



COMMUNITY
HEALTH NURSES
OF CANADA

INFIRMIÈRES ET INFIRMIERS
EN SANTÉ COMMUNAUTAIRE
DU CANADA

GREAT BIG NEWS

CHNC MEMBER EXCLUSIVE NEWSLETTER

CHNC2024.ca

**Community Health Nursing:
Health for All**

Canada's national community health nursing
conference.

<https://CHNC2024.ca> | #CHNC2024

April 22-24, 2024
Toronto, Ontario, Canada



SPRING 2024

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#CHNsHereTogether #nursingstrong
#community

Welcome to the Spring 2024
edition of Great Big News.

HAVE FEEDBACK OR IDEAS FOR GBN? EMAIL
US AT [INFO@CHNC.CA!](mailto:INFO@CHNC.CA)

Follow us on social media!

- <https://www.facebook.com/CHNCIISCC/>
- https://twitter.com/CHNC_IISCC
- https://www.instagram.com/chnc_iiscc/
- <https://www.linkedin.com/company/chnc-iiscc/>



Message from the President

Karen Curry



Happy Spring

It has been an eventful, busy winter for CHNC. The National Conference Planning Committee and sub committees have been doing amazing work. This year, we are not using an event coordinator for conference planning. The members are volunteering their experience and time to ensure the success of the first in person conference since 2019. I am grateful to the experience and sharing of the committee members. A special thank you, to CHNC Executive Director, Anthony Lombardo, for sharing his conference planning expertise. Anthony has been working diligently to follow up with requests, share his experience and work with website host to ensure the “back” end processes are working for our members.

This spring, the efforts of engagement and work on developing Public Health Core Competencies and Home Health Nursing Competencies will be shared. There will be free, one day preconference sessions for consultation and validation of both these important projects for community health nurses on Monday April 22. Please see conference program for more details.

Spring is in the air, and it is time of renewal and fresh starts. The CHNC Board and Executive look forward to seeing everyone at the conference. I look forward to meeting old and new friends and making new memories.

All the best,

Karen Curry, CHNC President



Community Health Nursing: Health for All

April 22-24, 2024

...at historic Hart House, University of Toronto

REGISTER NOW!

VIEW THE PROGRAM

Join us at CHNC2024: Community Health Nursing for All, Canada's national conference dedicated to advancing community health nursing practices and initiatives. Taking place in Toronto, Ontario, at the historic Hart House, University of Toronto from April 22-24, 2024. We are honored to announce our esteemed keynote speakers: Dr. Leigh Chapman, RN, PhD, Chief Nursing Officer at Health Canada, and Dionne Sinclair, MScN, MCHM, RN, CHE, IDI LLC, Vice President, Clinical Operations & Chief Nursing Executive at the Centre for Addiction and Mental Health (CAMH). This conference offers a unique opportunity for nurses passionate about community health to gain valuable insights, engage in discussions, and connect with peers across various disciplines. From practical workshops to thought-provoking sessions, CHNC2024 promises to inspire and empower attendees to drive positive change in community health nursing practice. Register now at CHNC2024.ca and join the conversation using [#CHNC2024](https://twitter.com/CHNC2024)

Dr. Leigh Chapman is committed to advancing the nursing profession in Canada to ensure equitable access to quality care. As CNO for Canada, she provides strategic advice to Health Canada, plays a convening role on key nursing issues, and represents the Federal Government at public forums.

Leigh is a registered nurse (RN) who received her PhD from the University of Toronto's Lawrence S. Bloomberg Faculty of Nursing. Over the past 20 years, she has gained a deep understanding of nursing by working in both frontline and clinical leadership capacities. In addition to her role as CNO for Canada, Leigh continues to work at a community-based consumption and treatment site in Toronto, where she provides harm reduction services and frontline care.



Dr. Leigh Chapman, RN, PhD

CHNC is honoured to welcome our esteemed

Keynote Speakers

to CHNC2024!

