

NURSING NEWS

C. Difficile virus. The campaign by the Ontario Council of Hospital Unions against hospital acquired infections has scored some recent successes with the province agreeing to require hospitals to post their rates of infection for C. Difficile, MRSA and VRE.



College of Nurses Blunder Confidential nurses' information to be posted on College website

The College of Nurses of Ontario is moving to make public information about nurses that could compromise their safety. The new requirements of the Registered Health Professions Act, for the Register of Nurses as of June 2009. All information on the Register will be available to the public.

This includes the nurse's name and former names, business address and phone number and class of registration. Most nurses who are registrants are female and many rebuff sexual advances from patients. It also puts women in harms way if an abusive ex-spouse can locate you just by

looking up where you work. OCHU's RPN committee is asking all of our nurses to contact the College of Nurses of Ontario and ask them not to make confidential information about nurses public. The College can be reached at <http://www.cno.org>

Guideline to Prevent Violence Against Nurses

RNAO responds to Windsor nurse's murder

The Registered Nurses' Association of Ontario (RNAO) has called for major efforts to promote violence-free environments.

Aimed at governments, employers, educators, professional bodies, regulators and unions, the new guideline is titled Preventing and Managing Violence in the Workplace. A team of nurses and other health experts spent the past two years identifying the strongest research evidence and developing recommendations to address verbal, emotional and physical acts of aggression and violence perpetrated by health-care professionals, patients or patients' family members.

For years, violence against health professionals was rarely discussed; but cases such as the tragic death of Lori Dupont, an RN at Windsor's Hotel Dieu Grace Hospital who was murdered while on duty by her former boyfriend, an anaesthesiologist at the hospital, brought the issue sadly to the forefront. 28% of Ontario nurses who responded to a 2006 Statistics Canada survey said they had been physically assaulted by a patient in the previous 12 months. The report found that 19% of Ontario nurses had experienced emotional abuse at the hands of physicians and nurse co-workers. Many nurses who experience violence don't talk about their experiences for fear of losing their jobs or enduring retaliation and further confrontation.

Doris Grinspun, of RNAO, says organizations don't acknowledge they have a problem with violence until they find themselves involved in a very serious incident. "It's got to be clear to everyone - from the chair of the board of directors and the CEO...right down to patients and their families - that the policy applies to everyone and there are no exceptions." Grinspun adds that if implemented, the guideline's recommendations will empower health-care providers to speak out and stand up for violence-free workplaces.

The following are some of the recommendations included in the guideline:

- Governments should enact and enforce legislation that promotes a violence-free workplace. This legislation should include mandatory reporting and whistleblower protection for those who report violence in the workplace. Adequate funding should be provided for staffing, mandatory education and leadership development to prevent, identify and respond to violence in the workplace.
- Organizations should ensure that the safety of patients, staff, physicians, volunteers and students is a strategic priority. They must develop and implement a violence prevention policy and program that addresses all forms of violence in the workplace.
- Individual members of the health-care team should collaborate with team members in a manner that fosters respect and trust and prevents violence. This includes refraining from actions such as gossiping, bullying, harassment, socially isolating others, pushing, throwing things, or any other aggressive behaviours.

RNAO's Best Practice Guidelines Program, funded by the Ministry of Health and Long-Term Care, was launched in 1999. The 38 guidelines developed to date are available at www.rnao.org/bestpractices.