



ORNAO Past President Sharon Ball, (left) and Deryk Taylor, Executive Director, (Marketing) J&J, present Grace Groetzsch (centre) the 1997 ORNAC/J&J Writing Award.

ORNAC/J&J Writing Awards



Se uk Walling receives the ORNAC/J&J Writing Award from Ian Lawson of Johnson & Johnson Medical Products.

The ORNAC/Johnson & Johnson Medical Products Drake-Thompson Writing Award of \$3000 was shared this year by two outstanding authors publishing in the *Canadian Operating Room Nursing Journal*.

Grace Groetzsch, RN, BScN, MEd, RNFA, Sunnybrook Health Centre, Toronto, received the award for "RN First Assisting - 1997 Canadian Update", December 1997, Vol. 15, No. 2.

Se uk Walling, BA, RN, DPHN, Queen Elizabeth II Health Science Centre, Halifax, Nova Scotia, received the award for "Prevention of Neoplastic Seeding During Surgery: An Investigation into OR Protocols and Practice in Canada", June 1997, Vol. 15, No 4. Presentations were made at Provincial OR Conferences in Niagara Falls and Halifax.

Medical Bursary Winners

Medical Bursary Winners include:

Heather E. Mingo, Staff Nurse, Toronto Hospital, \$3,000.

Antoinette Labricciosa, Mount Sinai Hospital, Toronto, \$1500.

Deborah Garnier, Staff Nurse, Neurosurgery OR, Queen Elizabeth Health Science Centre, Halifax, \$500. Congratulations to all winners.



June 14 - 18, 1999
World Trade and Convention
Centre, Halifax, NS.

Cresting The Wave

ORNAC's 16th National Conference will offer concurrent sessions in Clinical issues, Forensics, Computers, and Environment. Social events will have a maritime flavour. Plan your '99 summer vacation to include the National in Halifax.

17th Provincial Conference

Stepping Out of the 90's

Operating Room Nurses of Alberta Association

October 21 - 24, 1998

Capri Centre, Red Deer, Alberta

- **Educational Sessions:** Motivational speaker **Terry Evanshen** will open the conference. Lawyer **Noella Inions, RN**, will address Legal Issues. Other topics - Do Not Resuscitate, Personal Directives, Leading An Empowered Organization, Antibiotic Resistance, Smoke Evacuation, and Alternative Health Issues. A Panel Discussion will address Professional Standards, RN Status in the OR, Certification and RNFA/Surgical Assistance.
- **Educational Exhibits:** New Trends and New Products
- **Social Events:** Wine & Cheese Reception, Fashion Show & Reception, Exhibitors Night - "Blast From The Past" - Dress-up or Dress-down in a costume from the Past.
- **Contact** Conference Chairman: **Dorothy Cocks**, @ Fax: (403) 343-3812 or Phone (403) 343-3081

Expanding the Perioperative Role with RNFA Certification

By Marnie Simon, RN, MN, MEd

In 1989 the Operating Room Nurses Association of Canada, (ORNAC) began to explore an expanded role for perioperative nurses in the areas of perioperative nurse-anesthesia (PNA) and perioperative nurse-surgery (PNS). Three years later, ORNAC conducted an initial national survey of the current practice of perioperative nurses, and at the same time asked whether they were interested in an expanded role. To verify the data recorded, we conducted another small survey at the national conference in 1993. Both surveys supported the analysis that nurses wished for an expanded role.

Between 1994 and 1996, the advanced practice committee from ORNAC worked on developing core curricula for the advanced practice roles. A blueprint for the RNFA curriculum was developed and was sent to a variety of educational institutions and stakeholders in the industry. We needed to interest an institution able to develop the RNFA program. In British Columbia, BCORNG approached the British Columbia Institute of Technology, (BCIT) and as a consequence jointly formed a task group to coordinate the RNFA project. The task group had three mandates, first to ensure that there was a need for this role provincially and across Canada. Second to lobby in every area for support and advice on introducing this role. Third, to initiate the development of an educational program.

In order to launch the RNFA program, in mid-1997 a proposal was written and a \$35,000 grant was received from BCIT, matched by \$15,000 from BCORNG to develop this educational program. A project team was formed, headed by the author. A curriculum team was established, members included

Grace Groetzsch, Marguerite Wahl, Amy Doi and Marnie Simon. An Advisory Committee was formed with representatives from the field of Perioperative Nursing, hospital administration, medicine, RNFA, and nursing education. BCIT provided experts to consult in all phases of the project and will continue this consultation as the program develops.

The RNFA program we are developing will be a BCIT certificate and will earn credits towards a Bachelor of Technology in Specialty Nursing in the perioperative component. It will have diverse educational approaches and be based on the U.S. RNFA model. This will ensure we meet the U.S. criteria for RNFA certification as our neighbors to the south will be a potential market.

The faculty consists of a RNFA mentor/instructor, a surgeon, and BCIT's Perioperative Nursing faculty.

It is important to understand that this is a work-in-progress. Curriculum and program development are a dynamic process and subject to changes.

Author



Marnie Simon, RN, MN, MEd, is Program Head, Perioperative Nursing, British Columbia Institute of Technology, Burnaby, BC. She is a member of the ORNAC Expanded Practice Committee and Project Manager for the RNFA Education Program. This article was initially a presentation to the BCORNG Conference in April, 1998, at Harrison Hot Springs.

