

## Nursing Supply Outpacing Canadian Population Growth: 25% Increase in Nurse Practitioners in One Year

From 2009 to 2010, the nursing workforce increased at almost twice the rate of the Canadian population, according to a report released in January by the Canadian Institute for Health Information (CIHI). During that period, the nursing supply increased by 2% while the population increased by 1.1%. In 2010, there were 354,910 regulated nurses working in Canada – an increase of 8.8% since 2006, when there were 326,170.

*Regulated nurses:* Canadian Trends 2006 to 2010 reveals supply, demographic and workforce trends for the country's largest group of healthcare professionals at national, provincial and health region levels. Three-quarters of this workforce are registered nurses (RNs), 23% are licensed practical nurses (LPNs) and 1.5% are registered psychiatric nurses (RPNs). RPNs are regulated separately in the four western provinces and, since 2009, in Yukon.

The number of nurse practitioners (NPs) employed in nursing has also increased. In 2010, there were 2,486 NPs – 25% more than in 2009. NPs are RNs who have additional education and training, which grants them a broader scope of practice. NPs may order and interpret diagnostic tests; prescribe some pharmaceuticals, medical devices and other therapies; and perform certain procedures. NPs are licensed in all provinces and territories except Yukon.

## Describing Community Nursing: Building Blocks for Improvement

The International Council of Nurses (ICN) is delighted to announce the release of a new publication, *Community Nursing*, in partnership with the Scottish Government and the National Health Service (NHS) Scotland. The publication presents a data set that has been developed and tested in the NHS Scotland. The data set is mapped to and encoded with the International Classification for Nursing Practice (ICNP®).

Community nursing teams in Scotland have a tradition of providing a wide range of high-quality services spanning the care continuum, to people of all ages, their families and communities in settings as diverse as remote islands and inner cities. While community nurses already make an important contribution to keeping people at home and improving their health and well-being, there is still potential for a much greater role. Improved data and information about community nursing are essential to this national agenda. This collaboration contributes to the Scottish Government's Modernising

Nursing in the Community program and NHS Scotland's national eHealth program.

More information on ICNP® can be found at [www.icn.ch/pillarsprograms/international-classification-for-nursing-practice-icnpr](http://www.icn.ch/pillarsprograms/international-classification-for-nursing-practice-icnpr).

## Grand Challenges Canada Announces Canada's New Rising Stars in Global Health – Innovators Dedicated to Improving Health in the Developing World

Grand Challenges Canada has announced 15 grants valued in total at more than \$1.5 million, awarded to some of Canada's most creative innovators from across the country in support of their work to improve global health conditions.

The researchers are each awarded a \$100,000 grant to further develop their innovations, which include:

- *From Vancouver:* Dr. Walter Karlen is developing a low-cost cellphone test to diagnose pneumonia in the developing world.
- *From Edmonton:* Dr. Aman Ullah is developing a filter made from chicken feathers to eliminate the deadly carcinogen, arsenic, from drinking water.
- *Also from Edmonton:* Dr. Karim Damji is developing methodologies for preventing and treating glaucoma, a major cause of blindness in poor countries.
- *From Waterloo:* Dr. Karim S. Karim is working on a device for rapid TB detection through digital imaging, a low-cost and effective diagnostic.
- *From Toronto:* Dr. Jan Andrysek is creating an inexpensive and effective artificial knee joint for disabled people in the developing world.
- *From Montreal:* Dr. Cedric Yansouni is working on a diagnostic that is cost-effective and non-invasive to determine whether a patient has visceral leishmaniasis, a deadly disease.
- *From Quebec City:* Dr. David Richard is working on a low-cost vaccine for malaria, a disease that infects 216 million people a year and kills 655,000 annually.

Each grantee has created a two-minute video to explain his or her proposal. The videos can be seen at [www.grandchallenges.ca/grand-challenges/gc1-stars/canadasrisingstars/round2grantees](http://www.grandchallenges.ca/grand-challenges/gc1-stars/canadasrisingstars/round2grantees).

Grand Challenges Canada is funded by the Government of Canada through the Development Innovation Fund announced in the 2008 Federal Budget. For more information, visit [grandchallenges.ca](http://grandchallenges.ca).

## Nurse Leader to Be Awarded Order of Canada



Congratulations to Mary Ferguson-Paré on the recent announcement of her appointment to the Order of Canada. Dr. Ferguson-Paré was honoured for her contributions to improvements to patient care and to the nursing profession. Dr. Paré served as vice-president, professional affairs and

chief nurse executive at Toronto's University Health Network prior to her retirement in 2010. Her many honours and professional accomplishments include the former presidency of the Registered Nurses' Association of Ontario and Faculty of Nursing Distinguished Alumnus Award in 2003 from the University of Toronto's Lawrence S. Bloomberg Faculty of Nursing.