Dionne Sinclair, MScN, MCHN, RB, CHE, IDI LLC



Dionne Sinclair is an accomplished Certified Healthcare Executive who is currently the Vice President, Clinical Operations, and Chief Nursing Executive at the Centre for Addiction and Mental Health (CAMH). A visionary leader with a passion for transformative change and innovation, Dionne has honed her skills in creating a climate that fosters innovation and develops new approaches to achieve strategic outcomes.

Throughout her illustrious career, Dionne has been celebrated for her unwavering high energy, strong work ethic, and perpetually positive attitude. This spirit has created an environment of enthusiasm and excellence in all her endeavors. Known for her ability to motivate and inspire others, Dionne is also a sought-after motivational speaker, sharing her valuable insights and experiences to empower individuals within and beyond the healthcare community.

Preliminary Program

Monday, April 22, 2024

- **Pre-Conference Events**
- Delegates' Reception
- Official Opening of the Exhibit Hall

Tuesday, April 23, 2024

- Keynote Address: Dr. Leigh Chapman
- Concurrent Sessions
- Exhibit Hall
- Social Event

Wednesday, April 24, 2024

- Keynote Address: Dionne Sinclair
- Concurrent Sessions
- Exhibit Hall

Preconference Events

Pre-Conference Consultation
2024 Core Competencies for
Public Health in Canada:
Supporting Use and Application
Monday, April 22, 2024
8:30am- 4:30pm
No fee, but pre-registration is
required. Space is limited.

Pre-Conference Consultation: Home
Health Nursing Competencies
Home Health Nursing Competencies
Project
A CHNC Collaboration with SE
Health
Monday, April 22, 2024
8:30am-4:30pm
No fee, but pre-registration is required.
Space is limited.

CHNC

National Conference Planning Committee

Karen Curry, CHNC President/ Co Chair National Conference Committee

Cindy Baker- Barill, Co Chair National Conference Committee

Anthony Lombardo, CHNC Executive Director

Barb Chyzzy, CHNC Finance Director / Sponsorship Committee Chair

May Tao, Program Committee Chair

Mary Audet, Hospitality Committee CoChair

Melissa Edwards, CHNC Communications Director

Austin White, Marketing Communications Chair

Heather Epp, Co Chair Hospitality Committee

Poonam Sharma, Ontario CHNC Director

Joyce Fox (Past Executive Director CHNC)

Cheryl Cusack (Past President CHNC)

Donna Jepsen (Past President CHNC)

Morag Granger (Past President CHNC)

DID YOU KNOW?

CHNC MEMBERS
RECEIVE
REDUCED
REGISTRATION
RATES FOR
CHNC2024!

SELF CARE

Corner

Spring is “just around the corner!” The warmth of the sun and budding flowers and trees remind us of the process of growth and renewal. Perhaps this is a fitting time for us, as nurses, to examine the way we care for ourselves and to ask if this resembles the way we care for our patients. Dr. Kristin Neff writes about the importance of self-compassion and notes that “having compassion for oneself is really no different than having compassion for others. . . Instead of mercilessly judging and criticizing yourself for various inadequacies or shortcomings, self-compassion means you are kind and understanding when confronted with personal failings—after all, who ever said you were supposed to be perfect?” (Neff, 2024).

Recognizing that we are deserving of self-compassion can lead to a powerful shift in the way we approach caring for ourselves. It can motivate us to act proactively so that we have the energy and resources to manage the unexpected events and challenges that are inevitable because “life happens.” As community nurses, used to working upstream, this approach might resonate.

