

## Editor's Message

**W**ith the final preparations for this issue, we are looking ahead to the ORNAC Conference in Calgary from May 21–May 25. If you are undecided about attending, this issue's Bryana Hahn's "Why attend a conference?" and Chris Downey's article about conference exhibitors, will leave you in no doubt about the importance of conference participation. This will be my first time attending and I hope to meet many of you in person.

This issue brings you two interesting original articles along with pieces from partnering organizations. For example, Kristin Webb, past chair of Perioperative Nurse Educators of Canada (PNEC), tells her story of becoming an OR nurse, Helene Tetrault talks about the role of a Registered Nurse First Assistant (RNFA), and Anaesthesiologist Sunti Bahari's recounts considerations about local anaesthetic systemic toxicity. Also, don't miss valuable information from ORNAC.

Both original articles address the OR working environment, looking at how an entrenched hierarchical culture results in communication barriers and conflict caused from disruptive behaviours. Jennifer Dunn, establishes the term deferential speech syndrome to describe why, because of the power distance maintained by those at the top, certain staff do not voice observations that could be important for surgery success and best patient care. Dunn asserts that every member of the OR team is valuable and has a significant role to play. This thought-provoking article shows the impact of power distance and offers solutions to how undoing that distance can promote better communication and patient safety.

Alex Villafranca and colleagues' study of disruptive behaviour in the OR shows it is, at least, inconvenient or annoying and, at most, possibly dangerous to staff and patients alike. This first of two parts uses a conflict resolution lens to help clinicians maintain their well-being and respond appropriately without escalating or reinforcing the disruptive behaviour—a good read for all who deal with conflict in the OR and beyond.

And now for a personal note to you all. A recent editorial by Sally Thorne, Editor in Chief of Nursing Inquiry, came out of her concern for the global reverberations from changes taking place, in the US and elsewhere, affecting such areas as research funding, DEI strategies, reproductive choice, and trends of public health policy-making without an evidence base. These are indeed serious concerns. Thorne, calls nurses to "remain grounded in our core nursing values around compassion, social justice, science, and equity," and goes further telling why she believes nurses are made for these times. With Thorne's permission, here is the link to one of the most articulate, encouraging, and inspiring pieces I have read in a long time. I encourage you all to gift yourself with this read.

**Editorial: We Were Made for These Times**

<https://onlinelibrary.wiley.com/doi/full/10.1111/nin.70010>



Your editor,  
Linda M. Verde

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