



ONTARIO CORRECTIONAL NURSES' Interest Group



Speaking out for correctional nursing.

SUMMER EDITION 2018

Inside this issue:

RNAO Interest Group of the Year Award	2
OCNIG AGM 2018	3-4
Improving Ontario's Correctional System	5
OCNIG Jackets !	6
Call for Nominations	7
Nursing Inside	8-9
Prison Needle Exchange Program	9
Educational Opportunities	10-12

A MESSAGE FROM THE PRESIDENT...

We all know the line in the Serenity Prayer that says “give me the wisdom to accept the things I cannot change”. In regards to making change in corrections, I bought into that philosophy for a long time. A few years ago, when I became responsible for the leadership of OCNIG, I made a determined effort to change my thinking: To change that mantra to “give me the wisdom to change the things I cannot accept”! Since then I have been diligently leading OCNIG in that direction; advocating for change to correctional healthcare.

Reflecting on all that has happened since our last newsletter, fills me with hope. Hope for correctional nursing, hope for correctional health care and hope for the system. The Royal Assent of Bill 6 sets a foundation for unprecedented change in corrections. I am a realist. I know that change will not be swift. Regulations need to be drafted and approved, new policy and procedure needs to be implemented and structural changes are needed as well, but it is a step in the right direction. This spring, I had the privilege to present to the Standing Committee of Justice Policy and to sit on an Expert Advisory Committee with a mandate to make recommendations to the Minister of Health and Long Term Care and the Minister of Community Safety and Correctional Services about correctional healthcare transformation. A report is due to both Ministers in July and I hope to share the EAC recommendations with you in the fall.

In recognition of OCNIG's hard work to advocate for change, it was with great pride that we accepted RNAO's Interest Group of the Year award in April. Our executive committee and membership are strong advocates for correctional nursing and correctional health care and it was a privilege to be recognized for that. Read more about it on page 2!

Now that summer is in full swing, the executive will take a short hiatus. I wish you all a safe summer, filled with people and activities that you love! See you in September,

Best regards,

Shirley

OCNIG: RNAO INTEREST GROUP OF THE YEAR

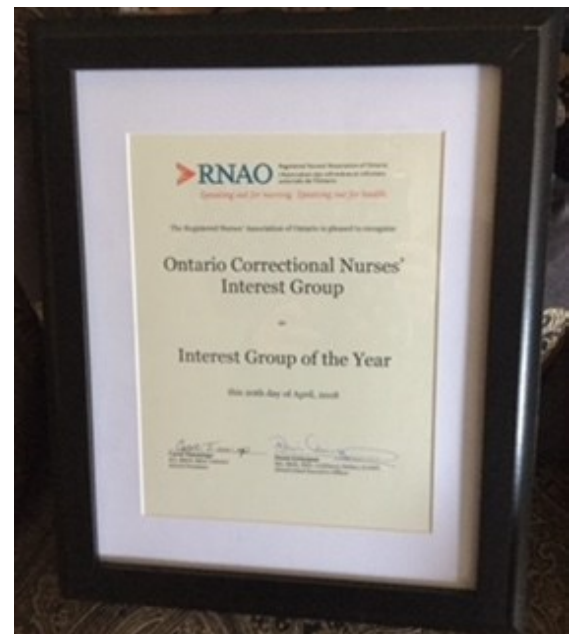
The RNAO Interest Group of the Year Award honours an interest group that best demonstrates commitment to the nursing profession and active participation in RNAO initiatives. This year that group was the Ontario Correctional Nurses' Interest Group!

The criteria for this award included effective communication through a variety of means, which influences decision-makers and mobilizes RNs and NPs for action as well as exemplary teamwork and strong leadership within the nursing and health-care community.

OCNIG demonstrated a strong commitment to communication and advocacy. Utilizing social media OCNIG has posted more than 100 Facebook posts and tweets and has developed a strong following on both sites; 93 following OCNIG on Twitter and 612 following on Facebook. We have published and delivered the quarterly newsletter, emailed our membership regularly and attended numerous meetings on behalf of our membership. To influence decision-makers, we have met more than five times with government officials, attended seven meetings with collaborative partners, and presented at four nursing/student events! We've also consistently grown the membership. Our current membership is 1362 RNs, NPs and nursing students!

