



**MINUTES of Nursing Practice Council Team
September 26, 2023 0900-1500hrs
Virtual-MS Teams**

Present:	Ben Wiebe Carla Olusola Christy Paetkau Christy Seniuk Connie Gerardy Denise Darling Jocelyn Therrien	Kristal McKitrick-Bazin Liana Alton Loreley Fehr- attending when possible Maria Munoz Paula S. Enns – stepping in and out Tamara Burnham Tracey Kokil April Friesen	Regrets:	Madeline Gylywoychuk-Winkler Tara Roberts Dayna Jonasson Lorie Harder Lorraine Cassan Katie Dupasquier K. Miller
			Guests:	Lee Bassett-Presentation Melissa Schmidt-Presentation

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
1. Call to Order	9:03am	
2. Approval of Agenda	Approved as circulated Record of Meetings - DocLibMeetingDate	
3. Approval of Minutes of June 7, 2023	Approved as written final time frame September 29, 2023 Record of Meetings - DocLibMeetingDate	
4. Sacred Moment:	Surround Yourself with Positive People- very good message https://www.linkedin.com/posts/dipl-ing-lars-behrendt_innovation-creativity-entrepreneurship-activity-7073225846374739968-nlat?utm_source=share&utm_medium=member_ios	

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
5. Business Arising		
5.1. Orientation to MS Teams & Collaborative Work Site	Access forms have been signed by staff – IMACs created and submitted for approval.	No yet resolved. No access to the CWS from home computer – Connie to submit service ticket.
5.2. CVAD Policy Approval and Posting – Completed Policy work	July 5, 2023 Memo - Policy update published for CLI.4110.PL.004-“Central Venous Access Device Care & Maintenance”. Clinical Update Aug 29-Staff development created education summary to highlight updates: Central Venous Access Devices Overview for Care and Maintance . Please share with colleagues.	
5.3. Ultrasound Guided Peripheral IV Trial-Update & Policy - Adjust language in teaching sheet & send for final approval	August 30, 2023 Memo - Policy CLI.4110.PL.027-“Ultrasound Guided Peripheral Intravenous (USGPIV) Insertion” published on HPS.	
5.4. Vascular Access Assessment Policy Update policy & send for final approval	July 19, 2023 Memo - Policy CLI.4510.PL.012-“Vascular Access Assessment” published on HPS. Clinical Update Aug 29-Staff development created education summary Vascular Access Assessment . Please share with colleagues. Group encouraged to sign up for weekly Clinical Update memos if not already receiving.	
5.5. Use of Emergency Department Seclusion Rooms in Cases of Mental Health	Jocelyn – Concern that we don’t have policy/protocol with criteria to follow for patient in “seclusion room”. When or how long should one be in a room? What are the potential ramifications? Issues with ethics/legalities. Different practice by different staff. Denise: I think if someone goes into seclusion, there should be parameters for at least a telepsych consult asap.	Start clinical practice issue form for follow up. Jocelyne assigned to take lead. Please forward any resources to Jocelyne.

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
	<p>Carla Olusola: Our manger from the Acute unit says EMHC would have policy under the Mental Health Act that would pertain to ERs.</p> <p>Christy Paetkau: The suicide policy on seclusion room is very vague on usage, at this time we are to use our own judgement.</p> <p>Bethesda seclusion rooms are in the ER department. New emergency in Portage are incorporating seclusion rooms. BTHC has no seclusion room. Psych at HSC has seclusion rooms.</p> <p>Christy S. Does shared health have a policy? Southern health has a policy with regards to restraints but not much on seclusion rooms. Resource link added to meeting chat: https://www2.gov.bc.ca/assets/gov/health/managing-your-health/mental-health-substance-use/secure-rooms-standards-guidelines.pdf</p> <p>Christy P. Resource link added to chat: https://professionals.wrha.mb.ca/old/professionals/safety/files/2013SHC_RestrainsMentalHealth.pdf</p>	
6. New Business		
6.1. Mentorship & MNU Mentorship Premiums	<p>Tamara reviewed regional and provincial mentorship resources located on the SH-SS Health Provider Site (HPS) here: Mentorship » Southern Health-Santé Sud including the MNU Mentorship Program Staff Presentation (PowerPoint), SH-SS Mentorship Poster and the steps to initiate MNU mentorship premiums.</p> <ul style="list-style-type: none"> - Specific to Nurses - Related to the MNU and memorandum for understanding 	