Here are some resources that explain self-compassion:
Self-Compassion Quiz: <https://self-compassion.org/self-compassion-test/> Videos about Self-Compassion
<https://self-compassion.org/videos/> 2 Minute Tips: How to Practice Self Compassion:
<https://www.youtube.com/watch?v=8lnU4fZ3eiM>

Dr. Sandy Johansson, Nurse Practitioner, University of Calgary
School of Nursing: Self Compassion Exercise:
<https://www.youtube.com/watch?v=B4HPDuFjD7M>

“Neff, K. 2024,. <https://self-compassion.org/the-three-elements-of-self-compassion-2/>”

Perspectives on Community Health Nursing in Brazil

Daniel A. Nagel, RN, PhD

Assistant Professor

College of Nursing, Rady Faculty of Health Sciences
University of Manitoba



In 2021 I was approached by a PhD student, Maria Alice, from the Federal University of Santa Catarina (UFSC) in Florianópolis, Brazil, to provide grounded theory expertise for her dissertation work. As it happened, Maria Alice's clinical background was similar to mine in community nursing that included a focus in primary health care and a passion for population health. I was invited to be her co-supervisor along with Dr. Angela Alvarez and, subsequently, went to spend time at UFSC January 9 - March 23, 2024, as a visiting scholar. This turned out to be an opportunity of a lifetime.

During my time in Brazil, I was able to experience the vibrant culture of this part of South America – attend my first carnival, enjoy the rich cuisines of the area, and meet some wonderful people. The main focus of my work in Brazil was to lend my areas of expertise and nursing experience to the faculty and students across three different institutions, to learn about the healthcare system in Brazil, and discover how different or similar care was delivered in community, as well as how nursing education was done. Another aspect my visit was to explore the potential for a partnership between the university I work for and academic institutions in Brazil. To my pleasant surprise, I discovered there were more similarities between Brazil and Canada than differences - both countries grapple with challenges of a public health system, issues of health inequity to structurally disadvantaged populations, and chronic underfunding of both health and education systems. One particular issue that stands out for both countries is the legacy of colonialism and the impact it has had on the respective Indigenous populations in these areas. I also discovered there are things that Brazil does much better than Canada - they have a national dental and pharmacare infrastructure, and also

have a better developed system of primary health care than we have in most of our provinces and territories. And on the societal level, there is a more intentional work-life balance; a “work to live” rather than “live to work” philosophy.

When it comes to community health nursing, three main observations stood out for me: a) formal nursing education in Brazil retains a very strong emphasis on community and population health; b) nurses employed in primary health care settings have a wide degree of autonomy in their roles; and c) nurses play a huge role in addressing inequities in social determinants of health for underserved populations.



In Brazil, the baccalaureate program for registered nurses is five years long before qualifying for licensure and may be followed by a 2-year residency for specialty areas, such as primary health care, oncology, and transplantation. Because university programs are federally regulated, there is a standard curriculum across the country that promotes consistency in education and portability across the 26 Brazilian states. Most importantly, graduates from the program will all have gained experience on community and population health throughout their program that is different in Canada.

Since the adoption of NCLEX in Canada, curricula in nursing programs here have become more acute care focused with community content watered down to near extinction. As well, rather than the continual friction of how “specialized” public health is, nursing student graduates in Brazil are prepared with a strong foundation to take on a full scope of practice and generalist role that includes all areas of community health. And this strong foundation is based largely on authentic experiential learning through project work based in community that is starkly different than what many nursing programs in Canada offer.

It is because of the strong, practical foundation in basic nursing education and the residency programs that baccalaureate graduates in Brazil have an expanded role in community health settings. The nurses I met in primary care roles have a very broad generalist practice that covers the lifespan continuum, dealing with everything from perinatal care to chronic disease management and everything in between. To expand their roles, these nurses take courses and other professional development opportunities to engage in advanced practice, such as STI screening, family planning, prenatal care, and child development. They also work alongside other healthcare practitioners and medical specialists in a true interprofessional collaborative practice model that really is community focused. As an aside, I also visited an acute care hospital that gave me a sense of nursing roles in that setting; the model is quite different in that most of the care is provided by technical nurses that are similar to our LPNs. In both acute med/surg units and ICUs, the ratio of RNs to technical nurses is quite low in care delivery averaging 1 RN for every 4 technical nurses.