Members of OCNIG have also had letters to the editor published in the *Globe and Mail* and *Hamilton Spectator* and the group has collaborated with RNAO home office to write and send action alerts to the Minister of Community Safety and Correctional Services about much-needed changes in Ontario's prison system.

"We've done an incredible job...sharing our concerns, our knowledge, and our expertise with correctional decision-makers and it was a privilege to accept this award on behalf of the membership." says OCNIG President Shirley Kennedy.



OCNIG ANNUAL GENERAL MEETING 2018

Breakfast is served! At the OCNIG AGM

The OCNIG AGM began with breakfast and all in attendance were welcomed and introduced.

Meeting our Ends-Advocacy and Community Partnerships

Shirley Kennedy provided an update of the activities undertaken by the executive committee since our annual report was released in November. The presentation demonstrated that the OCNIG Executive has been involved in activities that rippled outward to influence a number of provincial advocacy groups and current legislation. Successes of the OCNIG Social Media strategy, led by Amber Mahoney, includes a number of Tweets, Facebook posts and numbers of followers. Tracking our social media activity helps to promote the group work and attract potential members. Great work Amber! Both Shirley and Rose Galbraith have been active on the Correctional Health Care Coalition. This coalition is an important link with our community partners, posed to shift the paradigm towards better health care in Corrections. OCNIG is also actively involved in the Segregation Coalition. This coalition promotes mental health and health equity and is advocating for implementation of critical reforms from the Saper's report. Shirley also spoke about the newly formed, Correctional Health Care Secretariat which is working on public consultation to identify and address issues and to shape healthy public policy. This is important infrastructure to influence positive outcomes for our patient population. OCNIG will continue to be an active voice to address the issues. From RN replacement to advocacy in harm reduction, in the coming years a solid foundation will provide the necessary infrastructure changes for future health care in corrections.

Paula Manuel: How to Thrive as a Correctional Nurse

When we asked about a guest speaker for our AGM, the theme of self-care was most popular among the suggestions. Correctional nurses face multiple challenges, obstacles and barriers to both daily work and future accomplishments. The obvious choice of speaker to address self-care was Paula Manuel. Paula led the group through a journey of mindfulness. Using inspirational quotes and exercises, as well as props such as a singing bowl, Paula reminded us that our future lies in our members and our members need to be healthy. Thank you, Paula, for sharing your expertise and your strength. Save the link to this video when you need to feel empowered by your empathy.

[Brene Brown on Empathy vs. Sympathy.](#)

OCNIG Member's Voices

OCNIG members had an opportunity to speak about issues important to them. We heard about Vanier's bid to host an RNAO workshop (See page 12 of this newsletter for more information). There was a lengthy discussion about End of Life care and how increased awareness of this issue positively impacts our patient population. This topic would be an excellent staff education initiative as it is an emerging theme in all our communities.

Training in Trauma Informed care for First Responders also emerged as an important theme in our practice setting. Advocacy and lobbying will be important to provide the funding for this initiative. Staffing challenges continue to be a constraint at most institutions. The importance of taking the time to de-brief and to activate any available resources to provide awareness of the impact of critical incidents and support staff was discussed. This is necessary in order to provide the highest quality health care, to optimize patient outcomes and to ensure a healthy nursing workforce. Of course, this includes both peer-to-peer and peer led de-briefs. Angela shared her observations about vicarious trauma, and the impact of critical incidents as having both individual impact and group impact.

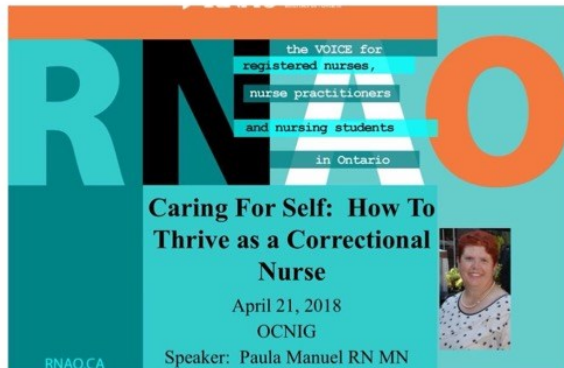
OCNIG ANNUAL GENERAL MEETING 2018

All the valuable input from the Member's Voices is critical in identifying and improving awareness of issues. Best Practice Guidelines will be important in implementing new strategies with respect to crisis response/intervention. More information can be found at the link [HERE](#):

