



# Annual Report

Canadian Association of Critical Care Nurses

APRIL 1, 2012 — MARCH 31, 2013

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[www.caccn.ca](http://www.caccn.ca)

The voice for  
*excellence*  
in  
Canadian Critical Care Nursing



**SPEAK** with  
**CONVICTION**

# Board of Directors 2012-2013



CACCN...  
The Voice for  
Canadian  
Critical Care  
Nurses

**Teddie Tanguay**  
President

Teddie is from Edmonton, AB and has represented the Western Region for the past five years. Teddie is no stranger to the CACCN Board and her experience is appreciated. Over the past year, Teddie was instrumental in reintroducing Canadian Intensive Care Week and steering the Board of Directors through the application for Leave to Intervene at the Supreme Court of Canada.

**Karen Dryden-Palmer**  
Vice-President

Karen is from Barrie, ON and represents the Central Region. She currently holds the portfolio of Dynamics Liaison. Karen has been instrumental in the development of Dynamics policies and procedures. Karen is also working on the CACCN Position Statement review and will assume the role of President in March 2014.

**Céline Pelletier**  
Secretary, Membership  
Partner Relations

Céline is from Yellowknife, NT and is the Director at Large. Céline manages Secretary/Communications/Partner Relations portfolio with responsibility for membership, certification and our partners.

**Ruth Trinier**  
Treasurer

Ruth is from Toronto, ON representing the Central Region. She currently holds the position of National Treasurer for the Association. Ruth has been instrumental in reviewing our financial position including our investment portfolio, offering advice to ensure CACCN remains financially viable.

**Tricia Bray**  
Director

Tricia is from Calgary, AB and represents the Western Region. She currently holds the portfolio of Publications and Research. Tricia was appointed for an additional one year term in March 2013. Tricia has been on the Board of Directors for the past five years and has been instrumental in the redesign of Dynamics: The Journal of CACCN, the CACCN Standards for Critical Care Nursing Practice and is currently leading a CACCN Position Statement Review Committee and the CACCN Research Committee. Tricia was the Chairperson for Dynamics 2012 in Vancouver, BC.

**Barb Fagan**  
Director

Barb is from Middle Sackville, NS and represents the Eastern Region. She currently holds the portfolio of Awards and Corporate Sponsorship. Barb has been instrumental in raising the awareness of the Awards/Grants CACCN has available for members. Barb is also the chairperson of the CACCN Merit Award Committee working on establishing criteria for an IC Unit award.

**Kirk Dawe**  
Director

Kirk is from St. John's, NL and represents the Eastern Region. He currently holds the Website portfolio ensuring our site remains fresh, up to date and revisions remain on budget.

## Chapter Presidents 2012-2013

British Columbia Chapter  
Calgary Chapter  
Greater Edmonton Chapter  
London Regional Chapter  
Manitoba Chapter  
Montreal Chapter  
New Brunswick Chapter  
Nova Scotia Chapter  
Ottawa Regional Chapter  
Saskatchewan Chapter  
Toronto Chapter  
Vancouver Island Chapter

Leanna Ritchie  
Lesley Brideau  
Liane Manz  
Brenda Morgan  
Tannis Sidloski  
Christine Echegaray-Benites and Mélanie Gauthier / Kathy Yeomans  
Julie Weir  
Erin Sarrazin / Sandra Matheson, Interim President  
Adam Lamoureux  
Marian Hutchinson  
Ingrid Daley  
Carrie Homuth

Dynamics Editor

Paula Price

Chief Operating Officer

Christine R Halfkenny-Zellas



# President's Letter



On behalf of the Board of Directors (BOD) and the Chief Operating Officer (COO) Christine Halfkenny-Zellas, I am pleased to present to you the annual report of the Canadian Association of Critical Care Nurses (CACCN) for the fiscal year April 1, 2012-March 31, 2013. In keeping with the President's theme of "**Speaking with Conviction**," the BOD has worked diligently in the past year to raise the profile of CACCN and to promote the Association as "**the voice of excellence for critical care nursing in Canada**" through a number of strategies including:

- Re-introduction of **Canadian Intensive Care Week** to celebrate the critical care team and to raise the profile of critical care to government, public and other health care professionals.
- Increased partnership participation with a number of associations and groups including **aC<sup>3</sup>KTion Net** and the Canadian Blood Services Advisory Committee on Deceased Donations. In our partnership with aC<sup>3</sup>KTion Net, we are involved in promoting Knowledge Translation in Critical Care. Our involvement with the Canadian Blood Services, will help to shape the policy and practice on deceased donation in Canada.
- Continued linkage with the Canadian Critical Care Society (CCCS) and the Critical Care Canada Forum (CCCF) to strengthen relationships between critical care physicians and nurses on issues of mutual interest and to foster future collaboration opportunities.
- CACCN has been successful in establishing ties with critical care nursing education programs across the country to congratulate graduates and promote CACCN as their professional speciality association.
- Continued promotion of the CACCN discussion forums within the Members-Only Section of the website to provide an opportunity for best practice discussions and dialogue amongst members.
- Introduction and development of the CACCN Mentorship Program that was led by Karen Dryden-Palmer. This initiative was a idea that was fostered from our relationship/partnership with AACN. The pilot of our mentorship program is proving to be a success and we hope to continue to develop this important program benefit for our members. For more information please read the mentorship report on page 17.
- Karen Dryden-Palmer, Vice President and I attended the *American Association of Critical-Care Nurses (AACN) National Teaching Institute (NTI)* conference in Orlando, Florida to dialogue and strengthen the linkage/partnership between our associations. This meeting reconfirmed the commitment by both CACCN and AACN to work together on critical care nursing issues, share resources and promote one another as opportunities arise. The Past President of ACCN will attend the Dynamics of Critical Care Conference annually and CACCN will continue to have an executive presence each year at NTI. Our partnership has resulted in increased international members, increased exhibitors at our Dynamics conference, as well as many ideas on initiatives that would be a benefit to our members.
- CACCN has continued to seek additional international partnerships with the Australian College of Critical Care Nurses (ACCCN) and the Irish Association of Critical Care Nurses (IACCN). CACCN was also approached by the new Cameroon Association of Critical Care Nurses (CCCN) to share information and resources.
- CACCN continues to receive requests for article reprints from Dynamics: Journal of the Canadian Association of Critical Care Nurses, proving once again that critical care nurses in Canada are doing work and writing articles of interest to those in Canada and abroad.



## **Dynamics of Critical Care Conference 2012**

The Dynamics of Critical Care Conference 2012 was held in Vancouver, British Columbia, chaired by Tricia Bray and a volunteer planning committee. Dynamics 2012 was successful on all fronts, as their theme of "*Voices of Conviction from Sea to Sky: Speak Up, Speak Out, Be Heard*" showcased the incredible knowledge and expertise of critical care nurses. On behalf of the Board of Directors, I thank Tricia and her team for their efforts and congratulate them on a job well done. For more information, please read the Dynamics 2012 Conference Report on page 13.

## **Dynamics: Journal of the Canadian Association of Critical Care Nurses**

Editor Paula Price and the Editorial Review Board continue to have a strong commitment to not only publishing the journal four times a year but also mentoring and encouraging many new writers to find their voice and become published authors. I encourage all members to share their knowledge with others by writing an article for Dynamics Journal. If this is your first time consider joining the mentorship program on writing for publication run by Dr. Paula Price. For more information, please read the Dynamics Journal Report on page 9.

con't on page 4

# President's Letter (con't)



**CACCN**  
encourages  
critical care  
nurses to write  
the CNA  
Certification  
Examination in  
our specialty

## Adult

**37 nurses**  
Initial  
Certification

**39 nurses**  
Renewed  
Certification

## Pediatric

**3 nurses**  
Initial  
Certification



### **Supreme Court of Canada: Leave to Intervene**

During Kate Mahon's term as president, the CACCN Board of Directors made the decision to seek application for Leave to Intervene to the Supreme Court of Canada in the Ontario case of *Mr. Hassan Rasouli v. Sunnybrook Health Sciences Centre, Dr. Brian Cuthbertson and Dr. Gordon Rubenfeld*. This case illustrates the difficult nature of decision-making between the health care providers and the family/SDM when disagreement arises around withdrawal of treatment and conflict results. After lower court rulings and an appeal this case was brought before the Supreme Court of Canada.

