

3rd National Conference 3^e Conférence nationale

Sheraton on the Falls
Niagara Falls, ON, Canada
November 21-23, 2013
21 au 23 novembre 2013



Canadian Association of Perinatal and
Women's Health Nurses
Association canadienne des infirmières et infirmiers
en périnatalité et en santé des femmes



Photos courtesy of Niagara Falls Tourism

Thank you to our partners Merci à nos partenaires

The Canadian Association of Perinatal and Women's Health Nurses (CAPWHN) gratefully acknowledges the following sponsors for generously providing unrestricted educational grants in support of CAPWHN's 3rd National Conference. / L'Association canadienne des infirmières et infirmiers en périnatalité et en santé des femmes (CAPWHN) remercie très chaleureusement les commanditaires suivants, qui nous ont offert des subventions éducationnelles sans restriction pour la troisième conférence nationale de CAPWHN.

Platinum • Platine

Dräger

Johnson & Johnson INC.

Silver • Argent



GE Healthcare

Bronze

MAQUET-DYNAMED

Partners • Partenaires



Welcome to Niagara Falls

On behalf of the 2013 National Conference Planning Committee, we are delighted to have you join us in beautiful Niagara Falls for the 3rd CAPWHN National Conference. Together we will share information and innovations, greet longtime friends, make new ones, and reinforce professional networks in the pursuit of quality evidence-based care for women and families. CAPWHN provides a unique opportunity to focus on the nursing aspects of the health care system and particularly the care of women/families. Innovations in nursing practice and care for women/families have contributed to the well-being of perinatal and women's health. Contributions in areas of direct care, research, education and leadership are highlighted throughout our CAPWHN National Conference. Florence Nightingale would be proud of us all!!

The conference provides an opportunity to meet with exhibitors to review new products and technology in care, education, and cost effectiveness. Complete your exhibitor passport for a chance to win CAPWHN membership for a year.

A key component of each CAPWHN National Conference is supporting charities that provide services to women and families. Help us support this year's charities - take a moment to look at the silent auction items and get off to a great start Friday morning with the Toonie Trot.

While in Niagara Falls, enjoy walking in the parks and the view of the Falls both during the day and with the lights at night. There are also opportunities for great shopping and fun at the various Falls activities from the casino to the wax museum. Join us at our Tailgate party - bring your enthusiasm and your dancing feet!

Finally, please fill out your evaluation form to help CAPWHN host an even bigger and better National Conference next year. We wish you a great conference and a memorable time together!



Sharon Dore RN PhD
On behalf of the 2013 Conference Planning Committee



Bienvenue à Niagara Falls

Quel plaisir de vous accueillir à Niagara Falls pour la Conférence CAPWHN!

Au nom du Comité organisateur de la Conférence CAPWHN 2013, je vous souhaite la plus cordiale bienvenue à Niagara Falls. Au menu : partage de connaissances et d'innovations, retrouvailles, nouvelles amitiés et solidification de réseaux professionnels pour favoriser la prestation de soins factuels aux femmes et à leurs familles. CAPWHN vous offre une occasion unique d'explorer le système de santé dans l'optique des soins infirmiers, surtout en périnatalité et en santé des femmes et des familles. Chose certaine, l'innovation dans la pratique infirmière à ce chapitre a amélioré la santé des femmes et leur expérience périnatale. Le programme de notre conférence nationale souligne d'ailleurs notre apport aux soins directs, à la recherche et au leadership. Florence Nightingale en serait fière!

De plus, avec nos exposants, vous explorerez les nouveaux produits et technologies visant les soins, l'éducation et les économies. Remplissez le *Passeport exposants* pour courir la chance de gagner une adhésion d'un an à CAPWHN.

À chacune de nos conférences nationales, CAPWHN appuie des organismes de soutien aux femmes et aux familles. Unissons nos efforts à cette fin : Participez à notre encaissement silencieux et, pour partir du bon pied vendredi matin, venez au *Toonie Trot*.

Profitez de votre séjour pour vous balader dans un des parcs de Niagara et, bien sûr, vous régalez des chutes sous la lumière du jour ou sous les projecteurs le soir. Ou encore, allez magasiner, visiter le musée de cire ou tenter chances au casino. Et n'oubliez pas de venir danser à notre fête saluant la Coupe Grey!

Enfin, veuillez remplir le formulaire d'évaluation pour que nous continuions à parfaire ces conférences. Amusez-vous bien cette année. Que de beaux souvenirs vous accompagnent!



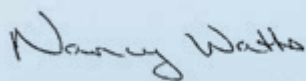
Sharon Dore, I.A., PhD
Pour le Comité organisateur 2013

Welcome to CAPWHN's 3rd National Conference!