Implementing guidelines at the point of care is multi-faceted and challenging; it takes more than awareness and distribution of guidelines for practice to change. Guidelines must be adapted for each practice setting in a systematic and participatory way in order to ensure recommendations fit the local context (Harrison, Graham, Fervers, & van den Hoek, 2013)

In summary, OCNIG has demonstrated important leadership with many provincial initiatives over the past year and the executive committee and all members contributed to our successes.

Congratulations to the winner of the OCNIG AGM door prize! Vanessa Mesaglio won one of our OCNIG embroidered fleece jackets!



Improving Ontario's Correctional System

To support transformation of the correctional system, on April 19, 2018, RNAO/OCNIG made a presentation before the Standing Committee on Justice Policy on Bill 6: Correctional Services Transformation Act. Bill 6 looks at the province's approach to rehabilitation, public safety and the protection of human rights and dignity of persons in custody.

RNAO Senior Policy Analyst Lynn Anne Mulrooney and the Ontario Correctional Nurses' Interest Group President Shirley Kennedy spoke about RNAO's recommendations including implementation of the recommendations by the **Independent Review of Ontario Corrections'** (IROC), which would benefit the most marginalized Ontarians: those who work within the correctional system, and the broader community.

RNAO's other recommendations included a request to stop accepting immigration detainees into provincial correctional facilities and to continue the government's promise to transfer responsibility for health-care services from the Ministry of Community Safety and Correctional Services to the Ministry of Health and Long-Term Care by 2019.

The full speaking notes can be seen by clicking [the legislative building pictured below](#):



Since the presentation, the Correctional Services Transformation Act, 2018 was passed in the house and received Royal Assent on May 7, 2018. The next step will be the creation of Regulation to support the Act.



ONTARIO CORRECTIONAL NURSES' INTEREST GROUP FLEECE JACKETS NOW AVAILABLE FOR PURCHASE

Coal Harbour © colour-blocked fleece jackets made of 7.6 ounce, 100% polyester anti-pill, micro-fleece with contrast panel at shoulders and sides are embroidered with the RNAO/OCNIG logo!

Available in both men's (J7503) and ladies' (L7503) sizes XS-4XL (see sizing charts below) with two colour options:

1. black/graphite
2. white/graphite (shown here).

If you are interested in ordering one, please call **Mullers' Work Wear at 905-358-9626**. Ask for the RNAO/Ontario Correctional Nurses' Interest Group fleece jacket in the size and colour that you prefer.

You can save on shipping costs by picking up your jacket at Muller's Niagara Falls location; 5823 Ferry St., Niagara Falls!



L7503 - Coal Harbour® Everyday Ladies' Colour Block Fleece

GARMENT MEASUREMENTS								
Size	XS	S	M	L	XL	2XL	3XL	4XL
Chest - Half Measure	18"	19"	20"	21 1/2"	23"	24 1/2"	26 1/2"	28 1/2"
Chest - Full Measure	36"	38"	40"	43"	46"	49"	53"	57"
Body Length from HPS	29"	30 1/2"	31"	32"	33"	34"	35 1/2"	37"
Sleeve Length from CB	32 3/4"	33 1/4"	33 3/4"	34 1/2"	35 1/4"	36"	36 3/4"	37 1/2"

Finished measurements in inches. Refer to "How to Measure" guide for detailed information on measurement instructions.

LADIES' General Sizing Guide								
Size	XS	S	M	L	XL	2XL	3XL	4XL
Numeric Size	2	4-6	8-10	12-14	16	18-20	22	24
Bust	32"-34"	34"-36"	36"-38"	38"-41"	42"-44"	44"-47"	48"-51"	52"-55"
Waist	24"-26"	26"-28"	28"-30"	30"-32"	32"-34"	34"-36"	36"-38"	38"-40"
Hip	32"-34"	34"-36"	36"-38"	38"-41"	42"-44"	44"-47"	48"-51"	52"-55"
Sleeve Length - CB	30"-32 1/2"	30 1/2"-31"	31 1/2"-32"	32 1/2"-33"	33 1/2"-34"	34"-34 1/2"	34 1/2"-35"	34 1/2"-35"