The BOD felt that the voice of critical care nurses had not been heard in the case and as ICU nurses we are uniquely positioned to provide a valuable and unique perspective on this issue. As such the BOD applied and received Leave to Intervene in July 2012 at which time we continued to work closely with our legal counsel to develop the factum that formed our application presented before the Supreme Court Justices on December 10, 2012.

The CACCN BOD utilized the Canadian Nurses Association Code of Ethics, the CACCN Position Statement "End-of-Life in the Intensive Care Unit" and the CACCN Standards for Critical Care Nursing Practice (4<sup>th</sup> Ed) in the preparation of the factum. Information and documentation pertaining to the application for Leave to Intervene and the application was shared with CACCN Members via the President's Blog and the Members' Only Forum.

The legal team led by Rahool Agarwal from Norton, Rose (Toronto) are thanked for the work they put in to the presentation on a pro bono basis. A ruling by the Supreme Court is expected in the coming year. For more information, please read Leave to Intervene, Supreme Court of Canada on page 17.

As I conclude the first year of my term as President of the BOD, I wish to thank my BOD colleagues and CACCN members working on committees for their commitment to carrying out the vision and mission of CACCN on behalf of our members.

I invite you to read the detailed reports of the Directors of the BOD, the COO and the Editor of the journal to fully appreciate the work of your national Board over the past year.

I respectfully submit this annual report for 2012-13 to all our members of CACCN.

**Teddie Tanguay, MN, NP, RN, CNCC(C)**  
President

**SPEAK with  
CONVICTION**



### **CACCN Board of Directors 2012-2013**

Front l-r:

Teddie Tanguay, President  
Tricia Bray, Director

Back l-r:

Karen Dryden-Palmer,  
Vice President  
Ruth Trinier, Treasurer  
Kirk Dawe, Director  
Barbara Fagan, Director  
Celine Pelletier, Director

Christine Halfkenny-Zellas, COO

# Membership

Membership in CACCN as of **March 31, 2013** was **1156**. This compares with a membership of 1083 on March 31, 2012—an increase of 95 members. CACCN continues to strive to increase the voice of critical care nursing in Canada through a stronger membership and a more visible presence. CACCN recognizes the hard work of all chapters with recruiting new members and retaining current members.

**Chapter Recruitment and Retention** - The following chapters received CACCN Tuition Coupons for Dynamics 2013 to recognize their recruitment and retention efforts for the fiscal year, April 1, 2012 to March 31, 2013:

<b>Recruitment:</b>	<b>Min. 25% of membership is “new”</b> (one full tuition coupon)	<b>Toronto</b>
	<b>Min. 33% of membership is “new”</b> (one full tuition coupon and one partial tuition coupon)	
	<b>British Columbia</b>	<b>Greater Edmonton</b>
	<b>Nova Scotia</b>	<b>Ottawa Regional</b>
		<b>Manitoba</b>
		<b>Saskatchewan</b>
		<b>Montreal</b>
		<b>Southern Alberta</b>
<b>Retention:</b>	<b>Greater than 60% renewal</b> (one partial tuition coupons)	
	<b>British Columbia</b>	<b>Saskatchewan</b>
		<b>Southern Alberta</b>
	<b>Greater than 70% renewal</b> (two partial tuition coupons)	
	<b>Nova Scotia</b>	<b>Ottawa Regional</b>

CACCN welcomed 64 **new members** through the referral program issuing **\$580** in certificates.  
**Thank you** to these following members for their referrals:

Susan Anderson	Rene Favre	Mary Irvine	Daniel Milhomme	Teddie Tanguay
Marie Aue	Monique Fernquist	Darryl Jamero	Joy Mintenko	Julie Weir
Neil Bacon	Judith Fraser	Karen Jensen	Mai Nguyen	
Jennifer Balfour	Jacqueline Gannon	Nicki Johal	Kelly Nicholson	
Laura Berkvens	David Gee	Chad Johnson	Caroline Penner	
Johanne Bernier	Denise Geroux	Jody Johnson	Monica Pfenniger	
Kathy Bouwmeester	Jennifer Graf	Adam Lamoureux	Rhonda Porter	
Tricia Bray	Gail Hannah	Nancy Li	Karen Rafuse	
Susan Cameron	Heather Harrington	Kari Litzenberger	Laura Robinson	
Heather Colaco	Leanne Hern	Kate Mahon	Pat Rodgers	
Lissa Currie	Linda Hesketh	Liane Manz	Beth Romeril	
Ingrid Daley	Carrie Homuth	Linda Masse	Beth Ruskowski	
Kirk Dawe	Pamela Hruska	Meighan McColl	Charlotte Ryan	
Sue Dooley	Marian Hutchinson	Sarah McLeod	Lynn Shortt	
Christine Echegaray-Benites	Cecilia Hyslop	Anne Mercer	Lyne St-Louis	

*Thank you  
for  
supporting  
CACCN*

## CNA Critical Care Certification

CACCN encourages critical care nurses to write the CNA Certification Examination in our specialty

The 2012 Adult and Pediatric Critical Care Certification examinations were written in April 2012.

### Adult - CNCC(C)

- **Thirty-seven (37)** CACCN members wrote the exam
- **Thirty-nine (39)** CACCN members renewed

### Pediatric - CNCCP(C)

- **Three (3)** CACCN member wrote the exam
- No CACCN members who renewed their CNCCP(C)

CACCN holds an annual certification draw at the Dynamics of Critical Care Conference to award members who successfully completed the examination.

In September 2012 in Vancouver, BC, the following nurses were drawn to receive \$250 each in support of their efforts in successfully passing this the this examination and obtaining the adult credential- CNCC(C) and the pediatric credential- CNCCP(C)

### Adult certification:

Jenny Kent, St. Albert, AB  
 Paisley Marshall, Whitby, ON  
 Renee Regimbal, Yorkton, SK

### Adult Recertification:

Richard Sutherland, Thunder Bay, ON  
 Julie Weir, Riverview, NB

### Pediatric Certification:

Patricia Santos, Brampton, ON  
 Karen Sokalski, West Vancouver, BC

*Congratulations to all members who  
 successfully certified and re-certified!*

*Céline Pelletier*

Céline Pelletier, MN-ACNP, NP, RN, CNCC(C)  
 CACCN Director



# Awards and Corporate Sponsorship



*Thank you*

to our

Award Review

Committee Members

**BBraun Mentorship Award**

**The Spacelabs Innovative Project Award**

**Gwen Thompson  
Chad Johnson  
Glenda Roy**

**The Editorial Awards**

**Penny Nickle  
Karen Lecomte  
Sandra Matheson**

**The CACCN Research Grant**

**Franco Carnevale  
Paula Price  
Gwynne MacDonald**

Along with our corporate partners, CACCN is pleased to acknowledge and reward the outstanding contributions of critical care nurses through our various awards. Critical care nurses make a difference every day in the lives of their patients and families, and their peers and workplaces. The CACCN awards provide recognition of these contributions.

Thank you to the Awards Review Committees:

*BBraun Mentorship / Spacelabs Innovative Project Award:*  
Chad Johnson, Glenda Roy and Gwen Thompson;

*Editorial Award Reviewers:*

Karen Lecomte, Sandra Matheson and Penny Nickle;

*CACCN Research Grant Reviewers:*

Franco Carnevale, Gwynne MacDonald and Paula Price,

CACCN Award sponsors were:

- Smiths Medical Canada
- Spacelabs Healthcare
- BBraun Medical
- Cardinal Health Canada
- Draeger Medical Canada
- CACCN

Formal recognition of each award recipient by CACCN members and our corporate partners took on September 23, 2012 in Vancouver, BC.

***Draeger Medical Canada Chapter of the Year Award***

Congratulations to the **Greater Edmonton CACCN Chapter**.