Community health nursing to address social and health inequities is quite evident, particularly through nursing education programs where faculty and students undertake health promotion activities through extension programs. Extension programs in the federal universities here are unlike those we have in Canada there the focus on professional development through certificate and diploma programs. In Brazil, extension programs receive funding for specific university-led interprofessional projects to address issues related to social determinants of health in underserved populations, such as in favelas and Quilombola communities. Favelas, often equated to shanty towns or slums, developed with an influx of people to major urban centers who originally settled on the hillsides where there was no infrastructure such as power, water, and



sewers. Quilombolas were originally formed by escaped slaves who settled on uninhabited lands and, as they were often hunted down by Portuguese colonists, fortified their settlements, and fought off attacks. Peoples of both these population groups have historically faced discrimination, racism, poverty, and challenges with accessing the basics of healthy food, good shelter, education, and healthcare. Nursing students, both undergraduate and graduate, along with nursing faculty and other disciplines engage in long-term health promotion projects as part of education and service commitments to the community.



One of the areas of deep interest expressed by both students and faculty here was learning about the work being done in Canada with respect to truth and reconciliation. I shared Canada's dark legacy of colonialism, including the residential schools and the 60s Scoop, and the impact these have had on the social determinants of health for Indigenous and Inuit peoples. Brazil has had a very similar history with colonialism that predates that in Canada and, recently, Indigenous peoples in Brazil were more severely impacted by intentional policies of the previous government through continued deforestation of the Amazon and lack of resources during the COVID pandemic.

I returned to Canada with many wonderful memories, new learnings, and a better appreciation of community health nursing in another country. One thing I realized is how we in Canada have lost much from our nursing programs in the preparation of nursing graduates for community health practice; a pattern that is antithesis to the idea of health promotion and upstream prevention. But I also experienced firsthand through this international endeavor how we can work more collaboratively with nursing education programs and study healthcare systems in other countries to learn from each other and consider alternative ways to advance the roles of community health nurses.

With great appreciation I would like to thank Professoras Maria Alice de Freitas and Josiane Steil Siwert of the Federal Institute of Santa Catarina and Professoras Marluci Stipp, Liane Totte, and Maria Gefé of the Federal University of Rio de Janeiro for their generous gifts of time and knowledge during my visit. As well, I thank Professora Angela Alvarez for hosting me at her home during my stay in Florianopolis, Santa Catarina.

Daniel A. Nagel RN, PhD



MEMBERSHIP RENEWAL

Membership is effective January 1 -December 31!

*click
here!*



COMMUNITY
HEALTH NURSES
OF CANADA



INFIRMIÈRES ET INFIRMIERS
EN SANTÉ COMMUNAUTAIRE
DU CANADA

Free - again! Student Membership

Help us build a "community" of community health nursing enthusiasts by sharing membership news about CHNC! You can encourage students that you teach or precept to join for FREE! Please spread the word and share with your colleagues, so their students can join too.

Community Health Nurses: Leaders for a Healthy Canada

Community Health Nursing Certification

The Canadian Nurses Association offers certification in 20 specialty areas. The certification credential is part of a respected national certification program. Certification became available to Canadian community health nurses in 2006. It provides official recognition by nursing colleagues and health system stakeholders of the unique community practice focus and that certified nurses are qualified, competent, and current in the practice of community health nursing. The official designation letters, CCHN(C), are engraved on the pin provided to candidates who have successfully passed the rigorous national practice and knowledge requirements of the certification exam. CHNC encourages you to wear your pin with pride.

To learn more about certification

[CLICK HERE](#)

**Deadline to Apply for the May 2024
writing is March 31!!**
Apply from June 10 – September 30
Exam writing window: November 1 – 15
Receive your results in December
RENEWAL BY CONTINUOUS LEARNING
**• Apply anytime from January 15 –
December 15, 2024**

ARE YOU PASSIONATE ABOUT COMMUNITY HEALTH NURSING? WOULD YOU LIKE TO HELP LEAD CHNC INTO THE FUTURE? JOIN THE BOARD OF DIRECTORS!