On behalf of myself as President and the entire CAPWHN Board of Directors I would like to welcome everyone to Niagara Falls. Some of you are returning members, others recently joined CAPWHN, and still others are considering membership in our organization. We are excited that you have chosen to attend CAPWHN's 3rd National Conference and look forward to meeting you at various sessions and events. CAPWHN is continuing to grow and respond to the needs of Canadian nurses in Perinatal and Women's Health. These areas of health care are constantly changing. In order to remain current and challenged with new information, conferences such as CAPWHN's are important. The next few days will provide you with an opportunity to network and learn from colleagues and to be inspired by experts in our field and outside of our world.

I wish to thank Sharon Dore and the Conference Planning Committee who have been working hard for over a year to prepare and organize the events to ensure all attendees benefit from an organized, exciting and innovative program. Her group working together with Rita Assabgui, our amazing Executive Director, has selected speakers to energize, abstract presenters to collaborate with and planned events to enjoy at the end of the days! Our conference theme of "Evolving through the mist of change" has reminded the planning team about many clinical and recent changes in our health care environments and will inspire many of us as we learn about new advances and best practices to take back to our clinical environments.

Looking forward to "evolving" together with all of you!



Nancy Watts, RN, PNC(C), MN
CAPWHN President



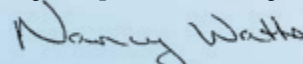
Bienvenue à la troisième Conférence nationale de CAPWHN!

À titre de présidente de CAPWHN, je me joins à mes collègues du Conseil d'administration pour vous souhaiter la plus chaleureuse bienvenue à Niagara Falls. Vous comptez peut-être parmi nos membres de longue date ou êtes des nôtres depuis tout récemment ou encore songez à devenir membre. Peu importe, c'est un honneur de vous avoir parmi nous à cette conférence, et nous avons hâte de vous rencontrer au cours de ce grand rassemblement.

CAPWHN prend sans cesse de l'essor et continue de répondre aux besoins du personnel infirmier en périnatalité et en santé des femmes. Ces deux domaines évoluent constamment aussi, et pour que nous restions à la fine pointe des pratiques et connaissances, des conférences comme celles-ci s'imposent. Au cours des prochains jours, vous aurez ainsi l'occasion de réseauter, de puiser dans l'expérience de vos collègues et d'entendre des exposés inspirants de spécialistes de notre domaine et d'autres secteurs.

Je remercie Sharon Dore et le Comité organisateur de la Conférence, qui travaillent depuis plus d'un an à planifier et à orchestrer un programme novateur rempli de séances et d'activités qui, j'en suis sûre, sauront plaire à tous les goûts. En collaboration avec notre incomparable directrice générale, Rita Assabgui, Sharon et son équipe ont prévu des séances plénières énergisantes, des présentations d'affiches interactives, ainsi que des rencontres sociales tonifiantes en soirée. Notre thème, Naviguer les courants du changement, nous rappelle les nombreux changements que connaissent nos milieux cliniques et le système de santé dans son ensemble. Nous nous en inspirerons donc pour faire le point sur les dernières percées et les meilleures pratiques et pour les incorporer dans nos milieux respectifs.

Au grand plaisir de « naviguer » avec vous.



Nancy Watts, I.A. PNC(C), MN
Présidente, CAPWHN



Third National Conference Goals: Evolving through the Mist of Change

- Foster collaboration, networking, and knowledge-sharing among health professionals
- Translate knowledge into evidence-informed practice
- Discuss challenges faced by vulnerable populations
- Explore strategies to optimize quality and patient safety in our diverse health care settings
- Reenergize and rejuvenate our nursing practice.

Your continuing education hours at the CAPWHN conference qualify for CNA certification renewal towards perinatal or another relevant specialty. Please keep a copy of your certificate of attendance for this purpose.

CAPWHN has received approval for 10.5-L Continuing Education Recognition Points (CERPs) from the International Board of Lactation Consultant Examiners (IBLCE); IBLCE approval number C1334562. The following breastfeeding-related concurrent sessions are approved for a maximum of 10.5L CERPs: SS-3, A-01, A-02, B-01, B-02, C-01, C-02, D-01, D-02, E-01, E-02, and E-03. A CERP attendance completion certificate will be available.

Objectifs de la troisième Conférence nationale : Naviguer les courants du changement

- Encourager les professionnels de la santé à collaborer, à réseauter et à partager des connaissances
- Traduire les connaissances en pratiques fondées sur les données probantes
- Discuter des défis auxquels font face les populations vulnérables
- Explorer des stratégies pour optimiser la qualité des soins et la sécurité des patients dans nos divers milieux
- Dynamiser et revitaliser notre pratique des soins infirmiers.