This award of \$500 with a plaque recognizes the efforts, contributions and dedication of a CACCN chapter as they carry out the purposes and goals of the association.

***Spacelabs Healthcare Innovative Project Award:***

This award is presented to a group of critical care nurses who develop a project that will enhance their professional development. The total award available is \$ 1,500.00.

The Spacelabs Healthcare Innovative Project Award was granted to the **ICU Early Mobility Team at the Royal Alexandra Hospital**, Edmonton, AB for their project "*Early Mobility in the Intensive Care Unit*".

Spacelabs Healthcare generously awarded the full funding available to this project.

The **BBraun "Sharing Expertise" Award** is presented to an individual who exhibits stellar leadership and mentoring abilities in critical care.

The deserving recipient was **Orla Smith**, Toronto, ON. Orla is the CCD Research Manager at St. Michael's Hospital, Toronto, ON. Orla was nominated by Cecilia Santiago.

***Cardinal Health Chasing Excellence Award***

This award is presented to a CACCN member who consistently demonstrates excellence in critical care nursing practice. Valued at \$1000, the funds are to be used for continued professional/leadership development.

The Cardinal Health Chasing Excellence Award was presented to **Brenda Drouillard**, Toronto, ON. Brenda is a bedside nurse at the Labatt Family Heart Centre's Cardiac Critical Care Unit, Hospital for Sick Children. Brenda was nominated by Cecilia St. George-Hyslop.

***Editorial Awards:***

Our 2 Editorial Awards are provided for articles that demonstrated the achievement of excellence in the area of critical care nursing and appeared in Dynamics, the Journal of the Canadian Critical Care Nurses.

***First Place: \$ 750.00***

The first prize award recipients were **Franco Carnevale** and **Josée Gaudreault**, Montreal, QC for their article: "*The Experience of Critically Ill Children: A Phenomenological Study of Discomfort and Comfort*", published Spring 2013.

***Runner Up: \$ 500.00***

The second prize was awarded to **Elizabeth Gordon, Brenda Ridley, Janine Boston and Eileen Dahl**, Toronto, ON for their article, "*The Building Bridges Initiative: Learning With, From and About to Create an Interprofessional End of Life Program*", published Winter 2012.

***CACCN Research Grant***

A CACCN research grant has been established to provide funds (\$2,500) to support the research activities of a CACCN member that are relevant to the practice of critical care nursing.

The CACCN Research Grant recipients were **Louise Rose, Sangeeta Mehta, Lisa Burry and Elena Luk** for their research project "*Predictors of Restraint use in a Multicenter Randomized Trial comparing Protocolized Sedation with Daily Sedation Interruption versus Protocolized Sedation Alone*".

# Awards Continued...

**smiths medical**  
bringing technology to life

### Smiths Medical Canada Educational Awards

This Educational award (\$1000.00) provides funds to assist critical care nurses to attend continuing education programs at the baccalaureate, masters and doctoral level. Smiths Medical sponsors 2 educational awards each year.

**Fall 2012** award recipient was **Linda Long**, Brampton, ON. Linda is enrolled in the Master of Nursing Program through Athabasca University.

**Winter 2013** award recipient was **Chad Johnson**, Thunder Bay, ON. Chad is pursuing his Master of Science in Nursing (CNS Tract) at the University of Indiana.



### Brenda Morgan Leadership Excellence Award

This award for excellence in leadership is presented to a nurse who, on a consistent basis demonstrates outstanding performance in the area of leadership in critical care.

The deserving recipient of the 2012 Brenda Morgan Leadership Award was **Linda Nusdorfer**, Mississauga, ON. Nominators: Rob Fuerte, Shahnaaz Dhalla and Angie Jeffs.

### Linda Nusdorfer

*...innovator, collaborator, mentor, life long learner, role model...*

Brenda Morgan, Linda Nusdorfer and Teddie Tanguay,



"I would like to nominate Linda Nusdorfer for the 2012 Brenda Morgan Leadership Excellence Award. Linda's dedication and diligence is well known to the Toronto Chapter executive of CACCN. Over the years she has given of herself and contributed to many hours to ensure the growth and cohesion of the chapter. She is recognized within the critical care community as having high standards and committed to enhancing critical care nursing experience, and ultimately patient outcomes".  
~ Rob Fuerte

"Linda is a true visionary who has been an inspiration to everyone around her over the last few years. Her knowledge and insight have been exemplary and truly reflect her dedication to improving quality of care and patient outcomes in the critical care areas".  
~ Shahnaaz Dhalla

"Linda is described as a person who is grounded to the realities of front-line nurses, respected for her knowledge, easy to approach and converse with. She demonstrates integrity and seeks to resolve issues through her problem solving skills. Linda is dedicated and committed to the advancement of critical care nursing on both a clinical and professional practice level. Her contributions to the specialty of critical care over the span of her nursing career are gratefully acknowledged".  
~ Angie Jeffs

The National Board of Directors is pleased to extend congratulations to our award recipients and to thank your sponsors for their continued support of critical care nurses.

*Barbara Fagan*

**Barbara Fagan, BScN, Rn, CNCC(C)**  
CACCN Director

*Chapter of the Year  
Greater Edmonton Chapter*



*Thank you*

to our  
corporate  
partners

BBraun Medical  
Cardinal Health  
Edwards  
Lifesciences  
Smiths Medical  
Spacelabs

for their ongoing  
commitment  
through support of  
nurses education,  
awards and  
sponsorship.

Application criteria  
for all awards can  
be found at  
[www.caccn.ca](http://www.caccn.ca).





**Congratulations to**  
**Linda Nusdorfer**  
 recipient of the  
**Brenda Morgan**  
**Leadership**  
**Excellence**  
**Award**  
**2012**

# CACCN Website: [www.caccn.ca](http://www.caccn.ca)



## What's happening on the CACCN Website

The past fiscal year has been very busy for the website portfolio. Please find some highlights below:

**CACCN Database:** CACCN has implemented a new web based database. This database offers National Office greatly improved options for data analysis and reporting. Members are able to renew their membership by directly logging onto the website. In the near future the database will also provide automatic renewal for members on an annual or biannual basis.

### Social Media

#### Facebook

- The CACCN Facebook page has been active for the past fiscal year.
- Be sure to log into Facebook and "like" our page to receive up to date information: [www.facebook.com/pages/Canadian-Association-of-Critical-Care-Nurses-National/12100147797759](http://www.facebook.com/pages/Canadian-Association-of-Critical-Care-Nurses-National/12100147797759).

#### Twitter

- CACCN is also on Twitter under the username CACCN1: [twitter.com/CACCN1](http://twitter.com/CACCN1)

**Discussion Forum:** The CACCN Discussion Forum has also seen some recent activity with implementation of the online Mentorship Program and general discussion questions from members.

Sincerely,

**Kirk Dawe, MN, NP, RN**  
**CACCN Director, Website**



## Research

The CACCN Research Committee was active this past year working on and distributing the survey:

- "Critical Care Nurses Attitudes Towards Research"**
- Survey information/results will be forthcoming in the future.

CACCN has also been active with the following projects:

- As reported in spring 2012, Teddie Tanguay and Tricia Bray, representing CACCN, participated in the **PEP uP Study** for critical care nutrition as members of the study steering committee. Dissemination of the findings took place in 2012-2013 with manuscript submissions to peer reviewed journals and conference presentations. Further information can be found at [www.criticalcarenutrition.com](http://www.criticalcarenutrition.com).
- Transfer Tool Study:** the study committee is waiting on grant approval
- a<sup>C</sup>K<sup>T</sup>ion Net:** the **C**anadian **C**ritical **C**are **K**nowledge **T**ranslation **N**etwork, a Canadian Institutes of Health Research funded initiative which seeks to improve the implementation of evidence informed best practices in critical care. Further information can be found at [www.acktionnet.ca](http://www.acktionnet.ca).