## McGillisHall Recognized for Excellence in Nursing Research



The Canadian Association of Schools of Nursing (CASN) presented Linda McGillis Hall, professor and associate dean of research & external relations at the University of Toronto's Bloomberg Faculty of Nursing, with the Excellence in Nursing Research Award, at the annual fall CASN

council meeting in November.

McGillis Hall is an internationally recognized leader in nursing health services research. She has published and presented extensively in Canada and internationally on her research, which focuses on health human resources, the nursing work environment and how these influence patient, nurse and system outcomes. A Nursing Senior Career Research Award recipient from the Ministry of Health and Long-Term Care, she also previously held a Canadian Institutes of Health Research New Investigator Award and a prestigious Premier's Research Excellence Award. McGillis Hall's work is directly used by policy and healthcare leaders to address key issues faced by nursing leaders. In addition, she is sought out by national and international organizations to participate in or lead initiatives related to the nursing workforce and work environments, and is well known as a research mentor for new faculty and doctoral students.

## Improving the Quality of Life of Canadians by Developing More Effective Treatments

The Canadian government recently announced a \$67.5-million investment – \$22.5 million from the Canadian Institutes of Health Research (CIHR), \$40 million from Genome Canada and \$5 million from the Cancer Stem Cell Consortium – to support funding of research teams in the area of personalized health.

Personalized medicine offers the potential to transform the delivery of healthcare to patients. Healthcare will evolve from a reactive “one-size-fits-all” system towards a system of predictive, preventive and precision care. Areas in which personalized approaches are particularly promising include oncology, cardiovascular diseases, neurodegenerative diseases, psychiatric disorders, diabetes and obesity, arthritis, pain and Alzheimer's disease. In all of these fields and others, a personalized molecular medicine approach is expected to lead to better health outcomes, improved treatments and reduction in toxicity due to variable or adverse drug responses. For example, cancer patients would be screened to identify those for whom chemotherapy would be ineffective. In addition to saving on the costs of expensive drug treatments, this personalized treatment would prevent a great deal of suffering, while identifying and initiating earlier treatments that would be more effective.

Genome Canada is leading the landmark research competition, with significant collaboration from CIHR and the Cancer Stem Cell Consortium. To qualify for funding, researchers must obtain matching funding that is at least equal to that provided through the competition. Matching funding is typically derived from provincial, academic, private sector or international sources.

## Federal Government Invests to Improve Access to Mental Health Services for Children and Youth

The federal minister of health has announced that researchers will be tackling the issue of improving access to mental health services for Canadian children and youth thanks to federal funding.

The three funded projects will focus on:

- How depression is screened and detected in schools and medical settings for children and adolescents, and whether the treatments and screening itself are contributing to better health outcomes.

- Providing an online tool to assist mental health service providers to access the most up-to-date, evidence-based information that will help them make better decisions about mental health policy, programs and service delivery for children and adolescents.
- Looking at the range of e-mental health services available (interventions delivered using Internet technologies) and identifying whether they are working well, being effectively used and fully available to all Canadian children, to better inform decision-makers.

More than 14% of Canadian children and adolescents have at least one clinically significant mental health problem, and as many as 50–70% of these disorders persist into adulthood. The range of mental health problems could include depression/anxiety, problematic substance use (tobacco, alcohol and illicit prescription drugs), eating disorders, gambling problems, risk of suicide and autism.

### Dr. Leslie Levin – a Health System Innovator and Leader Recognized



What makes a good health system leader? It's a complex mix of many factors, but the use of sound evidence is key. The Canadian Health Services Research Foundation (CHSRF) recognizes the critical importance of this and presented its annual Excellence through Evidence Award to Dr. Leslie Levin.

Dr. Levin is head of Health Quality Ontario's Medical Advisory Secretariat, a professor in the Department of Medicine at the University of Toronto and a senior consultant in medical oncology at the Princess Margaret Hospital.

Dr. Levin was instrumental in creating the Ontario Health Technology Advisory Committee. He is also the founding chief scientific officer of the MaRS Discovery District's Excellence in Clinical Innovation and Technology Evaluation.

As the former vice-president of Cancer Care Ontario, Dr. Levin initiated CCO's evidence-based cancer guidelines and is responsible for creating a unique evidence-based provincial cancer drug program.