J7503 - COAL HARBOUR® Everyday Fleece Colour Block Jacket

GARMENT MEASUREMENTS								
Size	XS	S	M	L	XL	2XL	3XL	4XL
Chest - Half Measure	18 1/2"	21"	23 1/2"	26"	28 1/2"	31"	33"	35"
Chest - Full Measure	37"	42"	47"	52"	57"	62"	67"	72"
Body Length from HPS	28 1/2"	29 1/2"	30 1/2"	31 1/2"	32 1/2"	33 1/2"	34"	35 1/2"
Sleeve Length - CB	30 3/4"	31 1/2"	32 1/4"	33"	33 3/4"	34 1/2"	35 1/4"	36"

Finished measurements in inches. Refer to "How to Measure" guide for detailed information on measurement instructions.

ADULT General Sizing Guide								
Size	XS	S	M	L	XL	2XL	3XL	4XL
Chest	30"-32"	34"-36"	38"-40"	42"-44"	46"-48"	50"-52"	54"-56"	58"-60"
Waist	28"-30"	30"-32"	32"-34"	34"-36"	36"-38"	38"-40"	42"-44"	44"-46"
Sleeve Length - CB	31"-33"	32"-33 1/2"	34"-35"	35"-36"	36"-37"	37"-38"	38"-39"	38 1/2"-39"

If you have any questions, please contact us at: ontariocorrectionalnurses@gmail.com

CALL FOR NOMINATIONS

Do you wish to have an active part in advocating for correctional nurses, correctional health and correctional health care? Are you looking for an opportunity to be mentored by seasoned correctional nurses or to develop your leadership skills? The Ontario Correctional Nurses' Interest Group is looking for members to join the OCNIG executive committee. For 2018-2020, Ontario Correctional Nurses' Interest Group is seeking nominees for the following positions:

Policy and Political Action Executive Network Officer

- responsible for the group's advocacy efforts and the point person for political action activities including:
- meetings with politicians as part of Queen's Park Day, Queen's Park on the Road (QPoR) and Take Your MPP To Work;
- acting on and disseminating action alerts to members and engaging them on issues of concern to nurses and nursing students; and
- providing a strong voice for nursing during elections, by connecting with candidates and organizing health-care all-candidates debate

Social Media and Information Technology Executive Network Officer

- point person for the group's social media profile;
- managing the group's social media presence on Twitter and Facebook;
- updating the OCNIG website; and
- working closely with the communications ENO.

Member at Large – Forensic Nursing

- keeps the interest group informed of nursing trends and issues in the forensic nursing environment.

Member at Large – Federal Correctional Nursing

- keeps the interest group informed of nursing trends and issues in the federal correctional environment.

Candidates must be members in good standing of Ontario Correctional Nurses' Interest Group and agree to serving for a two year term starting November 1, 2018, if elected.

To submit your nomination please complete the nomination form, include a brief statement outlining your interest in the position (max 250 words) and send the nomination form and statement to Shirley Kennedy at:

ontariocorrectionalnurses@gmail.com or by fax to 416.599.1926 by 5:00 p.m. **June 8, 2018.**

Now is the time to join this award winning team!



Sexual Boundary Violations in Correctional Nursing: It Could Happen to You

by Lorry Schoenly

This past fall I participated in a session on sexual boundary violations presented by Cindy Peternelj-Taylor at the International Association of Forensic Nurses Scientific Assembly. Her research into this concept in Canada is fascinating and has much for us to apply in our own practice settings. Here are my notes and thoughts from her session.

Cindy interviewed seven registered nurses working in secure settings who had observed or experienced sexual boundary violations in their nursing practice. Spending a lot of time with a patient, such as can happen in correctional settings, can make this a hotbed for potential problems.