CACCN also distributed a number of research study surveys to members:

- [International Survey of ICU Discharges: Health Service Providers](#)
- The work environment of intensive care nurses in Canada
- Nurses' Attitudes about the Importance of Families in Nursing Care: A Survey of Canadian Critical Care Nurses Working in Adult ICUs

CACCN continues to support the research endeavours of our members through our Awards and Corporate Sponsorship Program and specifically the National Board sponsored CACCN Research Grant award. The award recipient for 2012 is listed under the Awards and Corporate Sponsorship section on page 7.

Sincerely

**Tricia Bray, MN, RN, CNCC(C), Chair, Publications and Research**

# Publications - Dynamics Journal



## Editor's Report

April 1, 2012 - March 31, 2013

### Statement of Purpose and Objectives

#### **Purpose:**

To provide a journal which will be of relevance and value to any nurse with an interest or expertise in critical care nursing. The journal should have relevance for all areas of practice in neonatal, pediatric and adult critical care nursing.

#### **Objectives:**

1. To provide a vehicle for publication for critical care nurses in Canada.
2. To stimulate critical care nurses to write in their area of expertise.
3. To promote networking regarding critical care nursing clinical, education, research and administrative practices.
4. To disseminate critical care nursing content of interest to Canadian nurses.
5. To publish articles of relevance to clinical, education, research and administrative critical care nursing practice.
6. To disseminate the results of critical care nursing research.
7. To explore issues and problems relevant to critical care nursing.
8. To provide a means for the national Board of Directors to communicate with members of CACCN.
9. To communicate available awards for members.
10. To provide readers the opportunity to earn CEU's.

#### **Subscriptions:**

	2012-13	2011-2012	
• Personal:	1199	1116	
• Institutions:	20	30	includes 8 complimentary

#### **Journal Profile:**

The journal has its own web page on CACCN's homepage and continues to be listed in the Cumulative Index to Nursing and Allied Health Literature (CINAHL), The International Nursing Index, Medline, Ebsco, Nurse One, and the British Nursing Index. Full text articles are available on CINAHL Plus, Academic OneFile, Health Reference Centre Academic, CPI.Q.

#### **Editorial Review Board:**

My thanks and appreciation are extended to the members of the editorial review board for the work they do to review each manuscript. It is through their diligence that the journal maintains its standard as a scholarly, specialty Canadian journal. The members of the editorial review board are:

Janice Beitel, RN, MSc, CNCC(C), CNN(C)	Toronto, ON
Marie Edwards RN, PhD	Winnipeg, MB
Sandra Goldsworthy RN, BScN, MSc, CNCC(C)	Oshawa, ON
Martha Mackay, RN, PhD, CCN(C)	Vancouver, BC
Mae Squires RN, BA, BNSc, MSc, PhD	Gananoque, ON
Franco Carnevale, RN, MSA, MEd, PhD	Montreal, PQ
Judy Rashotte, RN, MScN, CNCC(C)	Ottawa, ON
Debbie Fraser, RN, MN	Winnipeg, MB

My thanks also go to Tricia Bray as Publications Director. Her leadership and help have been greatly appreciated.

#### **Annual Editorial Review Board Meeting:**

The annual editorial board meeting with members of the Editorial Review Board was held in Vancouver at Dynamics 2012.





# Publications - Dynamics Journal (con't)



**Dynamics:**  
Journal  
of the  
Canadian  
Association  
of  
Critical Care  
Nurses

Publishing Summary:

The attached table provides information about the disposition of manuscripts received in the last year and compares them to those received from previous years. Includes Summer, Fall, Winter and Spring issues 2012-2013.

Manuscripts	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013
# Received/reviewed	11	7	3	8	11	7
# Published^	9	3	4	4	6	11
# Rejected	1	0	0	1	0	2
# Not returned	0	0	2	2	0	0
# In review (at year end)	2	4	1	2	3	2
Average Review Time (weeks)	3-6	6	4	2-5	2-4	5
Average Months Receipt to Publish	6	5	6	3	6	6
Average # of manuscripts per issue	3	2-3	1-2	1	2	2-3
Published Total: Clinical	4	3	2	2	4	2
Management	1	0	0	0	1	0
CE Quiz	1	0	1	0	0	0
Research	2	3	1	1	1	4
Regular Column	11	8	6	6	3	4
Other	2\$	1\$, 1*	1\$	1\$, 4#	3+, 2#	1#, 1~

Based on April-March year end. ^ #'s of manuscripts do not add to total received or published because of carry over from previous year \$ Education, \* Program, #Award winners, + Commentary, ~professional

## Constitution and Bylaw Revision

The **Canadian Association of Critical Care Nurses** (CACCN) has commenced the process of revision the Association's Constitution and Bylaws in accordance with Industry Canada's new Not For Profit Corporations Act. The final day for filing articles of continuance and our new Constitution and Bylaws is October, 2014.

CACCN has retained legal counsel to guide the Board of Directors through the challenges of revising the current constitution and bylaws to meet the government requirements.



Articles of Continuance and the new Constitution and Bylaws will be presented to members in the coming year and will be voted upon at the September 2013 Annual General Meeting.

# Publications - Dynamics Journal (con't)

Strategies to increase submissions continue to include:

1. Offering assistance to all inquiries.
2. Writing to all presenters at Dynamics conference.
3. Encouraging colleagues working on a project or interested in a topic to write.

## **Future Plans:**

Increasing the number of manuscript submissions remains a priority. All presenters at Dynamics 2012 were contacted to encourage them to submit either their poster or oral presentation and all presenters at Dynamics 2013 have been contacted to consider converting their papers/posters into a written manuscript. Developing further CEU articles is also a priority.

## Summary:

As Editor for *Dynamics* I have received tremendous help and support from all members of the Editorial Review Board, the Publications Chair of CACCN, Tricia Bray, and our publishers - Pappin Communications. Congratulations are extended to all the authors who have successfully published their work. Pappin Communications continues to provide quality work in the publication of the journal. Many thanks to the members of the Editorial Review Board who continue to volunteer their time and expertise to produce a high quality journal. Much appreciation is also extended to Christine Halfkenny-Zellas in the National Office for all of her work supporting the Editor and Editorial Review Board.

Respectfully submitted,



**Paula Price PhD, RN**  
Editor

## Communication Boards

The CACCN communication boards are a successful way to promote CACCN and provide a means of keeping critical care nurses informed of the activities of the Association. The Association currently hosts a total of 120 communication boards across the country.

**Thank you** to the CACCN members, educators and unit leaders who update the boards throughout the year.



**Paula Price**

**Dynamics Editor**

**Editorial Review Board**

**Janice Beitel**

**Franco Carnevale**

**Marie Edwards**

**Debbie Fraser**

**Sandra Goldsworthy**

**Martha MacKay**

**Mae Squires**

**Judy Rashotte**

# Report from the Treasurer



## Did you know?

### Chapter

#### Reimbursement

\$ 16,965

#### Knowledge Fund

\$ 2,100

#### Tuition Coupons

\$ 14,335 National

\$ 15,890 Dynamics

#### Recruitment Coupons

\$ 580

#### Certification Draws

\$ 1,750

#### Website/Database

\$ 18,712

#### Journal

\$ 36,990

A financial audit is completed annually for the Canadian Association of Critical Care Nurses by the London accounting firm of MacNeill, Edmundson. The full financial audit will be presented at the Annual General Meeting held in conjunction with the Dynamics of Critical Care Conference in Halifax, NS, September 2013:

**Revenue Streams:** The activities that generate the majority revenue (in order of amount) for CACCN are:

- **Dynamics of Critical Care Conference**
- **CACCN Membership Fees**
- **Dynamics: Journal Advertising**
- **Advertising Sales on the Website**

The assets of the Association are divided between the operating account and guaranteed investments. We are pleased to report that the financial health of CACCN remains solid at this point in time. The Board seeks to ensure that this continues to be the case through the Constitution and Bylaws by operating a balanced budget without a deficit for each fiscal year: meaning the expenses in each budget each year cannot exceed the revenues generated.