The Community Health Nurses of Canada (CHNC) Nominating Committee is seeking experienced, committed, skilled individuals, who are passionate about community health nursing, as nominees for the CHNC Board of Directors to lead CHNC into the future. The Call for Nominations is for the following Executive/Director positions for two-year terms of office beginning at the Annual General Meeting 2024: **June 11, 2024, 7-8:30 ET.**

Executive Position

- President-Elect
- Treasurer

Provincial and Territorial Directors

- Nunavut
- Newfoundland/Labrador

The Nominating Committee is seeking candidates with a variety of skills and experiences including but not limited to:

- Leadership in community health nursing (formal and informal)
- Understanding of and interest in advancing current issues in community health nursing
- Ability to work collaboratively with colleagues across Canada
- Ability to commit serve on the CHNC Board and at least one CHNC Standing Committee that is of interest to the candidate
- Specific areas of experience considered an asset include organizational governance, conference/webinar planning, financial planning, communications, membership recruitment, certification, and policy development.

Nomination Requirements

Nominations for Director must be in writing and signed by the nominee indicating consent to be a candidate and must include 2 nominators who are CHNC members in good standing. Any CHNC member in good standing shall be eligible to be nominated for the office of Director. The nomination form must be accompanied by a brief description of the candidate's skills and experience (maximum 1 page) and signatures of the nominee and nominators. The brief description of candidate's skills and experience may be published in communications to members. For more information on the role expectations and nomination process please see the [CHNC Policy Manual](#). Nomination papers must be received by the Nominating Committee on or before midnight EST, **April 30, 2024**. Send nominations to donna.jepsen@gov.bc.ca. **Please note - nominations received after June 1, 2024, at 11:59 pm Eastern** shall not be considered (but can be brought to the AGM).

Provincial/Territorial Directors

Provincial/Territorial Directors are the official liaison between the Corporation and their Nursing Association Provincial/ Territorial Community Health Nursing Group or community health nurses in their jurisdiction. They will act as ambassadors for Corporation, be in regular communication with community health nurses in their jurisdiction, inform the Board of Directors of trends and issues in their jurisdiction and prepare an annual, typed report to be presented at the Annual Meeting.

CHNC Nominations Committee: Donna Jepsen, Anthony Lombardo, Karen Curry, Morag Granger



Live in Alberta?

The Alberta Public Health Association (APHA) is a provincial volunteer-driven, not-for-profit association representing public health in Alberta and is Alberta's only independent public health voice. APHA has a voluntary membership that includes any individual engaged in public health or has an interest in public health. The mission of the APHA is to be an independent, credible, and evidenced-based advocate for public health and health equity in Alberta. We have a voluntary membership representing a variety of disciplines including practitioners, students, academics and researchers, non-government organizations, community members and more.

APHA is currently recruiting to its board and looking for like minded community health nurses to join their membership to support APHA in public health advocacy. Please read the attachments to learn more and how to get involved. Direct questions can be sent to APHA President, Angeline Webb at awebb@ualberta.ca.



New graduates interested in public health nursing as a career or newly hired in public health, advance your knowledge and skills with Canada's first and only Public Health Nursing Postgraduate Certificate. Spring registration is now open. Registration open for PG program on March 19 2024.

Learn more at:

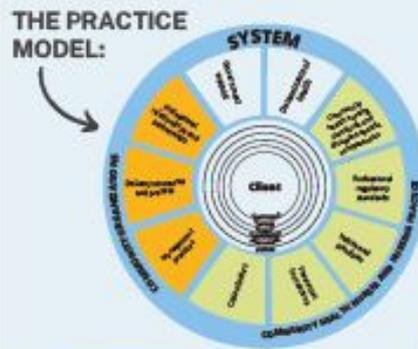
mohawkcollege.ca/PublicHealthNursing

Taught by past CHNC President, CHNC Award of Merit winner Ruth Schofield, and other experienced PHNs!

Interested in learning more about the CHNC Standards of Practice?