### Red Cross Announces New Partnership with PCL Family of Companies

The Canadian Red Cross is pleased to announce a new partnership with PCL family of companies, which has generously donated \$600,000 to

support Red Cross disaster relief services in Canada and the United States over the next three years.

The donation will be split equally between the Canadian Red Cross's disaster management program and the American Red Cross's disaster relief programming to support Red Cross efforts to have trained volunteers in place, ready to respond with the equipment they need when disaster strikes.

### Michael Smith Foundation for Health Research is Pleased to Announce the Outcome of the Health Services Researcher Pathway Funding Opportunity

The successful proposal for the pathway's development was submitted by a project team led by Dr. Noreen Frisch, co-leader of InspireNet and director of the University of Victoria's School of Nursing. Dr. Frisch's project team will develop a pathway that will clearly describe the knowledge, skills and attitudes that nurses hold at various stages of their career that contribute to a culture of research affecting quality of care.

As a career trajectory for nurses, the pathway will guide progress through research levels, from finding, interpreting and applying health services research evidence in their work, to working with established researchers, to pursuing a career as a health services researcher.

Project Lead: Noreen Frisch, Director, School of Nursing, University of Victoria; Co-Leader, InspireNet

Co-Lead: Sherry Hamilton, Chief of Nursing & Liaison Officer, Provincial Health Services Authority

Team Members:

- Elizabeth Borycki, Assistant Professor, School of Health Information Science, University of Victoria
- Barb Lawrie, Executive Director, Clinical Education in Employee Engagement, Vancouver Coastal Health
- Maura MacPhee, Associate Professor, School of Nursing, University of British Columbia
- Anastasia Mallidou, Assistant Professor, School of Nursing, University of Victoria
- Grace Mickelson, Corporate Director, Academic Development, Provincial Health Services Authority
- Monica Redekopp, Director, Professional Practice, Nursing & Allied Health, Richmond HSDA, Vancouver Coastal Health
- Lynne Young, Professor, Associate Director Graduate Education, Coordinator PhD

Program, School of Nursing, University of Victoria

### **Acclaimed Genetic Researcher Dr. Michael Hayden Receives Aubrey J. Tingle Prize in Kelowna**

The Michael Smith Foundation for Health Research (MSFHR) recently honoured renowned British Columbia scientist Dr. Michael Hayden for his outstanding contributions to genetic research at a special presentation hosted by UBC's Okanagan campus.

Hayden was presented with MSFHR's Aubrey J. Tingle Prize in recognition of a career that places him among the world's most respected authorities in the study of genetic diseases. The \$10,000 prize, created in honour of MSFHR's founding president and CEO, is given annually to a British Columbia clinician scientist or scholar practitioner whose work in health research is internationally recognized and has significant impact on advancing clinical or health services and policy research.

Hayden's acclaimed breakthroughs in medical genetics include the development of a predictive genetic test for Huntington's disease and the discovery of the role played by genes in coronary artery disease and adverse drug reactions. He has also conducted innovative work into predictive and personalized medicine and recently provided the first evidence of a potential cure for Huntington's disease.

### **More Healthcare Options for Albertans with Expanded Role for Pharmacists**

Starting July 1, 2012, Albertans will have another option to get their prescriptions renewed.

As part of the Alberta government's investment in people and communities in Budget 2012, Albertans will be able to have their prescriptions renewed at their local pharmacies. Pharmacists will now be paid to provide the new service to all Albertans.

Effective July 1, the Alberta government will also reduce the price it pays for generic prescription drugs. The price reduction will mean Albertans will save on their out-of-pocket costs for generic drugs, and the Alberta government will save about \$85 million in 2012/13.

To help pharmacies in Alberta's remote communities expand their services and adjust to the lower generic drug prices, \$5.3 million will be available in 2012/13 as part of a new three-year, \$15.9-million Remote Pharmacy Access Grant. This follows on a \$5-million grant for rural pharmacies and over \$55 million in transition support for all pharmacies provided since 2010.

### **Industry Initiative to Transform Medical Discoveries into New Drug Therapies and Health Products**

Edmonton, Alberta – Innovative new drug therapies and health products that improve lives and generate new economic opportunities could soon become a reality as a result of a collaborative initiative announced recently.

A federal investment of \$500,000 through Western Economic Diversification Canada and an additional investment of \$500,000 by Pfizer Canada will enable the Alberta Pfizer Collaboration Fund, now a \$2.5-million initiative, to identify and support promising healthcare innovations with market potential.