**Expenses:** Service to our members is our priority and some of the revenue generated is reinvested into improving membership benefits, the website and the journal, in addition to advancing the work of the Association over the past fiscal year 2012-2013:

- \$ 12,500.00 Awards to Members via CACCN and our Corporate Sponsors
- \$ 580.00 Membership Recruitment Referral Coupons
- \$ 16,965.00 Chapter Reimbursement
- \$ 2,100.00 Chapter Knowledge Funding
- \$ 14,335.00 Dyn 2012 Tuition Coupons: Board, Chapters, ERB, Recruitment/Retention
- \$ 15,890.00 Dyn 2012 Tuition Coupons to Invited Speakers/Abstract Presenters
- \$ 2,500.00 Dyn 2012 Poster Reception Sponsorship
- \$ 8,000.00 Dyn 2013 Seed Funds
- \$ 15,987.00 Deposits for Dynamics of Critical Care Conference Future Events
- \$ 2,624.00 Legal fees: Intervener Status at the Supreme Court of Canada
- \$ 1,454.00 Legal fees: Constitution / Bylaws under the Not For Profit Act
- \$ 36,990.00 *Dynamics: Journal of the Canadian Association of Critical Care Nurses*
- \$ 17,454.00 HST Payments for Canada Revenue Agency
- \$ 38,634.00 Association Meetings: Board of Directors, Chapter Connections Day with Chapter Executives, Accommodation and Board Travel (inc. Jrn. Editor)
- \$ 915.30 Website Maintenance and Improvement
- \$ 17,797.00 Member Database Implementation

At the 2012 *Annual General Meeting* on September 23, 2012 and in the *Winter Dynamics Journal* (page #8) the CACCN Board of Directors advised that CACCN Members would note a difference in how membership and tuition fees would be charged. In response to varying taxation rates across Canada, CACCN would be standardizing the budgeting process. In an effort to be fair and transparent to the membership, the Board of Directors determined that all CACCN fees will be *charged at a base rate of \$ 75.00 plus applicable GST/HST commencing January 31, 2013.* \*\*GST/HST is based on the member's province of residence.

The Board of Directors believes it is important for the Membership to have a full awareness and knowledge of the details and the breakdown of the finances of the Association. A complete report of the financial audit will be made available for members to review and discuss via the Members Only area of the CACCN website at least 30 days prior to the Annual General Meeting during Dynamics 2013 in Halifax, NS. Previous year's audits are available in the Members Only area on the CACCN website at [www.caccn.ca](http://www.caccn.ca).

Sincerely,

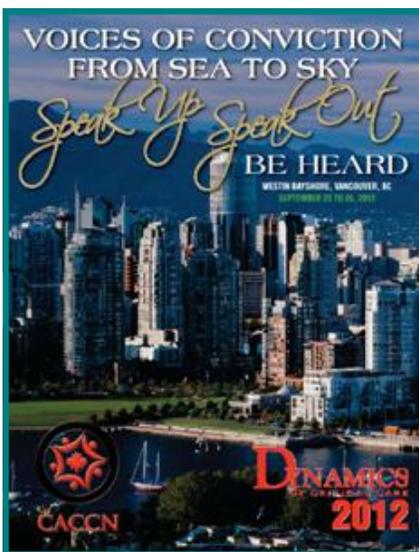
**Ruth Trinier, BScN, RN, CNCCP(C)**  
CACCN Director, National Treasurer

Access previous audits: [www.caccn.ca/en/members/caccn\\_national\\_board\\_of\\_directors/caccn\\_financial\\_reports/index.html](http://www.caccn.ca/en/members/caccn_national_board_of_directors/caccn_financial_reports/index.html)



## Voices of Conviction from Sea to Sky: Speak Up, Speak Out, Be Heard

Dynamics of Critical Care welcomed 454 nurses to Vancouver, British Columbia from September 23 to 25. The scenery at the hotel showcased the beauty of Canada's west coast with the sea wall just outside the door and Stanley Park a short walk away. Even the weather cooperated and the umbrellas provided to each delegate by Phillips Healthcare were not necessary. With the West coast scenery as a setting, inside the convention centre critical care nurses from across the country demonstrated their leadership by **Speaking with Conviction** as delegates and presenters.



Opening keynote speaker Lesra Martin's presentation 'Voices of Hope, Heart and Human Spirit' reminded us that leadership begins from within by putting ourselves in the picture and that belief in ourselves and our abilities is essential. Monday's keynote Barb Langlois continued to build on the conference theme by giving us '3C's to a Powerful You', as well as useful tips to silence our inner critic. Kate Mahon and Mary Stahl shared their leadership perspectives as Past Presidents of CACCN and AACN respectively and demonstrated to delegates how the leadership skills they have developed at the bedside translate to Speaking with Conviction in other situations. Delegates heard from national nursing leaders from a variety of settings in Tuesday morning's panel discussion about the possibilities for the future of critical care. Concurrent sessions covered a wide variety of topics that offered learning opportunities for every nurse in every critical care setting and knowledge level.

As always, the social events at Dynamics were just as important as the learning. Nursing colleagues from across the country renewed friendships and laughed together. The '**Currents in Critical Care**' poster reception sponsored by the Canadian Intensive Care Foundation and the CACCN Board of Directors highlighted the hard work of the poster presenters and provided the opportunity to come together in a social setting to learn and network. Monday evening found nurses at the CACCN Annual Dinner dancing the night away to the sounds of The Young Executives. Chants of "one more song" closed out the evening, a sure sign of a good band and a good party.

I would like to share my closing remarks from the conference:

*'No event of this size takes place without the work of many people. I have a number of people to thank: My colleagues on the board of directors who have been a tremendous support over the past 2 years. Planning committees from previous years' Dynamics who provided models to follow and big shoes to fill. The absolutely phenomenal staff at the Westin Bayshore. They were essential to the smooth planning and running of this conference. Every member of the hotel staff was supportive, attentive and friendly. In particular Richard and Brad and their teams from banquet services, Natasha our executive meeting specialist, Daryl and Irene from PSAV, hotel manager Emma Fyfe and lastly Annabel Aspler, our completely amazing convention services manager. Annabel has been a pleasure to work with and we could not have done it without her. I had the pleasure to work with a great group of people to plan this conference. They did not quite know what they had signed up for, but they stepped up and did a great job:*

- Cecilia Baylon
- Judy Fraser
- Michelle House-Kokan
- Dale Kastanis
- Laurel Kathlow
- Karen Lecomte
- Christine Halfkenny-Zellas

*This conference is the result of wonderful teamwork and collaboration and my sincere thanks to all of you. Most of I want to thank you, the delegates and speakers. Your enthusiasm and passion for critical care nursing brought an energy to the conference that could not be planned."*

I hope your travel home was safe and I hope you carried the energy from the conference back to your home units. I look forward to seeing you in Halifax next fall.

Tricia Bray, MN, RN, CNCC(C)  
Chair, Dynamics 2012





**CACCN  
Partners  
offer  
Information  
and  
Education  
valuable  
to  
your  
practice**

# CACCN Partnership Reports



## American Association of Critical-Care Nurses (AACN)

The CACCN National Board President and Vice President attended the AACN / NTI conference in May 2012. At the conference, board members met with the AACN President and Executive to continue the valuable partnership established in 2011. Board members also met with the co-editors of the American Journal of Critical Care to garner information and advice on soliciting for articles, etc.

CACCN continued to collaborate with the AACN over the past year, as this partnership has been beneficial to our Association. (CACCN received nine (9) conference abstract submissions from our American Colleagues for Dynamics 2012).

CACCN Past President, Kate Mahon was an invited speaker at NTI in May 2012 and offered a wonderful presentation. CACCN was pleased to host Mary Stahl, Immediate Past President, AACN as an invited presenter at Dynamics 2012 in Vancouver, BC.

Congratulations to our colleagues at Foothills Medical Centre and the Carlo & Angela Baldassarra & Family Cardiovascular ICU who were recognized for the following accomplishments at AACN/NTI:

- › **Foothills Medical Centre, Calgary, Alberta** who was selected by AACN, the Society of Critical Care Medicine and the American Institute of Architects to receive the 2012 ICU Design Award Citation. "Family members play a key role in recovery. That's why we've made keeping family at the bedside the guiding principle of the design," says Dr. Paul Boiteau, department head of critical care medicine for the Calgary Zone of Alberta Health Services.

