

October 30, 2012

Summary of a meeting to launch the B.C. Network of Nursing Associations and Specialty Groups.

## Attendees:

- Maylene Fong, Community Health Nurses of Canada
- Rosemary Graham, BCNPA
- Lorna Jensen, Perianesthesia Nursing Association
- Stan Marchuk, BCNPA
- Shawn Mason, BC Chapter of Canadian Association of Critical Care Nurses
- Rosella McCarthy, BC Chapter of Canadian Association of Critical Care Nurses & Clinical Nurse Specialists Association of BC
- Kathy Murphy, BC History of Nursing Society
- Trudy Robertson, Canadian Association of Neuroscience Nurses, BC Chapter
- Mark Schultz, BCNPA
- Sherry Stackhouse, Emergency Nurses Association of BC
- Julie Fraser, ARNBC
- Nora Whyte, ARNBC
- Alix Arndt, ARNBC

## Overview:

- Welcome from Julie Fraser, President-Elect and introductions
- This meeting is the first of what we hope are many conversations that we will be having that will explore the network and what role ARNBC can take in facilitating communications and networking.
- Review of background information about ARNBC including:
  - ARNBC purpose
  - Development of ARNBC
  - Structure and governance
  - Accomplishments
    - Developed a collaborative framework with CNA
    - Established a provincial policy voice
    - National perspective
    - International perspective
    - Structure and governance
    - Financial sustainability
    - Communications strategy
  - What have nurses told us- key issues:
    - Fatigue and sense of powerlessness to influence practice
    - Loss of voice and presence in health system
    - Fear of reprisal for speaking out
    - Concern re: loss of professional identity and visibility of profession
    - Concern re: loss of RN role in health system (LPN replacement models)

- Sense of loss of a professional association and questions regarding how the professional voice will be supported and sustained with agreement that it is missing and needed
- What nurses have told us- recommendations:
  - Build a sustainable professional association
  - Negotiate with CRNBC regarding assets and activities
  - Strengthen nursing leadership and influence at policy tables in government and health authorities
  - Advocate for evidence informed care delivery models
  - Position the RN and NP role in primary care
  - Enhance professional identity of RNs
  - Establish linkages with professional practice nursing groups in BC
- ARNBC strategic plan, three core areas:
  - Governance
  - Engagement
  - Partnerships and collaboration
- CNA update
  - Expert commission
  - Biennium Resolutions
  - Council of the Federation
  - Nurse Practitioner Campaign
  - Queen's Jubilee Medals
  - ICN Conference
- Ideas for developing the network:
  - Mutual goals and potential benefits of a network
  - Supports needed for connecting with your members in B.C. and other colleagues in your specialty across Canada
  - Methods to connect with ARNBC and CNA
  - Role of ARNBC in coordinating a specialty nursing network
  - Ideas for methods of communication
  - Interest in having a dedicated space on the ARNBC website for the groups
  - Plans for future meetings (frequency, location and other considerations)
  - Name of network

## General Discussion:

- We need to be able to effectively utilize the voices of our professional groups by showcasing something evidence based that is patient centred that our employers can use to move forward.
- Partnerships exist between health authorities but the groups at each site don't necessarily interact.
- RNAO has a variety of clinical practice guidelines and position statements they post. These are very helpful. It is a real strength to have an association develop these types of materials.
- NPs are a bit distinct. Linked to CNA in a couple of ways and of course there is an association already, BCNPA ([www.bcnpa.org](http://www.bcnpa.org)). Education of the public and other health care professionals is key as the role of the NP is still cloudy. Additionally BCNPA does not have the resources or membership to connect NPs with their

nursing roots. This is where there is clear linkage with ARNBC. There is necessity in remaining distinct but there is lots of opportunity for connection, collaboration and joint statements such as those happening during the current NP campaign. BCNPA has heard some clear messages from its members during town hall meetings. These messages include:

- BCNPA is the voice of NPs. There are numerous points of commonality but membership is clear, the voice for NPs comes from BCNPA.
- Collaboration with and between other bodies must occur as there are numerous points of commonality that exist for the nursing profession.
- Members do not want BCNPA to function or 'act' like a Union.
- Some groups are relatively new. They're still feeling their way around this world and are glad to be able to have the representation at the CNA table and to be part of the larger network.
- Being part of a network is a great way to collaborate and to get messages out. Without a nursing directorate at the Ministry getting the nursing voice out is tougher. Strength in numbers.
- When PPGs closed some groups reformed as societies. They're out there and also interested in linking to broader groups (BC History of Nursing is a great example of this, and have an award winning website: <http://www.bcnursinghistory.ca/> ).
- Other groups have no funds for site development and have members in large geographical areas. Makes linking very tough. That said, there is opportunity to tap into the existing websites out there to do this.
- Mutual back and forth is key. It is important that issues can be brought to the table.
- Questions about funding for the groups (see Key Questions below).
- Establishing connections is welcomed! Some groups are quite well established and have meetings/conferences etc. but welcome the idea of broadening the network and partnering with other groups on areas of common interest.
- Naming for the group still out for consideration. The idea of using the word network in some way is appealing to most.

## What can ARNBC do to help?

- Post continuing education opportunities on the website.
- Spread the word on the website and via social media about upcoming conferences.
- Are there best practices in communications that could be shared (also in key questions)?
- ARNBC is the unifying force amongst nurses. The ARNBC is seen as a gathering place of sorts for other groups.
- Opportunities to develop handbooks and other materials.
- Offer support on becoming more media savvy.
- Offer support on using social media platforms.
- Bring B.C. nurses together for political advocacy.
- Hold webinars or link to webinars that are already being held.

**Key questions:** *Note, not all questions could be answered-or explored fully during this meeting. The ARNBC Board will need to review and discuss the questions and ideas raised. Information will be brought to upcoming meetings.*

- What is the flow of money from the CRNBC to the CNA?

- \$55.00 of CRNBC fees goes directly to CNA. This essentially affords all RNs and NPs in B.C. 'membership' in the CNA. You receive your copy of Canadian Nurse and member rates for various conferences.
- CRNBC has on their website diagrams of where the money goes.  
<https://www.crnbc.ca/crnbc/services/Pages/Default.aspx>
- Is membership in the CNA an issue?
  - As of June 2012, ARNBC has received its jurisdictional membership in CNA This offers a sense of permanence for ARNBC at the CNA table.
- Is ARNBC open to new specialty groups forming?
  - Yes
  - Example of internationally educated nurses
  - Students/new graduates
  - First Nations nurses
- Will the speciality groups need to pay fees to the ARNBC?
- Will there be resources that are available to the speciality groups through ARNBC, such as teleconference?
- Are there best practices in communications that could be shared?

## **Emerging Themes for the Benefits of a Network:**

- Evidence based materials and documentation
- Ongoing and increased collaboration
- Resource sharing
- Connectivity and linking
- Leadership

## **Final Comments/Go forward:**

- Great potential exists here.
- Thank you!
- Very excited to see what ARNBC has done and hats off to being transparent. This is very beneficial to be able to 'see' what ARNBC is doing as things go forward.
- Strong sense of opportunity.
- Sense of renewal.
- Looking forward to ideas about how to best utilize social media.
- Critical mass has been reached. Each of us is having similar thoughts and focus as we go forward. This is good. We're ready to move ahead.
- There is power in nurses working together: synergy is key.
- Consider creating a diagram that shows how the various speciality groups link provincially and nationally and what the broad structure looks like.
- Meetings on a need to do basis, not just for the sake of having them. There may also be opportunity to have meetings that dovetail with other meetings.
- ARNBC is a unifying force.