What does it mean to cross the line? She identified this as behaving in a way that is socially unacceptable or behaving in a disreputable or inappropriate manner. In professional practice, this can mean nurses who are professionally irresponsible; having crossed the bounds of an appropriate nurse-patient relationship to a romantic or sexual relationship. When has a nurse-patient relationship crossed the line? Peternelj-Taylor's research revealed these indicators:

- Starting to look forward to seeing that person the next day.
- Keeping secrets in the relationship
- Not allowing others into the relationship
- Exchanging messages

Relationship should always be for the benefit of the patient, not for self-gratification or personal gain. Yet, therapeutic relationship can be very intimate and confusing to the patient. In fact, it is not uncommon for a patient to misinterpret therapy. For example, how would you respond to a patient who says, "I want to kiss you?" How would you respond in a way that would realign the relationship and not cause the patient to withdraw from therapy? Our inmate-patients often misinterpret interactions with nurses; both words and gestures.

Nurses have an ethical responsibility to maintain the therapeutic environment no matter the actions of the patient. Caution is needed. We can lose sight of professional roles and responsibilities in the midst of a situation and can be blindsided. Therefore, we have responsibility to our peers to point out when we see potential boundary violations.

NURSING INSIDE (continued)

Questions to ask in a potential improper nurse-patient relationship:

- Would this relationship really work out in the real world?
- Would I say or do this in front of my peers or my supervisor?
- Am I keeping secrets or not talking to my peer group about my conversations or actions with this patient?

Peternilj-Taylor's research also suggests that managers can reduce sexual boundary violations. One way is to investigate any indication of improper relationship in the medical unit. Training, especially the use of case vignettes, can help nurses to overcome temptation and develop skills in responding to potential violation opportunities.

Correctional Services Canada Prison Needle Exchange Program

The **Canadian Drugs and Substances Strategy** supports measures that reduce the harmful health, social and economic effects of substance use on individuals, their families and communities. The strategy recognizes that not everyone is willing or able to enter treatment at all times. Until people are ready and able to seek treatment, harm reduction programs work to reduce risks, improve health and connect people with other key health and social services.



In keeping with the Canadian Drugs and Substances Strategy, CSC will be implementing a Prison Needle Exchange Program at two federal facilities; Atlantic Institution in New Brunswick and Grand Valley Institution for Women in Ontario as early as June 2018. The target for full-roll out to all institutions is January 2019. A *Threat Risk Assessment* model that has already been proven to be safe and effective will be utilized and will take into account the inmate's confidentiality and health, while ensuring the safety and security of the institution.

EDUCATIONAL OPPORTUNITIES



National Commission on
Correctional Health Care

	EVENT	LOCATION
2017		
November 4-8	National Conference on Correctional Health Care	Hyatt Regency Chicago
2018		
April 21-24	Spring Conference on Correctional Health Care	Hyatt Regency Minneapolis
July 15-16	Correctional Mental Health Care Conference	Loews Hotel, Los Angeles
October 20-24	National Conference on Correctional Health Care	Paris Hotel, Las Vegas
	Note: The Correctional Health Care Leadership Institutes is being moved to first quarter 2019.	

Nursing Links Workshops:

Click on the orange button to
access registration details!



Barrie:

Therapeutic Use of Medical Cannabis (October 16, 2018)

London:

Therapeutic Use of Medical Cannabis (October 22, 2018)

Anxiety & Depression (November 26, 2018)

Ottawa:

Therapeutic Use of Medical Cannabis (October 15, 2018)

Anxiety & Depression (November 19th, 2018)

Toronto:

Depression (October 22, 2018)

RNAO 7th Annual Nurse Executive Leadership Academy

June 12 - 15, 2018

The Old Mill Toronto

21 Old Mill Road, Toronto, Ontario M8X 1G5

The **7th Annual Nurse Executive Leadership Academy** is quickly approaching! This exciting and unique event is taking place June 12 -15, 2018 at The Old Mill, Toronto, ON. The program will feature expert faculty from policy, practice, academia and research, providing up-to-date insights for bolstering knowledge and generating solution among executive nurse leaders. Meet other nurse executives, engage in dynamic dialogue and discuss current and emerging issues across the sectors. **Benefits include:** interactive learning experience, all-inclusive leadership event, personal and professional renewal and network building, and showcasing the vital impact of nurse executive leadership.

Don't miss out on this opportunity to engage in a variety of dynamic sessions on:

- Mental Health & Addictions;
- Indigenous Health;
- Transforming Nursing Through Knowledge;
- Next Steps after the Provincial Election Results;

And many more informative and entertaining sessions with experts!