- › **The Carlo & Angela Baldassarra & Family Cardiovascular ICU, University Health Network-Toronto General Hospital, Ontario**, received a gold level Beacon Award for Excellence for the unit's demonstrated excellence in sustained performance and patient outcomes.



## Canadian Nurses Association (CNA)

The Canadian Association of Critical Care is a member of the Canadian Network of Nursing Specialties. In 2012-2013, CACCN participated in feedback on position statements and CNA surveys.

CACCN continues to promote CNA's Critical Care Certification Program in efforts to encourage nurses across Canada to seek certification in our specialty.



## Canadian Blood Services (CBS)

Tracy Brand is finishing her term as CACCN link with CBS and will be replaced by / Sophie Gravel starting April 2013. CACCN continues to participate in the strategy for improving performance in organ and tissue donation and transplantation.

**Deceased Donation Advisory Panel** - This national committee has been established with the purpose to work on common problems in organ donation across Canada. The CACCN representative on the Deceased Donation Advisory Panel is Kirk Dawe. The Advisory Panel had one formal meeting in 2012.



## Canadian Intensive Care Foundation (CICF)

Sandra Matheson continues to serve as liaison between CACCN and CICF. The CACCN includes a CICF membership with every CACCN membership package to encourage this partnership. CICF continues to provide financial support to CACCN for Dynamics. CICF was a co-sponsor of the Poster Reception at Dynamics 2012 in Vancouver, BC.



## Canadian Patient Safety Institute (CPSI)



## Safer Healthcare now! (SHn)

The Canadian Patient Safety Institute is a not-for-profit organization that exists to raise awareness and facilitate implementation of ideas and best practices to achieve a transformation in patient safety. It was established by Health Canada in 2003 to inspire extraordinary improvement in patient safety and quality. Their flagship program Safer Health Care Now! provides tools and resources for frontline healthcare providers. Safer Healthcare Now! continues to build formal structures and processes such as the web-based Communities of Practice, a mentorship program, learning collaborative, national calls, faculty and formal learning programs, and knowledge exchanges to support the ever-changing needs of its customers. The Getting Started Kits for each intervention are used nationally and internationally. The 12 Getting Started Kits are available at no charge and were downloaded over 26,000 times last year. This year, nine of the Getting Started Kits were developed, reviewed or revised to provide the most current evidence available.

For more information, visit [saferhealthcarenow.ca](http://saferhealthcarenow.ca). Canadian Patient Safety Week was held October 29 - November 2, 2012 and Canada's virtual Forum on Patient Safety and Quality Improvement also occurred then and sessions on infection control, medication safety, falls, and leadership and culture were held. CPSI in collaboration with the Canadian ICU Collaborative Faculty introduced in a webinar "aC3KTion Net" a new collaborative aimed at addressing the critical care knowledge translation need in Canada in an effort to improve critical care outcomes. CACCN is a partner of aC3KTion Net along with CCCS, CSRT, CPSI, Canadian ICU Collaborative. The aC3KTion Net website went live on Feb 12, 2013.



**Institute of Safe Medication Practices (ISMP)**

The Institute for Safe Medication Practices Canada is an independent national not-for-profit organization committed to the advancement of medication safety in all healthcare settings. CACCN collaborates with ISMP to promote safe medication practices.



**WFCCN**  
WORLD FEDERATION  
OF CRITICAL CARE NURSES

## **World Federation of Critical Care Nurses (WFCCN)**

The WFCCN has continued to develop since its inception on Oct 30, 2001. Canada was on the inaugural Council. Sandra Matheson is the current WFCCN representative for CACCN.

The executive of WFCCN includes: Ruth Kleinpell, President (USA); Maria Isabelita C Rogoda, Secretary (Phillipines); Vedran Dumbovic, Treasurer (Croatia); Ged Williams, Trade & Sponsor Representative (Australia). There are approximately 39 countries represented on the WFCCN Council.

The International Educators Interest Group, chaired by Sandra Goldsworthy (CACCN Member), is exploring options for the development of an international critical care nursing e-learning text in collaboration with an international publisher.



**World Federation of Pediatric Intensive & Critical Care Societies**

## **World Federation of Pediatric Intensive & Critical Care Societies (wfpiccs)**

The World Federation of Pediatric Intensive and Critical Care Societies (WFPICCS) was established in 1997. It arose from the vision of several world leaders in the field of Pediatric Critical Care who saw the opportunity to combine international expertise, experience and influence to improve the outcomes of children suffering from life threatening illness and injury. Currently, WFPICCS has over 25 national, international and regional member societies representing over 10,000 pediatric and neonatal critical care physicians, nurses and allied health care workers.

The spirit of the Federation is embedded in the close relationship and working together with colleagues around the world to achieve our mission.

The Board of Officers of wfpiccs includes: Niranjana (Tex) Kissoon MD, President (Canada), Jos M. Latour RN, PhD, Treasurer, (The Netherlands), Paolo Biban MD, Secretary (Italy), Minette Coetzee RN, PhD, Vice President (South Africa), Sunit Singh MD, PhD, Vice President (India), and Andrew Argent MD, PhD, Past-President (South Africa)

As a founding member of the Global Sepsis Alliance, WFPICCS promotes World Sepsis Day. World Sepsis Day was celebrated on September 13, 2012. CACCN renewed their membership with wfpiccs in 2012.



**critical care  
canada  
FORUM**

Leading Science. Leading Practice.

**Critical Care Canada Forum (CCCF)** is an internationally recognized 3-day conference focusing on topics that are relevant to the individuals involved with the care of critically ill patients. The conference was held on October 29 - 31 2012. CACCN is an affiliate of CCCF.

## **International Ties**

In addition to the AACN, WFCCN, wfpiccs, CACCN also maintains a professional relationship with the following:

**Australian College of Critical Care Nurses (ACCCN):** ACCCN represents approximately 2300 nurses working across the critical care clinical spectrum.

**British Association of Critical Care Nurses (BACCN):** BACCN represents critical care nursing colleagues in Great Britain and Northern Ireland providing one of the largest and influential professional Organizations within critical care.

**Cameroon Association of Critical Care Nurses (CACC Nurses):** CACC Nurses represents critical care nursing colleagues in Cameroon, a country in West Central Africa. The CACCN Nurses is a new Association and CACCN is pleased to share our resources.

**Irish Association of Critical Care Nurses (IACCN):** The IACCN is committed to the professional and educational development of nurses working in Critical Care. The Association is instrumental in providing a link with the National Planning and Development Agenda for Critical Care.





# Chapter Connections Day 2012



**Dynamics  
of  
Critical  
Care  
2012**

**Delegates  
454**

**Exhibitors  
50**

On the Saturday prior to Dynamics, the CACCN Board of Directors meets with all of the CACCN chapter presidents. This is a brief report of some of the discussions from this year's Chapter Connections Day.

After getting to know everyone with an ice breaker, President Teddie Tanguay and all of the Board of Directors reported on some of the Board's initiatives over the past year and plans for the future. Teddie's theme of her presidency is Speak with Conviction. In keeping with this theme, Teddie and members of the Board have been increasing our collaboration with partners nationally and internationally. Teddie attended the CNA biannual meeting and through the Canadian network of specialty groups she is working to increase awareness of what critical care nurses do. CACCN also received complimentary tuition and complimentary exhibit space at the 2012 AACN NTI Conference in Orlando. The Board members who attended met with the AACN executive to continue to identify and discuss ways to promote our respective organizations. Teddie continues to write her President's blog and CACCN is on Facebook and Twitter. There were 454 registrants at Dynamics with only seven who were nonmembers of CACCN. The board is now looking at a national strategy for recruitment and retention of members.

CACCN submitted an affidavit to apply for Intervener Status at the Supreme Court. The application was granted and CACCN's lawyer will be speaking for us at the Supreme Court in December. CACCN is advocating for shared decision making on end of life care and withdrawal of care. If that does not occur then we are requesting third party arbitration. Further information can be found in the members only forum under end of life in critical care.