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
	<p>Christy Paetkau: Staff are being encourage to participate, but we have several students. We don't want to overwork our staff preceptors and mentors. This has become a challenge, staff are doing this unofficially.</p> <p>Denise: I was approached by my manager and student and had to declined this. Can only participate with one or other. There is a lot of paperwork (even completing an RFL) with little incentive. Relationship between mentor and student becomes strong with a nurse. Mentorship provides more nursing skills and more confidence especially going into a charge nurse roll. Notice there is more confidence and security knowing the student can ask someone.</p>	
6.2. Bedside Report-Handover Transition	<p>NPC requested to develop direction, likely guideline, for nurses to follow for giving bedside report for Acute Care following white board template. Currently a lot of different practices occurring.</p> <p>Seeking working group to put this together – Lead Tamara. Looking for volunteers, if you are interested please let Tamara know.</p> <ul style="list-style-type: none"> • Maria Munoz - volunteer <p>Denise: Staff struggle with beside reporting. There seems to be such a variation of how it was done in the past.</p> <ul style="list-style-type: none"> • Part of the guideline to direct where it's a fit and where it is not. Shift change, when is it practical? • Shouldn't wait until shift change to communicate with patients <p>Comments in meeting chat echoing challenges with bedside reporting, especially patients that are confused/have trouble sleeping.</p> <p>Recognized that it's not going to be a fit for all circumstances. Bedside reporting can be conducted differently based on client care. This should be part of what is included in guideline.</p>	Establish working group to develop guideline.

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
6.3. Regional Hand Hygiene Education Presentation 1230-1300hrs	Presentation by Liana Alton-recorded. Region has new HandyAudit software for doing hand hygiene auditing. Transition from paper to electronic auditing. More efficient and effective auditing. At end of audit, compliance results are available for staff feedback. This general education developed for all staff to understand HandyAudit concepts. Education occurring this fall. Please encourage colleagues/co-workers to do education.	
6.4. "Texting with Clients, Natural Supports and Other Staff" Policy & Supporting Documents Presentation 1300-1345hrs	Presentation by guest, Lee Bassett, SH-SS Privacy & Access Specialist-recorded. Feedback and comments collected from group. Lots of discussion about current practices and meeting privacy requirements. Some members of group will follow up further with Lee. Policy No. CLI.1411.PL.507 Texting with Clients Natural Supports and other Staff CLI.1411.PL.507.SD.01 Electronic Communication Acknowledgement and Agreement CLI.1411.PL.507.SD.02 Texting on Smart Phones in the Workplace frequently Asked Question – FAQ	Members to follow up with Lee as needed.
6.5. Use of Cortext Imprivata for Secure Text Messaging" Policy	New policy presented by Tamara B-recorded. Feedback and comments collected from group. Policy and procedure: Use of Cortext Imprivata for Secure Text messaging. Clinical Resource Nurses in Acute Care being provided with SH-SS cell phones with Cortext installed for communication with other health care providers.	
6.6. "Philippines Recruitment Update-Orientation for Nurses Presentation" 1415-1500hrs	Presentation by guest, Melissa Schmidt, CMH Educator/ICP-recorded.	
7. Standing Items		
7.1 New Clinical Practice Issues	Complete group discussion and action captured in Clinical Practice Tracking Spreadsheet.	