Program Outline

Theory Review: 12 to 18 weeks of directed, independent part-time study of RNFA theory.

Face to Face: 5 to 6 days of full time labs, instruction and interaction with faculty at the BCIT campus.

Internship: 200 hours of supervised clinical practice in the RNFA role.

Theory Review

This directed, independent study of RNFA theory is designed to assist the participant to gain the theoretical knowledge that will be expanded upon and applied in the other two components of the program. Course content and directions for study are provided in written modules that are supported by telephone or on-line tutoring. Computer assisted communication techniques are a feature of the program and the participant is supported to study at his or her own pace through flexible learning options. Learning goals include but are not limited to:

- (i) Establishing one's own level of perioperative nursing knowledge of topic areas.
- (ii) Reviewing areas of knowledge where a deficit is identified.
- (iii) Expanding perioperative knowledge to a level appropriate for RNFA practice.
- (iv) Exploring knowledge which is unique to RNFA practice.
- (v) Identifying the difference between peri-operative nursing knowledge and the knowledge required for RNFA practice.
- (vi) Preparing questions or identifying topic areas that require clarification and discussion in the face to face component.

Face to Face

During this six to seven day, full time component of the program, participants will interact with faculty to explore the scope and practice of the RN first assistant and discuss some of the issues related to the role. Through "hands on" participation during labs, participants will have the opportunity to develop specific RNFA skills such as suturing and knot tying.

Understanding of the RNFA's role in assessment, wound management, tissue handling/retraction and post-operative follow-up will be gained through participating in innovative learning activities. An interactive team approach will be used by faculty (RNFA & surgeon) to present a broad range of surgical procedures, review the related anatomy and physiology, pathophysiology, pharmacology, and describe the responsibilities and surgical techniques required of the RNFA. Preparation of a learning contract for the internship will be developed collaboratively with faculty and skills and learning will be evaluated. Successful participants will be qualified to progress to the clinical internship.

Clinical Internship

Participants will have the opportunity to develop beginning-level clinical competency during this supervised practical experience.

Activities to support learning and the development of clinical competency include:

- Providing supervised surgical assistance during diverse surgical procedures.
- Maintaining a log of clinical experiences.
- Completing and documenting comprehensive preoperative assessments.
 - Assessing and documenting patient outcomes related to pain, management, wound healing and surgical complications.
 - Participating in patient/family teaching and discharge planning.
 - Using systematic inquiry and accessing different sources of knowledge to investigate factors affecting patient outcomes.
 - Identifying, anticipating and selecting appropriate RNFA activities to respond to surgical hazards/emergencies.
 - Communicating and collaborating in order to develop professional partnerships and promote understanding and acceptance of the RNFA role.

Implementation of Program

A pilot group of five or more is planned for the winter of 1999. Tuition is estimated at between \$1,200 and \$1,440 with texts ranging between \$200 - \$300.

Financial assistance will be available through the education funds of ORNAC and the provincial perioperative groups.

Admission Criteria

The admission criteria is:

- **Currently licensed RN,**
- **2-5 years recent perioperative experience,**
- **Certification - CPN(C), and**
- **BCLS required, but ACLS preferred**

Articulation with BCIT's Specialty Nursing Degree

The curriculum philosophy for the RNFA program is congruent with that of BCIT's Bachelor of Technology in Specialty Nursing.

There will be six RNFA credits transferable to the Specialty Nursing Degree, for those who wish to follow that route. The RNFA program will be Coordinated by BCIT's perioperative nursing faculty, and will be a BCIT credential.

Figure 1



Educational Partners' Responsibilities

As we develop and implement the program the educational partners will work towards establishing the role and promoting the RNFA program nationwide.

BCIT responsibilities include:

- Complete curriculum development,
- Pilot the Program,
- Market the program, and
- Coordinate ongoing program delivery/maintenance.

ORNAC/BCORNG responsibilities involve:

- Lobbying both government and industry,
- Supporting perioperative nurses to gain RNFA education and jobs,
- Promoting the RNFA role to the membership,
- Work to establish the RNFA Role, and
- Establish Canadian RNFA standards, credentials and criteria.

Conclusion

Opportunities and challenges face perioperative nurses in this time of rapid change in healthcare. The RNFA role is an opportunity for perioperative nurses to expand their practice in the next millennium. ■

Call for Proposals and Posters for World Conference of Surgical Patient Care July 25 - 30, 1999 Helsinki, Finland

Canada has traditionally been well represented at the World Conference by excellent perioperative Nurse presenters. We invite you to participate at the World Conference in 1999.

Proposal submissions are to be mailed or faxed by **July 10, 1998 to: Vija Hay**, Past President ORNAC, 4421 Rainforest Drive, Gloucester, ON K1V 1L5 Fax: (613) 822-0003.

Poster Presentations are to be submitted by **October 1, 1998 to Sue Hardin**, World Conference Program Coordinator, AORN, 2170 South Parker Road, Suite 300, Denver, CO 80231-5711 USA Fax: (303) 338-4841 and (303) 755-5494, email: shardin@aorn.org
Information, submission criteria, and forms may be obtained from ORNAC website www.ornac.ca or Vija Hay @ Fax: (613) 822-0003.