
- 2) How many RNAO Best Practice Guidelines are currently in publication?
- 3) As of what year, was the entry to practice for new Registered Nurses changed to a baccalaureate degree?
- 4) In Ontario, nursing is a self regulated profession. (True or False?)
- 5) In what year was the RNAO incorporated?



Send in your answers to: president@nso-eio.ca and we will feature the winner in our next newsletter!



We are on the Web!
<http://www.nso-eio.ca/>