The federal Not for Profit Act CACCN operates within was developed in 1918. It is now being revised and CACCN must reapply before October 2014. As a not for profit association we will need to redo our constitution and bylaws. This will be done this coming year so that they can be voted on by the members at Dynamics 2013.

The World Federation of Critical Care Nurses (WFCCN) contacted CACCN to join and provide a donation. We were not informed about what the plans are for the donation. CACCN is seeking further clarity about the WFCCN's strategic plans and the budgets for the last three years to assist in making a decision regarding membership. We did become a member of the World Federation of Pediatric Critical Care Nurse. There was no fee to join at this time.

The Canadian Intensive Care Week was originally proclaimed in 2002. This week was celebrated for a couple of years by the Canadian Intensive Care Foundation and then it disappeared. Canadian Intensive Care Week will be celebrated again this year October 29 – November 4, 2012.

CACCN purchased a new website database. This was a necessary expense in order to generate reports. We are looking at automatic membership renewal in the future. The Board is always looking for feedback about the website. There is still more implementation to be done.

The research committee is becoming more active. The committee is conducting a study about critical care nurses attitudes toward research. The survey link has been emailed to all members; please take a moment to complete the survey.

As of Sept 1, 2012 CACCN has 1136 members. That is an increase of 38 from last year.

CACCN has some promotional items available should Chapters be interested in collaborating on a bulk purchase. There are minimum quantities required and CACCN will not order items without a firm commitment from the Chapter(s) involved. Chapter are responsible for payment of the items.

There is a new mentorship initiative beginning soon. This is for CACCN members wanting to advance their practice and scholarship. It will be facilitated through the online forum on the website. Mentees will identify themselves with their needs and goals. The online "room" will be facilitated by a mentor who is a volunteer with specific expertise. There will be two pilot rooms: writing for publication and preparing to present. This initiative will likely be launched during Intensive Care Week.

There was time for small group discussions with Chapter Presidents and their Board liaison.

As of January 31, 2013 the membership charge will be \$75.00 + applicable taxes.

The afternoon consisted of presentations from some of the Chapters. The topics were setting up online registration and payment (Toronto chapter), writing successful newsletters (Manitoba chapter), and Living our Vision and Mission (London chapter).

Respectfully submitted,

**Paula Price, PhD, RN**  
Editor, Dynamics Journal

# Leave to Intervene, Supreme Court of Canada

The **Canadian Association of Critical Care Nurses** (CACCN) was granted intervener status before the Supreme Court of Canada in the case of *Mr. Hassan Rasouli v. Sunnybrook Health Sciences Centre, Dr. Brian Cuthbertson and Dr. Gordon Rubinfeld*. CACCN's participation in these proceedings ensured that the perspective of Canadian critical care nurses regarding end of life decision making were heard at the highest court in the country.

This case illustrates the difficult nature of decision making at the end of life and the need for direction in those instances where the health care providers and the family or substitute decision maker disagree on what is in the best interests of the patient. Critical Care nurses are healthcare providers who are closely engaged with families, patients and the health-care team throughout their hospital stay including the end of life. As such, we are pleased that the Supreme Court of Canada recognized the need to understand these complex issues from the unique perspective of critical care nurses.

The CACCN was in attendance at the hearing of this case before the Supreme Court of Canada in Ottawa on December 10, 2012. CACCN's oral submissions at the hearing were made by our legal counsel. CACCN is and has been represented on a pro bono basis by the legal team of Rahool Agarwal, Nahla Khouri, Nicholas Saint-Martin and Saro Setrakian of Norton Rose Canada LLP. **The Supreme Court of Canada decision should be forthcoming in 2013.**

## CACCN Mentorship Program

The CACCN Mentorship Program was launched in the spring of 2013. We are early in the process and thus far the program has been going well. The CACCN mentorship program is open to all CACCN members who are interested in advancing their careers, knowledge base or professional affiliations in the specialty of Critical Care Nursing.

The CACCN Mentorship Program was developed in response to a 2010 survey of a representative group of CACCN members and the feedback provided through focus group sessions carried out at Dynamics that same year. Members spoke clearly that they wished access to professional mentor relationships in order to support professional development and met their career goals. In the absence of face to face connections there was keen interest in an on line forum for mentoring. Members were interested to participate as both mentees and mentors and wished to make connections outside of their immediate work environment. Identified topics of interest were primarily education based and far reaching including: research, rapid response teams, advanced practice, end of life care, entrepreneurship, publication skills, new graduate integration and late career nursing.

Under the Mentorship Program, participants enter into a voluntary relationship facilitated via the CACCN online discussion forum. Mentees choose to apply to 'rooms' based on their objectives and their interest in the discussions taking place. The Mentors of the program are CACCN member volunteers who are recognized as nurse leaders and content experts in each particular topic area. Mentors are willing to engage on-line with the participant Mentees in order to assist them in meeting their learning and/or developmental goals.

To launch the CACCN Mentorship Program, we have opened up two specific topic rooms:

- The first, Writing for Publication, mentored by Dr. Paula Price. Paula brings vast expertise to her role as Mentor, as our Editor for Dynamics: Journal of the CACCN and in the domains of education. Dr. Price's status as a national nursing leader and her sincere commitment to developing others has led to this mentor room being completely filled in the first week.
- Our second room, Building Professional Presentation Skills, mentored by Eugene Mondor. Many of you are familiar with Eugene's fabulous and dynamic presentations and we are thrilled to have him providing mentorship in this area for our members. Eugene brings his enthusiasm and extensive background in education, as well as his presentation experience to his role as Mentor.

The goals of the CACCN Mentorship Program are:

- To provide an accessible and useful mentorship to our CACCN members;
- To promote the development of mentorship skills through the education and support of mentors and mentees;
- To provide a nationally accessible strategy for advancing individuals and specialty knowledge within the context of the CACCN mission and objectives.

I hope you each take the time to look through the information on the web site about our Mentorship Program.

**"Learning is finding out what you already know. Doing is demonstrating that you know it. Teaching is reminding others that they know just as well as you. You are all learners, doers, and teachers."**



**Karen Dryden-Palmer**  
CACCN Vice-President

Bach, R. (1977). *Illusions: The adventures of a reluctant messiah*. New York: Dell Publishing Co., Inc.

## CACCN Chapters

Vancouver Island

British Columbia

Greater Edmonton

Southern Alberta

Saskatchewan

Manitoba

London Regional

Toronto

Ottawa Region

Montreal

New Brunswick

Nova Scotia



# Canadian Intensive Care Week



*CACCN Members, Canadian critical care nurses and their colleagues in the Intensive Care Unit embraced Canadian Intensive Care Week holding celebrations across the country!*

## Canadian Intensive Care Week October 29 - November 4, 2012

Each year, over **100,000 Canadians** receive life-saving care in **Intensive Care Units.**



Your ICU team – caring for patients and families every second, every day.

The Intensive Care Team – there for **YOU** in critical moments.



*We are planning a luncheon for the ICU staff at Battlefords Union Hospital and some socializing Friday evening. We are also selling tickets for prizes throughout the hospital with the draw to be made at the luncheon. Proceeds of the ticket sales will go towards an ICU education fund. ~ Peg Maunula, Saskatchewan*

*I wanted to let you how our National intensive care week started. First I planned a minute to win it competition amongst our own staff just as a feel good exercise. I posted the stories you provided and some interesting facts about intensive care units in general. I was not completely sure how we were going to show other hospital staff exactly what ICU nurse do. But at 1400hrs Monday we had a cardiac arrest and post arrest it was decided to implement therapeutic hypothermia which we had only been trained for the week before. This was the first time we had cooled anybody and being in a small rural hospital the news of what we were doing quickly reached all nurses and doctors within the building. Many nurses and doctors visited our unit to see and learn about the cooling process (we used the Arctic Sun). So staff not only learned something ICU nurses do they got to see what we do. It was great and the procedure went well with good results. ~ Joanne Baird, Newfoundland/Labrador*

Canadian Intensive Care Week for the Critical Care Trauma Unit in London, Ontario involved several events in addition to providing recognition for five Intensive Care Units in the hospital newsletter and recognition of critical care nurses during an awards ceremony.