La conférence CAPWHN est reconnue comme activité d'apprentissage continu par l'AIIC pour le renouvellement de votre certification en périnatalité ou dans une spécialité connexe. Veuillez conserver votre attestation de présence à cette fin.

Nous avons en outre fait approuver une demande de *Continuing Education Recognition Points (CERPs)* auprès du *International Board of Lactation Consultant Examiners*; le numéro d'approbation est le C1334562. Somme toute, vous pouvez accumuler jusqu'à 10,5L en CERPs si vous assistez aux séances simultanées suivantes liées à l'allaitement maternel : série SS-3, A-01, A-02, B-01, B-02, C-01, C-02, D-01, D-02, E-01, E-02 et E-03. Nous vous donnerons un certificat de participation CERP à cette fin.





CAPWHN 3rd National Conference Planning Committee

Membres du Comité organisateur de la troisième Conférence nationale de CAPWHN

Chair / Présidente

Sharon Dore

CAPWHN Support / Collaboration de CAPWHN

Nancy Watts, President / Présidente

Rita Assabgui, Executive Director / Directrice générale

Program Committee / Comité du programme

Lisa Keenan-Lindsay (Co-chair / Co-présidente)

Kathryn Doren (Co-chair / Co-présidente)

Barbara Bowles

Marie-Josée Trépanier

Kim Dart

Ruth Turner

France Morin

Abstract Review / Analyse de résumés

Ann Cotton (Chair / Présidente)

Janet Andrews

France Morin

Kim Dart

Jennifer Torode

Sharon Dore

Sonia Semenic

Laura Doull

Marie-Josée Trépanier

Hospitality Committee / Comité d'accueil

Cindy MacDonald

Narinder Kainth

Barbara Bowles

Merry Little

Laura Doull

Angela Moyer

Marketing Committee / Comité de marketing

Sharon Dore

France Morin

Narinder Kainth

Marie-Josée Trépanier

CAPWHN Board of Directors

Conseil d'administration de CAPWHN

Nancy Watts, President / Présidente

Lisa Keenan-Lindsay, President Elect / Présidente désignée

Melanie Basso, Past President / Présidente sortante

Cathy Sheffer, Treasurer / Trésorière

Pam O'Sullivan, Director (BC, AB, YT) / Directrice (BC, AB, YT)

Susan Harrison, Director (SK, MB, NT) / Directrice (SK, MB, NT)

Marie-Josée Trépanier, Director (ON) / Directrice (ON)

Angèle Robillard, Director (QC) / Directrice (QC)

Barbara Whynot, Director (Atlantic Provinces and NU) / Directrice, (région de l'Atlantique et NU)

Diane Bourget, Director at Large / Conseillère

Kim Dart, Director at Large / Conseillère

Conference Charities

The 2013 Conference Planning Committee has selected two charities that assist and support women; one local and one international.

Hannah House

Hannah House Maternity Home (www.hannahhouse.ca) is a non-profit agency and the only maternity home in the Niagara Region that shelters and supports vulnerable, adolescent mothers. The program assists young mothers to reach their full potential through services such as prenatal guidance, parenting skills and academic education. Each unique resident receives consultation, guidance and support for any emotional, social, physical and spiritual needs. In addition, Hannah House staff advocate on behalf of the residents to ensure that they have access to resources for which they are entitled, and that their rights are being protected.

Save the Mothers

Save the Mothers International (www.savethemothers.org), an organization dedicated to saving some of the 340,000 mothers who die in childbirth every year. Save the Mothers is an innovative public health program that trains professional and influential champions within developing countries to improve mothers' health through their specific window of influence, including law, media, social services and education. Dr. Jean Chamberlain, a keynote speaker for CAPWHN's 2013 National Conference, is the founder and executive director of Save the Mothers. Dr. Chamberlain spends eight months of the year in Uganda, where she initiated the STM training program in 2005.



General Information

The following information is provided to help make your experience at the conference more enjoyable.

Registration Desk

This is your one-stop shop for registration, membership applications, general Niagara Falls information and maps, silent auction display and payments. The registration desk is located in the 3rd floor foyer of the Sheraton on the Falls and will be staffed during the following hours:

- Thursday November 21st 0700 - 1730
- Friday November 22nd 0730 - 1700
- Saturday November 23rd 0700 - 1330

Name Badges

Name badges must be worn at all times while at the conference. These are very helpful when networking with other delegates and clearly identify you as a conference delegate. The sessions for which you registered are listed on the card behind your nametag.