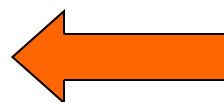
Hear from:

- Dr. Peter Buerhaus, Professor in the College of Nursing and Director of the Center for Interdisciplinary Health Workforce Studies at Montana State University
- Dr. Bob Bell, Deputy Minister, Ministry of Health and Long-Term Care
- Susan Fitzpatrick, Chief Executive Officer, Toronto Central Local Health Integration
- Dianne Martin, Chief Executive Officer, Registered Practical Nurses Association of Ontario
- Dr. Dawn Martin-Hill, Original founders of the Indigenous Studies Program at McMaster University, Paul R. McPherson Indigenous Studies Chair
- Dr. Cathy Crowe, Toronto Street Nurse, Recipient of Atkinson Economic Justice Award, Author, Producer

And many more incredible speakers!

Take a look at the attached Program for more information regarding this exciting event. Please share this with other leaders in your organization and your network.

See you at NELA!



Click the box to register!

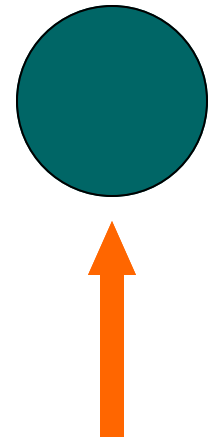
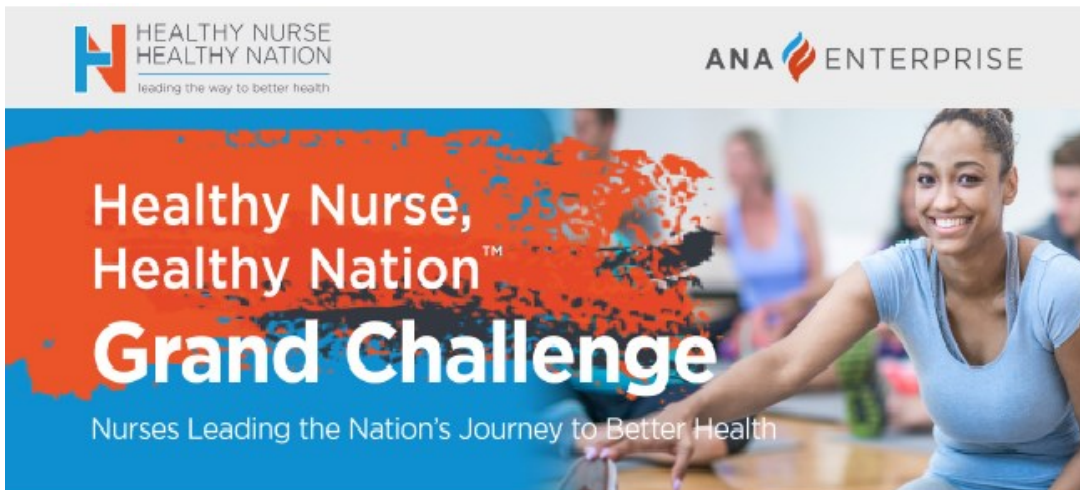
EDUCATIONAL OPPORTUNITIES

RNAO's Addressing Substance Use Champions Workshop (Level 1)

Keep your eyes out for this great workshop planned for November and to be held at **Vanier Women's Centre!** The Addressing Substance Use Level 1 (Foundational) workshop will provide nurses and other health professionals with the tools and skills to provide safe, ethical and competent care to persons in all clinical settings who use substances. Participants will learn concepts related to stigma, licit and illicit drugs, social determinants of health, harm reduction and explore best practices related to screening, brief interventions and referral to treatment. This content will be integrated with key content from the RNAO *Toolkit: Implementation of Best Practice Guidelines, Second Edition*.

Watch our fall Newsletter for more details!

HEALTHY NURSE, HEALTHY NATION



Today's the day to join the movement!

More than **18,000** nurses have taken [the challenge](#) to improve their health! **What about you?**

Click this circle to find out more!

Join now to receive:

- Recipes & workout ideas
- Access to online forum of your peers
- [Monthly health challenges](#) & tips sent to your inbox
- Success stories from other nurses
- Access to our private [Facebook group](#)
- Healthy Nurse survey with personalized results (heatmap)

