

SPOTLIGHT ON ORNAC MEMBERS

AN INTERVIEW WITH KIMBERLY LONG, RN, RNFA, CPN(C)

By: Catherine Harley, RN, eMBA, Executive Director of ORNAC



Kimberly Long is a Perioperative Registered Nurse who recently completed the RNFA Program and is a resource nurse for the Urology service at the North Bay Regional Health Center (NBRHC) in North Bay, ON. Kim works as an RNFA/RN in a composite position that is approximately a half and half split and carries an expectation of both call and evening shifts.

Question: Can you tell us a bit about yourself?

I am a Perioperative Registered Nurse, who graduated from the nursing program at Canadore College, located in North Bay, in 1995. I have worked as a perioperative nurse for the past twelve years, have been a resource nurse for the Urology service, and recently became an RNFA. I am married to a Detective Constable and have two young children. I enjoy the outdoors and look forward to getting my kayak out as the summer approaches.

Question: You say that you recently became an RNFA – can you explain what role you play within the perioperative setting?

As an RNFA my role in the operating theatre has changed. I am, however, first and foremost a registered nurse member of the perioperative team.

As a perioperative Registered Nurse First Assistant I practice in an expanded role. I provide assistance to the surgeon to help ensure the best possible outcomes for patients undergoing surgery. I practice in collaboration with the surgeon under his/her direction. The role of RNFA ideally encompasses the preoperative, intraoperative, and postoperative phases of the surgical experience.

I interview and assess the patient preoperatively, and of course, assist the surgeon intra-operatively. I have, however, little to no follow up with the

patient post-operatively. This is for a variety of reasons including the fact that I am needed to help turn the room over for the next cases. My work day is, overall, very busy. The RNFA role has not evolved to its fullest potential in many hospitals including the NBRHC. In the post-operative phase we should, ideally, do rounds on our patients, do dressing changes, provide patient education, and do wound surveillance. Working in a composite role I am, however, not able to leave my team, to check in on patients, as I am needed in the room as a registered nurse on the days when I am not working in the role of a RNFA.

Question: When did you become interested in pursuing the RNFA Program?

My interest in becoming a RNFA developed over several years. It first started while I was on maternity leave with my son seven years ago. I was approached by my manager who encouraged me to take the RNFA program at the British Columbia Institute of Technology (BCIT) in order to further develop my knowledge and skills. There was an on-site component to the program so, while it looked really interesting, I was faced with making a hard choice between being home with my newborn son or pursuing the RNFA program. After careful consideration I decided that I really wanted to be home devoting my time to my newborn son and that meant I would have to wait to take the RNFA program. The idea of becoming a RNFA never left me but the timing had to be better.

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While home on my second maternity leave with my daughter a co-worker informed me that she, and one other nurse, had signed up for the government funded RNFA program at Mohawk College. I was very discouraged that I had missed this opportunity and asked my manager to keep me in mind if the opportunity presented itself again. It did, thankfully, in 2010.

Question: Can you describe the RNFA Program that you took?

I took the one year program offered through Mohawk college/McMaster University, in Hamilton. There were many online modules, followed by a one week on-site lab component, and then a move into clinical hours. I was very fortunate in that my employer values the RNFA role, and allowed me to be removed from the regular schedule and to complete my program hours with pay. Many in my class did not have that level of support from their institutions and were doing it all on their own. Obtaining 50 hours of non-OR time, and 175 hours of OR time (which has to involve everything from cut to close),

mainly with a surgeon who agreed to mentor me, was no easy task even without a full work week! I completed my internship hours in February 2012.

Question: How has taking the RNFA Program helped enhance your career?

It is quite exciting to go to work every day! I love the role. I enjoy using the surgical instruments, handling tissue, providing exposure, using electrocautery, knot tying, and suturing. It is so exhilarating and still a bit overwhelming. I often find myself having to review the surgeries, anatomy, and background information prior to scrubbing in for a case. My favourite gift at Christmas was my Netters Text of Human Anatomy!

I am one of two RNFAs employed in my hospital with two more coming in the near future. The surgeons all seem to enjoy working with us. We are working really hard to prove that we are a valuable asset. The amount that we are booked indicates that we are succeeding. They are realizing that the extra pair of nursing hands in the room is beneficial to them. I have always loved working in the OR and becoming an RNFA has given me a new perspective.

Question: What role do you see yourself playing on the perioperative team?

I am a Registered Nurse first. My role is to help ensure the best patient outcome. I believe that, in order to do this, I need to spend time with the patient preoperatively and help ensure that the OR suite has the right equipment for each surgery by collaborating with the surgeon and other team members. I am knowledgeable and a good teacher to those who need guidance. I am a strong critical thinker and can react quickly to anything that may come up.

Question: Do you have any advice for perioperative RNs who are interested in taking the RNFA program?

The role of an RNFA is an important one. As the role is still not completely understood, by many, RNFAs have to continually prove themselves and promote their role. Anyone wanting to become an RNFA must be ready to do this.

An RNFA needs to have great communication and interpersonal skills, be a leader, and be committed to ongoing education.

Before considering becoming an RNFA be sure to do your homework. Find out if your hospital is interested in employing RNFAs and if they are applying for grant money to support this role.

Question: What is next in your career?

This opportunity has really given me a new thirst for knowledge. I plan to start working towards my Bachelor of Nursing this fall. There is so much that an RNFA can do and the list grows as you acquire more education! I want to open more doors for myself. Food for thought.... Advanced Practice Nurse (APN) RNFAs are involved in the full scope of practice including writing post operative orders, etc...

My dream is to complete my degree and obtain my Enterostomal Therapy Nursing certification (a nurse specialist in wound, ostomy and continence care). I believe the people of my community can only benefit from the care that I could provide with this combination of skills. Imagine if, as a patient, you can meet your RNFA in the pre-operative setting, then they are with you again for the intra-operative phase, and finally for post-operative follow-up. I think that for patients that are dealing with a diagnosis such as colon cancer, and the possibility of life-long ostomy, this continuity of care would be incredibly beneficial. 🌸