~ Alison Rowlands, President-Elect, London Regional Chapter, Ontario

We tried a few different things to showcase our "mad skills". In conjunction with patient safety week we staged a mock code in the main atrium of our hospital during lunch hour. We drew quite the crowd. The simulation went really well and everyone enjoyed being a part of it. We also set up a fake patient with equipment and a poster display in the atrium for a couple days. We had ICU staff members answer questions of staff and visitors. They seemed to enjoy seeing all the bells and whistles. For those unable to see us in the atrium we sent an Intensive Care week poster to their unit along with a few treats. We also have to thank the CICF for providing us with some booklets and pens to hand out to our staff and those visiting the booth. Overall, it was a great week and we were proud to showcase our exceptional team!

~ Liane Manz, President, Greater Edmonton Chapter, Alberta

For ICU Week, the Hospital for Sick Children, Toronto celebrated by: Posting a banner recognizing ICU week in our main atrium all week and handed out information flyers about ICU week; distributing specific information about the SickKids program throughout the hospital; publishing an article focused on the critical care program in 'Two week' our organizational magazine newsletter featuring Brenda Drouillard, the CACCN / Cardinal Health "Chasing Excellence" Award Recipient 2012 from Sick Kids and providing tours of the unit all week long with colleagues from throughout the hospital attending including the executive board, medical records, outpatient clinical and inpatient areas.

~ Karen Dryden-Palmer, Vice President, CACCN, Ontario

At our hospital we did a simple lunch and learn and invited the whole team. We presented some of our great findings from Dynamics in Vancouver. It went over really well! Between the pizza and the great topics we drew out record numbers of nursing and allied health. We really had a great sense of team spirit during ICU Week. Next year we plan on setting up a mock bedside at a shopping mall to help educate the public and maybe get some buy-in from other stakeholders. I really look forward to it!

~ Kirk Dawe, Newfoundland/Labrador

The Southern Alberta Chapter of CACCN was very excited to offer daily presentations for critical care nurses and their colleagues which were posted on the Calgary Department of Critical Care Website daily. The daily presentations included: ICU Medical Human Connections Webinar; Canadian Patient Safety Institute: Claire inspires change after her passing; ICU Medical Human Connections Webinar: Blood Transfusions in the ICU: Are We Quietly Killing Our Patients?; Effective Communication Skills & Tips Training Video by Integration Training and Understanding Shock.

~ L Brideau, President and N Johal, President-Elect, The Southern Alberta Chapter, Alberta



The Canadian Association of Critical Care Nurses  
The DAISY Foundation's First International Supportive Association (May 2012)

The DAISY Foundation was proud to announce the first nursing organization outside the United States to become one of its Supportive Associations. The Canadian Association of Critical Care Nurses (CACCN) will help promote the DAISY Award for Extraordinary Nurses program that recognizes nurses for their "above and beyond" compassion and skill in caring for patients and families. The DAISY Foundation currently partners with nearly 1,300 healthcare facilities in seven countries, including ten throughout Canada.

CACCN features The DAISY Award and Canadian DAISY Honorees who are critical care nurses on our website, [www.caccn.ca](http://www.caccn.ca) and welcomed DAISY co-founders Bonnie and Mark Barnes to the Dynamics 2012 conference in Vancouver, BC last September. The CACCN Board of Directors is delighted to partner with The DAISY Foundation to expand their very meaningful recognition program throughout Canadian hospitals and healthcare organizations. We have seen the powerful impact DAISY has on nurses and their organizations. Their expression of gratitude through The DAISY Award truly touches nurses and has proven an effective tool for nurse retention and recruitment, team- and morale-building. Nurses feel tremendous pride at being nominated by their patients and families and chosen by their peers for this award, based on a real interaction with a patient or family. CACCN would like every critical care nurse in Canada to have the opportunity to be honored and reminded of how important his or her work is every day. We hope our support will enable The DAISY Award to expand broadly throughout Canada.

~ Teddie Tanguay, CACCN President



**CACCN  
Core  
Values  
and  
Beliefs**

- Excellence**
- Leadership**
- Dignity**
- Humanity**
- Integrity**
- Honesty**

## CACCN Mission, Vision, Values, Philosophy Statements

### CACCN Vision Statement

The **voice** for excellence in Canadian Critical Care Nursing

### CACCN Mission Statement

The CACCN is a non-profit, specialty organization dedicated to maintaining and enhancing the quality of patient and family centered care by meeting educational needs of critical care nurses

Engages and empowers nurses through education and networking to advocate for the critical care nurse.

Develops current and evidence informed standards of critical care nursing practice. Identifies professional and political issues and provides a strong unified national voice through our partnerships.

Facilitates learning opportunities to achieve Canadian Nurses Association's certification in critical care

### CACCN Values and Beliefs Statement

Our core values beliefs are:

*Excellence and Leadership*

- Collaboration and partnership
- Pursuing excellence in education, research, and practice

*Dignity & Humanity*

- Respectful, healing and humane critical care environments
- Combining compassion and technology to advocate and promote excellence

*Integrity & Honesty*

- Accountability and the courage to speak for our beliefs
- Promoting open and honest relationships

### CACCN Philosophy Statement

Critical care nursing is a specialty which exists to care for patients who are experiencing life-threatening health crises within a patient/family centred model of care. Nursing the critically ill patient is continuous and intensive, aided by technology. Critical care nurses require advanced problem-solving abilities using specialized knowledge regarding the human response to critical illness.

The critical care nurse, works collaboratively within the interprofessional team, and is responsible for coordinating patient care using each member's unique talents and scope of practice to meet patient and family needs. Each patient has the right to receive care based on his/her personal preferences. The critically ill patient must be cared for with an appreciation of his or her wholeness, integrity, and relation to family and environment. Critical care nurses plan, coordinate and implement care with the health care team to meet the physical, psychosocial, cultural and spiritual needs of the patient and family. The critical care nurse must balance the need for the highly technological environment with the need for safety, privacy, dignity and comfort.

# CACCN Mission, Vision, Values, Philosophy Statements

## CACCN Philosophy Statement (con't)

Critical care nurses are at the forefront of critical care science and technology. Lifelong learning and the spirit of enquiry are essential for the critical care nurse to enhance professional competencies and to advance nursing practice. The critical care nurse's ability to make sound clinical nursing judgments is based on a solid foundation of knowledge and experience.

## CACCN Pathways to Success: Five Pillars

### Leadership:

- Lead collaborative teams in critical care interprofessional initiatives
- Develop, revise and evaluate CACCN Standards of Care and Position Statements.
- Develop a political advocacy plan.

### Education:

- Provision of excellence in education
- Advocate for critical care certification

### Communication & Partnership:

- Networking with our critical care colleagues
- Enhancement and expansion of communication with our members

### Research:

- Encouraging, supporting, facilitating to advance the field of critical care.

### Membership:

- Strive for a steady and continued increase in CACCN membership



**CACCN**

**Pathways  
To  
Success**

**Leadership  
Education  
Communication  
Partnership  
Research  
Membership**

# Future Endeavours



**Dynamics of Critical Care 2013**  
September 22—24, 2013  
Halifax, NS  
Chairperson: Kate Mahon

**Dynamics of Critical Care 2014**  
September 21—23, 2014  
Quebec City, QC  
Chairperson: Renée Chauvin

**Dynamics of Critical Care 2015**  
September 27—29, 2015  
Winnipeg, MB

**Dynamics of Critical Care 2016**  
September 25—27, 2016  
Charlottetown, PEI

**Potential Sites:**

**Dynamics of Critical Care 2017**  
Toronto, ON

**Dynamics of Critical Care 2018**  
Saskatoon, SK

**Dynamics of Critical Care 2019**  
St. John's, NL

**Dynamics of Critical Care 2020**  
Ottawa, ON



**CANADIAN  
ASSOCIATION OF  
CRITICAL  
CARE  
NURSES**

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*The Voice for Excellence in  
Canadian Critical Care Nursing*