CLICK HERE

The Canadian Community Health Nursing Professional Practice Model & Standards of Practice, has been updated in 2019. Written by Canadian community health nurses and experts from all practice areas, this revised document defines the practice of a registered nurse in the specialty area of community health nursing and provides a guide for CHNs and their employers to evaluate their practice.



2. Prevention and health protection

Community health nurses use the socio-ecological model to integrate prevention and health protection activities into practice.



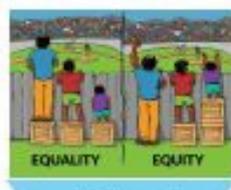
4. Professional relationships

Community health nurses work with others to establish, build and nurture professional and therapeutic relationships. These relationships include optimizing participation, and self-determination of the client.



6. HEALTH EQUITY

Community health nurses recognize the impacts of the determinants of health, and incorporate actions into their practice such as advocating for healthy public policy. The focus is to advance health equity at an individual and societal level.



STANDARDS OF PRACTICE

Community Health Nurses of Canada **CHNC** **CCNC**
 Community Health Nurses of Canada / Communauté des infirmières et infirmiers de santé communautaire du Canada

1. Health promotion

Community health nurses integrate health promotion into practice using the five Ottawa charter health promotion strategies:

- build healthy public policy
- create supportive environments
- strengthen community actions
- develop personal skills
- reorient health services

3. Health maintenance

Community health nurses integrate health maintenance, restoration and palliation into their practice to maintain maximum function, improve health, and support life transitions including acute, chronic, or terminal illness, and end of life.



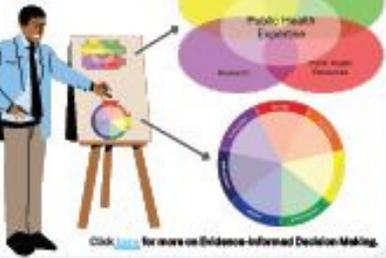
5. Capacity building

Community health nurses partner with the client to promote capacity.



7. Evidence-informed practice

Community health nurses use best evidence to guide nursing practice and support clients in making informed decisions.



8. Professional responsibility & accountability

Community health nurses demonstrate professional responsibility and accountability as a fundamental component of their autonomous practice.



References:
 Community Health Nurses of Canada. (2019). Canadian community health nursing professional practice model & standards of practice.
 Illustrating equality vs equity. Intersection Institute for Social Change. (2007, November 24). Retrieved June 24, 2022. From <https://www.intersectioninstitute.org/illustrating-equality-vs-equity/>
 National Collaborating Centre for Methods and Tools. (2018). Evidence-informed decision making. National Collaborating Centre for Methods and Tools. (2018). Evidence-informed decision making in public health. <https://www.nccmt.ca/tools/ehd/>

Community Health Nurses of Canada presents:

MOSIAC: A COMMUNITY OF PRACTICE



Community Health Nurses in Canada:

- Face many workforce challenges that are leading to high rates of burn out and turnover.
- Express interested in coming together to discuss the current health care environment, support practice and advocate for change.

What is a Community of Practice (CoP)?

- CoP is a group of people with a common passion who come together to share resources and learn through ongoing interactions.

What is MOSIAC?

MOSIAC is
Members of Social and Inclusive Communities

An online forum for CHNs to:

- Support and share community health nursing experiences
- Shape positivity and advocacy for change
- Identify and address challenges that impact CHNs practice and work conditions
- Incorporate different ways of knowing and doing to understand CHNs' influence within the current health care milieu.

Past Community of Practice Sessions

January 2024 - *Introduction to MOSIAC What is a CoP?*

February 2024 - *Challenges and Rewards Working in a First Nation Community* with guest Peggy Dick

March 2024- *Moral Distress: Building Personal Capacity and Taking Collective Action* with guest Dr. Catherine Baxter, RN, PhD (Brandon University)



**MOSIAC IS HELD ON THE
3RD WEDNESDAY OF
EVERY MONTH FROM
12-1:00 PM EST/EDT**

**WATCH FOR EMAILS
FROM CHNC FOR
REGISTRATION DETAILS
EACH MONTH!**