Meals

Continental breakfasts, breaks and lunches are included in your registration fees throughout the three day conference. If you registered at the daily rate, meals will only be included on the day for which you registered. Meals are located in the Exhibit Hall, Great Room AB. Saturday features a plated lunch followed by our closing keynote.

Exhibitors

All conference delegates are encouraged to visit the exhibitors in Great Room AB. Our exhibitors' support contributes greatly to the success of the CAPWHN National Conference. Exhibits are open during all meals and breaks until Friday November 22nd at 1315.

Passport

Your exhibitor passport is in your delegate bag. You must visit all of the exhibitors to receive the answers to the questions. Deposit your completed passport at the registration desk by Friday afternoon for a chance to win a CAPWHN membership for a year.

Opening Reception with Exhibitors

Thursday evening – You will have an opportunity to meet with the exhibitors, so be sure to take time to fill out your passport. If you registered for the reception, you will find your reception ticket and one drink ticket at the back of your badge. Yummy appetizers will be served and a cash bar is available.

Généralités

Voici quelques renseignements pour vous aider à profiter davantage de la Conférence.

Bureau d'inscription...et plus!

Oui, ici, en plus de vous inscrire, vous pouvez faire une demande d'adhésion à CAPWHN, obtenir de l'info sur Niagara Falls, voir les articles de l'encan silencieux et faire des paiements. Le Bureau d'inscription se trouve au foyer du troisième étage du Sheraton on the Falls et est ouvert à ces heures :

- Jeudi 21 novembre 7 h – 17 h 30
- Vendredi 22 novembre 7 h 30 – 17 h
- Samedi 23 novembre 7 h – 13 h 30

Insignes d'identité

Vous devez porter votre insigne en tout temps pendant la conférence. Cela favorise le réseautage et sert de preuve de votre inscription en bonne et due forme. Les séances auxquelles vous participez figurent sur le carton au verso de votre insigne.

Petits-déjeuners, pauses et repas du midi

Les petits-déjeuners continentaux, les pauses et les repas du midi vous sont offerts pendant les trois jours de la conférence. Si vous avez opté pour l'inscription quotidienne, vous avez droit aux repas de la journée en question. Les repas sont servis dans la salle d'exposition, *Great Room AB*. Samedi, vous avez un repas aux tables, suivi de la conférence de clôture.

Exposants

Nous vous encourageons à visiter nos exposants dans la salle *Great Room AB*. Leur soutien contribue au succès de la Conférence nationale CAPWHN. Les kiosques sont ouverts pendant tous les repas et toutes les pauses jusqu'au vendredi 22 novembre à 13 h 15.

Passeport

Votre *Passeport exposants* est dans votre trousse d'inscription. Vous devez visiter tous les kiosques pour obtenir les réponses aux questions. Une fois votre passeport rempli, déposez-le au Bureau d'inscription au plus tard vendredi après-midi pour avoir une chance de gagner une adhésion d'un an à CAPWHN.

Réception d'ouverture avec les exposants

Jeudi soir – C'est le moment tout indiqué pour remplir votre *Passeport* car vous aurez l'occasion de rencontrer tous les exposants. Si vous avez choisi de participer à cette réception, votre billet d'entrée et votre coupon pour une consommation sont au verso de votre insigne d'identité. On vous servira de succulents amuse-gueule, et un bar payant vous proposera de bons cocktails.



Tailgate Party

Friday evening – If you registered for the Tailgate Party you will find your dinner ticket at the back of your badge. A cash bar is available. In the spirit of the Grey Cup taking place this weekend in Regina, wear the shirt or colours to support the team of your choice. This can be your favourite sports team or your children's team. The Brad James Band will entertain with lively music late into the evening.

Conference Charities

We are pleased to support Hannah House and Save the Mothers. We are raising funds through the Toonie Trot and Silent Auction, and we accept general donations. Please give generously! All proceeds from these events are donated to the conference charities.

CAPWHN Boutique

Find great CAPWHN items at terrific prices. Get yours before they sell out!

Vendors Marketplace

The marketplace in the 3rd floor foyer features several popular local vendors for your convenience and shopping pleasure.

Door Prizes

Draws for prizes occur throughout the conference. Winners must be present at the time of the draw to claim their prize.

Messages

For your convenience, a message board is located in the 3rd floor foyer. Please use it to connect with new and old friends and don't forget to check it regularly.

Posters

A fabulous array of research and clinical posters are being presented at the conference. Make time to visit the poster presentations in the 5th floor foyer to learn new information and findings from projects and initiatives from colleagues across the country. Poster presenters will attend their posters on Thursday, November 21, 2013 at 1430-1500 and Friday, November 22, 2013 at 1615-1700 to answer any questions you may have. Awards for best posters are announced during the Saturday morning Annual Business Meeting and Awards Presentation.