The Alberta Pfizer Collaboration Fund will invest in commercially promising health and medical research conducted in Alberta's academic and research institutions in order to bring concepts or ideas to market more quickly. The initiative also provides an important opportunity for innovators to benefit from the technical, business and commercialization expertise offered through Pfizer Canada, while ensuring that intellectual property remains with Alberta's researchers and institutions.

### **Saskatchewan People with Depression and Chronic Obstructive Pulmonary Disease (COPD) Getting Better Care Thanks to Quality Improvement Initiative: HQC Report**

Many Saskatchewan residents living with chronic obstructive pulmonary disease and depression are receiving better care as a result of a large-scale improvement initiative involving 49 family practices around the province. A final report on the Chronic Disease Management Collaborative was released in February by Saskatchewan's Health Quality Council, which led the province-wide effort.

- Improvements in depression care: Sixty-three per cent of people were assessed with a patient questionnaire (PHQ-9) within one week of being diagnosed with depression, and 84% received an assessment at some point during the collaborative. The PHQ-9 is a tool for screening, diagnosing, monitoring and measuring severity of depression; it helps providers deliver the most appropriate care sooner. Nearly three-quarters (72%) of people with depression had their suicide risk assessed by their care provider within one week, a 30% increase over the first month.

- Improvements in COPD care:  
There was a 35% increase in the percentage of people who had their COPD diagnoses confirmed with a spirometry test. Eight of the 10 health regions involved in the collaborative created at least one new pulmonary rehabilitation program. Sixty-seven per cent of patients diagnosed with COPD had created an action plan to help them better self-manage their condition at home—resulting in potentially fewer hospital visits.

Bonnie Brossart, CEO of the Health Quality Council, says the Collaborative has brought better care for patients and established a strong foundation upon which to build further improvements in Saskatchewan healthcare.

HQC is an independent agency that measures and reports on quality of care in Saskatchewan, promotes improvement and engages its partners in building a better, safer health system for patients.

### **RNAO's Nursing Best Practice Guidelines Implemented Across Spain**

Representatives from the Registered Nurses' Association of Ontario recently travelled to Spain to celebrate the launch of eight Best Practice Spotlight Organizations in that country. During their visit, Doris Grinspun, RNAO's executive director, and Irmajean Bajnok, director of the association's best practice guidelines (BPG) program, will train nurses on how to implement its BPGs and how to pass that knowledge on to other nurses and healthcare professionals. This program will continue with the monitoring and support of the Nursing and Healthcare Research Unit and Spanish Collaborating Centre of the Joanna Briggs Institute.

The visit will also highlight the central role nursing plays in the health and well-being of patients, and how clinical BPGs improve patient outcomes and make healthcare systems more effective and efficient.

RNAO's clinical BPG program began in 1999 and was expanded in 2003 to include healthy work environment BPGs. To date, 44 guidelines have been developed, including some focused on health promotion, such as breastfeeding and reducing falls in older persons and on disease prevention, such as smoking cessation. There are guidelines that cover the treatment of pressure ulcers and ones geared to chronic disease management for diabetes and pain.

The Spanish project arises from the signed agreement between RNAO and the Nursing and Healthcare Research Unit (Investén-isciii) of the Institute of Health Carlos III. The partnership

started with the translation of RNAO's BPGs into Spanish. The initiative means up to half a billion people who live in Spanish-speaking countries can access RNAO's best practices.

### **The CRCHUM Receives \$2.8M for Research into Cancer Prevention**

A team led by Dr. Jack Siemiatycki of the University of Montreal Hospital Research Centre (CRCHUM) with Dr. Michael Pollak of McGill University has received the go-ahead for a five-year project to develop and apply CANJEM, a job-exposure matrix, to discover occupational causes of lung, brain, ovarian and colorectal cancer.

With \$2.8 million in funding from the Cancer Research Society and the *Fonds de recherche Québec – santé*, the team hopes to make important strides in cancer prevention by focusing on modifiable causes of cancer, particularly those encountered in the workplace (e.g., asbestos, radon gas, formaldehyde).

The centrepiece of this project is CANJEM, CANadian Job-Exposure Matrix, a dynamic, simple-to-use tool that will incorporate data accumulated over the past 30 years pertaining to exposure to 300 carcinogens in over 3,200 jobs as well as from hygiene databases from Quebec, the United States and Europe. The CANJEM will include not only chemical exposures but also information on shift work, physical exertion and electromagnetic fields in different occupations. Moreover, it will be an updatable tool and applicable to countries other than Canada