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
	<p>1. <u>August 2023 Coude Catheter SH-SS NPC CPI Form</u> (email received Aug29, 2023 Laura Plett RN)- Tamara reviewed CPI and summary of research/follow up completed.</p> <ul style="list-style-type: none"> • Motion to close issue with direction that Elsevier Clinical Skill: <u>Urinary Catheter: Straight, Indwelling (Foley), and Coude Catheter Insertion and Specimen Collection</u> will provide skill direction to all clinical staff and that no additional education or competency sign off is required unless requested as learning need by staff on a case by case basis. Carla approved – second by Denise – all in favor with hands up – 14 (met quorum), none opposed. Motion passed. <p>2. <u>SH-SS-NPC-Clinical-Practice-Issue-Form-Safety for Home Visits Sep20 2023</u> (Sept20 2023 Maria Sheryll D. Munoz)- Maria introduced CPI, suggesting a policy needed. Staff flag in calendar when away. Issue with no cell phone services and staff do not feel safe. Issue has been brought forward to Management, no action yet. Group suggested involving Workplace Safety & Health and that Safe Work Procedure may be needed. Group shared that other programs have processes (ie. Public Health – check in procedures) that exist. Other HC offices in region have used check out, check in process.</p> <p>3. PCH Program request to review practice re PICC – Sept-23 (Sept21, 2023 Marianne Woods & Stephanie Rozsa)- Tamara shared CPI form. Group shared many examples of PICC care taught & done in PCH (Boyne Lodge, Tabor Home) as well as Transitional Care and report it being successful. Have used Elsevier. Group agreed there is value in educating in all CVADs (PICCs, ports) care/maintenance. Liana Alton and Kristal McKitrick-Bazin willing to take lead in updating/sharing education used so that it can be shared across sites.</p>	<p>1. Tamara to complete CPI documentation, communicate outcome to regional stakeholders and have completed CPI posted on HPS.</p> <p>2. Maria to follow up with manager and update CPI documentation.</p> <p>3. Tamara to respond to PCH/Transitional Care Leads to take this back to program team to determine if interested in pursuing.</p>
7.2 Review Clinical Practice Tracking Spreadsheet-Updates	Location of all Clinical Practice Issues moved from MS Teams to CWS because not able to update fillable PDFs on MS Teams). Clinical Practice Tracking Spreadsheet Updated.	

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
	<p>4. <u>SH-SS-NPC Clinical Practice Issue Form-Misdirected Reports-May 2023-BW revised (May4, 2023 Benjamin Wiebe)</u>-Ben explained clinic addressing on case by case basis. Not expecting any formal process change implemented. Group encouraged Ben to complete Safety Event form to capture breaches and action taken and to follow up with Lee Bassett, Privacy & Access if needed. Ben in agreement with closing CPI at next meeting.</p> <p>5.<u>SH-SS-NPC-Clinical-Practice-Issue-Form-Nurses with Additional Specialized Skills-2023 (May31, 2023 Wilma Lank-Wiebe)</u>. Tamara reviewed CPI and summary of research/follow up completed.</p> <ul style="list-style-type: none"> • Motion to close issue with direction that Northern Nursing Station trained nurses would not be permitted to perform additional skills that they're able to do in Nursing Stations (ie. suturing) within the region because other models of care and health care provider roles exist (ie. Nurse Practitioners, Authorized Prescribers) to provide these services in the region. Christy Seniuk approved – April seconded – all in favor with hands up 13 (met quorum), none opposed. Motion passed. <p>6. <u>SH-SS-NPC-Clinical-Practice-Issue-Form-PPE Eye Protection-May-2023 (May23, 2023 Tamara Burnham)</u>-Tamara reviewed CPI work to date. Group interested in presentation and trialing eye protection samples.</p>	<p>4. Ben to complete CPI documentation and bring motion to close CPI to next meeting.</p> <p>5. Tamara to complete CPI documentation, communicate outcome to regional stakeholders and have completed CPI posted on HPS.</p> <p>6. Plan for Paula to do PPE presentation at November meeting and to bring PPE eye protection samples for group to trial and provide feedback.</p>
7.3 Safety Event/Critical Incident Reporting	Deferred-Tara Roberts sent meeting regrets.	
7.4 Working Group Time		
8. Time, Date & Location of next meeting	09:00-15:00hrs November - Carman next meeting – Lunch Ordered	

SUBJECT:	SUMMARY OF DISCUSSION	DECISION & NEXT STEPS
9. Adjournment	Time: 14:51	