Green Initiative

Delegates will receive a USB loaded with the presentations received in advance of the conference. There is a business centre at the hotel should you wish to print a particular presentation.

Scent Free Environment

CAPWHN is committed to providing a scent free environment. Please refrain from wearing any scented products during the conference.

Fête de la Coupe Grey

Vendredi soir – Si vous avez choisi de participer à cette soirée, votre billet pour le souper est au verso de votre insigne d'identité. Encore une fois, un bar payant vous proposera de quoi vous désaltérer. Pour saluer la Coupe Grey à Régina, nous vous invitons à porter le chandail ou les couleurs de votre équipe préférée, qu'elle soit de la LCF, de la LNH ou même de la ligue de votre enfant! **The Brad James Band** nous promet de la musique entraînante pour danser jusqu'aux petites heures.

Oeuvres de bienfaisance

C'est avec plaisir que nous amassons des fonds pour **Hannah House** et **Save the Mothers** au moyen de l'activité *Toonie Trot* et de notre vente aux enchères écrites. Vous pouvez aussi faire un don direct. Nous comptons sur votre générosité, car toutes les recettes sont versées aux organismes choisis.

Boutique CAPWHN

Procurez-vous des articles CAPWHN à des prix imbattables. Faites vite car les tablettes se vident vite!

Coin des marchands et fournisseurs

Plusieurs marchands locaux populaires vous proposent du magasinage agréable sur place au foyer du troisième étage.

Prix de présence

Les tirages ont lieu tout au long de la conférence. Votre présence est exigée au moment du tirage pour que vous puissiez réclamer votre prix.

Messages

Un babillard se trouve au bureau d'inscription, au foyer du troisième étage. Veuillez le vérifier régulièrement pour y faire des retrouvailles ou de nouveaux contacts.

Affiches

Rendez-vous au foyer du cinquième étage pour y voir la magnifique série d'affiches scientifiques et prendre connaissance des percées générées par les projets et les initiatives de vos collègues partout au pays—qui seront d'ailleurs auprès de leurs affiches le jeudi 21 novembre de 14 h 30 à 15 h et le vendredi 22 novembre octobre de 16 h 15 à 17 h pour répondre à vos questions. Les prix pour les meilleures affiches seront annoncés samedi matin lors de la remise des prix et de l'AGA.

Une solution verte

Nous vous remettons sur une clé USB le texte des exposés soumis avant notre conférence. Il vous suffit d'aller au centre d'affaires de l'hôtel pour faire imprimer un exposé quelconque.

Sans parfum

CAPWHN reconnaît l'importance d'un milieu non odorant : Veuillez vous abstenir de porter des produits parfumés.

Program at a Glance / Survol du programme

PRE-CONFERENCE WORKSHOP – Wednesday, November 20
ATELIER PRÉCONFÉRENCE – Mercredi 20 novembre

0730 - 1630 ALARM Instructor Course

DAY 1 – Thursday, November 21 / JOUR 1 – Jeudi 21 novembre

0700 - 0815 Breakfast **Great Room AB**

0815 - 0845 Opening Ceremonies **Great Room C**

0845 - 0945 Opening Keynote / *Conférence principale d'ouverture* **Great Room C**
Healthy women, healthy communities: Nurses' global impact
Femmes en santé, communautés en santé : L'impact mondial de la profession infirmière
Presenter / *Conférencière* : Karima Velji, RN, PhD, CHE

0945 - 1015 Break / Exhibitors **Great Room AB**

1015 - 1145 Concurrent Sessions A (2 X 45 min)
A-01 / A-02 **Breastfeeding** **Strategy Room 1**
A-03 / A-04 **Trauma / Violence** **Strategy Room 2**
A-05 / A-06 **Culturally Competent Care** **Upper Fallsview Studio A**
A-07 / A-08 **Education Strategies** **Strategy Room 7**
A-09 / A-10 **Postpartum Care** **Strategy Room 5/6**
A-11 / A-12 **Labour & Birth** **Strategy Room 3**
A-13 **Patient Safety** **Upper Fallsview Studio B**

1145 - 1300 Lunch / Exhibitors **Great Room AB**

1300 - 1430 Concurrent Sessions B (2 X 45 min)
B-01 / B-02 **Breastfeeding** **Strategy Room 1**
B-03 / B-04 **Unique Populations** **Strategy Room 3**
B-05 / B-06 **Neonatal Care** **Strategy Room 5/6**
B-07 / B-08 **Women's Health** **Upper Fallsview Studio A**
B-09 / B-10 **Research-Informed Practice** **B-09 Cancelled** **Strategy Room 7**
B-11 / B-12 **Early Years** **Upper Fallsview Studio B**

1430 - 1500 Poster Viewing **5th Floor Foyer**

1500 - 1630 Concurrent Sessions C (2 X 45 min)
C-01 / C-02 **Breastfeeding** **Strategy Room 1**
C-03 / C-04 **Neonatal Care** **Upper Fallsview Studio B**
C-05 / C-06 **Midwifery Care** **Strategy Room 7**
C-07 / C-08 **Bereavement** **Strategy Room 3**
C-09 **Postpartum Mood Disorders** **Strategy Room 5/6**
C-10 / C-11 **Health Care Services** **Upper Fallsview Studio A**

1630 - 1730 Special Networking Meetings (see page 19 for details)

1730 - 1900 Opening Reception with Exhibitors **Great Room AB**
Featuring the Jeff Luciani Trio



DAY 2 – Friday, November 22 / JOUR 2 – Vendredi 22 novembre	
0700 - 0730	Toonie Trot Meet in the hotel lobby
0730 – 0830	Breakfast Great Room AB
0730 - 0830	Advocay and Health Policy Committee Executive Boardroom
0830 – 0845	Opening Remarks Great Room C
0845 – 0945	Plenary Keynote / <i>Conférence principale</i> Great Room C Steps to deliver change -- Saving the lives of mothers and newborns in the developing world <i>La santé des femmes à l'échelle internationale : La voie du changement—Sauver la vie des mères et des nouveau-nés dans les pays en développement</i> <i>Presenter / Conférencière : Jean Chamberlain (Froese) BSc, MD, MEd, FRCSC</i>
0945 – 1015	Break / Exhibitors Great Room AB
1015 – 1145	Concurrent Sessions D (2 X 45 min) D-01 / D-02 Breastfeeding Strategy Room 1 D-03 / D-04 Drug Dependency Strategy Room 3 D-05 / D-06 Quality Indicators Strategy Room 5/6 D-07 / D-08 Vulnerable Parenting Strategy Room 7 D-09 / D-10 Labour & Birth Upper Fallsview Studio B D-11 / D-12 Pregnancy Upper Fallsview Studio A
1145 – 1315	Lunch / Exhibitors Great Room AB
1315 – 1615	Specialty Sessions (3 hours) SS-1 Evidence-Based Nursing Strategy Room 1 <i>Presenters: Jennifer Yost RN, PhD; Jackie Muresan RN, MSc; Donna Ciliska RN, PhD; Rebecca Ganann RN, MSc; Diana Sherifali RN, PhD; Maureen Dobbins RN, PhD; Nancy Carter RN, PhD</i> SS-2 Critical Care Obstetrics Strategy Room 2 <i>Presenters: Nancy Watts RN, MN, PNC (C); Brenda Morgan RN, BScN, MSc CNCC(C)</i> SS-3 Mother-Baby Dyad Care Strategy Room 3 <i>Presenters: Ruth Turner RN, BScN, PNC(C); Kathy Venter RN, IBCLC, RLC</i> SS-4 Legal Issues Strategy Room 5/6 <i>Presenters: Kathryn Doren RN, BScN, MScN; Laura Lee RN, BScN</i> Ethical Issues <i>Presenter: Anne Simmonds RN, PhD</i> SS-5 Perinatal Certification Upper Fallsview Studio B <i>Presenters: Melanie Basso RN, MSN, PNC(C); Julia Wigmore BScN, RN</i> Accreditation <i>Presenter: Susan Kwolek</i> SS-6 Neonatal Abstinence Syndrome Strategy Room 7 <i>Presenters: Sandra Seigel MD, FRCP(C); Jodie Murphy-Oikonen MSW, RSW, PhD; Laurie Yamamoto RN, MNSc</i>
1615 - 1700	Poster Viewing 5th Floor Foyer
1800	Dinner and Tailgate Party Great Room C Featuring the Brad James Band



DAY 3 – Saturday, November 23 / JOUR 3 – Samedi 23 novembre	
0700 - 0830	Breakfast and Annual Business Meeting & Awards Great Room C
0830 - 0845	Opening Remarks Great Room C
0845 - 0945	Plenary Keynote / <i>Conférence principale</i> Great Room C Women’s health through the lens of cultural diversity <i>La santé des femmes dans l’optique de la diversité culturelle</i> Presenter / <i>Conférencière</i> : Rani Srivastava BN, MSN, PhD
0945 - 1000	Break Great Room AB
1000 - 1145	Concurrent Sessions E (3 X 30 min) E-01 / E-02 / E-03 Breastfeeding Strategy Room 1 E-04 / E-05 / E-06 Vulnerable Populations Strategy Room 2 E-07 / E-08 Labour & Birth Strategy Room 3 E-09 / E-10 / E-11 Nursing Education Strategy Room 5/6 E-12 / E-13 / E-14 Quality Care Strategy Room 7 E-15 / E-16 / E-17 Innovative Programs Upper Fallsview Studio A E-18 / E-19 / E-20 Technology & Health Promotion Upper Fallsview Studio B
1145 - 1315	Lunch and Final Keynote / <i>Repas du midi et conférence principale</i> Great Room C Stretchmarks to laughlines: A woman’s journey to her own heart <i>De mes vergetures à mes rides du rire... Le parcours vers mon cœur de femme</i> Presenter / <i>Conférencière</i> : Deb Gauldin RN, PMS, Raleigh, NC
1315 - 1330	Closing Remarks Great Room C
1400 - 1800	Optional Wine Tour



Final Program / Programme final

PRE-CONFERENCE WORKSHOP / ATELIER PRÉCONFÉRENCE Wednesday, November 20 / Mercredi 20 novembre

07:30 – 16:30 ALARM Instructor Course

The Society of Obstetricians and Gynaecologists of Canada (SOGC) will be offering an ALARM (Advances in Labour & Risk Management) Instructor Course prior to the CAPWHN National Conference. The ALARM Instructor Course is for health professionals who have passed an ALARM Course in the past three years and would like to teach this course.

Presenters: Faculty from the Society of Obstetricians and Gynaecologists of Canada (SOGC)



DAY 1 – Thursday, November 21 / JOUR 1 – Jeudi 21 novembre

07:00 – 08:15 Registration / Breakfast **Great Room AB**

08:15 – 08:45 Opening Ceremonies **Great Room C**

08:45 – 09:45 Opening Keynote / **Great Room C**
Conférence principale d'ouverture

Healthy women, healthy communities: Nurses' global impact

This presentation will explore the current state of prenatal and women's health globally. The insufficient progress made to achieve Millennium Development Goal 5 will be discussed. The presentation will highlight the role that nurses should play in the community, in boardrooms, in politics and in influencing health policy.

Learning Objectives:

- Gain an understanding of the global health challenges faced by women.
- Be informed of the progress achieved to date regarding the Millennium Development Goals (MDGs) related to maternal health.
- Explore the global advocacy required to advance prenatal and women's health.

Femmes en santé, communautés en santé : L'impact mondial de la profession infirmière

Cet exposé met pleins feux sur la situation mondiale en matière de santé prénatale et santé des femmes, y compris le peu de progrès dans l'atteinte du cinquième des huit Objectifs du Millénaire pour le développement. On traite aussi du rôle du personnel infirmier dans la communauté, les conseils d'administration, la politique et l'orientation des politiques sur la santé.

Objectifs d'apprentissage :

- Comprendre davantage les défis de santé auxquels les femmes partent dans le monde entier.
- S'informer sur l'avancement des Objectifs du Millénaire liés à la santé des femmes.
- Prendre connaissance de l'action planétaire qui s'impose pour améliorer la santé prénatale et la santé des femmes.

Presenter / Conférencière : Karima Velji, RN, PhD, CHE
President Elect, Canadian Nurses Association, Ottawa, ON /
Présidente désignée, Association canadienne des infirmières et infirmiers du Canada

Dr. Karima Velji is a health care executive with over 25 years of progressive leadership experience spanning the full continuum of care. Her expertise encompasses development and implementation of innovative models of care, interprofessional practice, and quality and safety systems to foster patient-centered outcomes. She has continually demonstrated excellent strategic, execution, and people leadership skill-set aligned to achieving transformational results, vibrant organizational culture, and high performing teams. She has particular expertise in creating evidence based practice and mechanisms to operationalize mission of academic health science centers. Dr. Velji is a peer-funded scholar and awards recipient and sought after keynote speaker. She is a system leader with roles on several boards, professional associations and committees. She is an active global volunteer and community leader.

Dr. Velji is currently engaged by the Ministry of Health and Long Term Care in Ontario to lead strategic development of indicators for the next generation accountability levers such as the Quality Improvement Plans (QIPs) and Quality Based Procedures (QBP).

Dr. Velji's responsibilities extend to provincial and national leadership. She is the President-Elect of Canadian Nurses Association. She is a member of the Board of Directors of Accreditation Canada, Heart and Stroke Foundation of Ontario, University of Toronto (Mississauga campus), Canadian Nurses Foundation and Assessment Strategies Inc.

At the system/global level, Dr Velji is a consultant to global sites, including East Africa, the Middle East and Asia, for development of quality of care and academic plans.



Karima Velji est une dirigeante des soins de santé possédant plus de 25 années d'expérience en direction à l'échelle du continuum de soins. Son travail consiste notamment à élaborer et à mettre en œuvre des innovations pour les résultats axés sur les patients qui portent sur les modèles de soins, la pratique interprofessionnelle et les systèmes de qualité et de sécurité. Elle a toujours fait preuve des compétences stratégiques et relationnelles nécessaires à l'atteinte des résultats liés à la transformation, aux cultures organisationnelles vibrantes et à une équipe au rendement élevé. Mme Velji détient un savoir-faire précis en pratique factuelle et de l'utilisation de mécanismes permettant de mettre en pratique de manière efficace les missions des centres universitaires des sciences de la santé. Elle est une chercheuse-boursière financée par ses pairs, une conférencière renommée; elle siège à des conseils d'administration, des associations professionnelles et des comités, en plus d'être une bénévole active dans le monde et une dirigeante communautaire.

Ses responsabilités s'étendent également à des rôles provinciaux et nationaux. À titre de membre de multiples conseils d'administration, Agrément Canada, la Fondation des maladies du cœur de l'Ontario, l'Université de Toronto (Mississauga), la Fondation des infirmières et infirmiers du Canada et Stratégies en évaluation inc., Mme Velji a été récompensée à maintes reprises, y compris par le prix d'excellence en administration Sigma Theta Tau, le prix d'excellence en leadership infirmier Margaret Comack de l'Association des hôpitaux de l'Ontario, en plus du prix de diplômée émérite et du prix d'excellence en enseignement de la Faculté des sciences infirmières Bloomberg de l'Université de Toronto. Dans la campagne Boundless de l'Université de Toronto, elle est présentée comme une ancienne étudiante exceptionnelle.

Mme Velji participe également comme consultante en systèmes à l'élaboration de programmes d'agrément et de formation pour les infirmières et infirmiers en Afrique de l'Est, au Moyen-Orient et en Asie.

.....
09:45 – 10:15 Break / Exhibitors Great Room AB

10:15 – 11:45 Concurrent Sessions A (2 X 45 min)

BREASTFEEDING
Strategy Room 1

A-01 Effectiveness of a co-parenting breastfeeding support intervention on exclusive breastfeeding rates

Jennifer Abbass Dick RN, MN, PhD(C), IBCLC, RLC; Cindy-Lee Dennis PhD

Purpose: The purpose of the randomized controlled trial was to determine the effectiveness of a co-parenting breastfeeding support intervention on exclusive breastfeeding at 12 weeks postpartum. Additional outcomes assessed included: breastfeeding duration, partner support, the co-parenting relationship as well as paternal breastfeeding self-efficacy and infant feeding attitude.

Learning Objectives:

- To illustrate the need for health care professionals to involve fathers in breastfeeding support and intervention studies.
- To demonstrate why co-parenting is an ideal framework for assisting couples in meeting breastfeeding goals.
- To communicate the effectiveness of a co-parenting breastfeeding intervention on breastfeeding rates.

Presenter: Jennifer Abbass Dick, University of Toronto, Toronto, ON

A-02 Breastfeeding promotion or breastfeeding pressure? Examining how we implement evidence-informed practices to protect, promote and support breastfeeding

Sonia Semenic RN, PhD; Linda Bell RN, PhD; Luisa Molino MSc

Purpose: To examine the relationship between evidence-informed guidelines and programs to protect, promote and support breastfeeding (such as the WHO's Baby-Friendly Initiative), and mothers' perceptions of breastfeeding support, breastfeeding pressure and guilt.

Learning Objectives:

- Review the literature on mothers' perceptions and experiences of breastfeeding support, breastfeeding pressures and breastfeeding guilt.
- Examine discrepancies between mothers' breastfeeding needs and goals, and health services practices, guidelines and programs related to breastfeeding promotion and support.
- Discuss strategies for minimizing both maternal and health care provider concerns related to breastfeeding pressures and guilt when implementing breastfeeding best-practice guidelines.

Presenter: Sonia Semenic, Ingram School of Nursing, McGill University, Montreal, QC

.....
TRAUMA / VIOLENCE
Strategy Room 2

A-03 Hope for healing: Caring for women survivors of trauma in the perinatal period

Sarah Parkinson RN, MScN, PNC (C)

Purpose: To review prenatal nursing interventions and care planning for women who are pregnant, birthing and breastfeeding when they have a history of trauma.

Learning Objectives:

- To learn about the types of trauma that women experience in their lives and how that affects them during childbearing.
- To learn about the effects of trauma on mental health and maternal-infant attachment.
- To review trigger work as a nursing intervention for ensuring safety through the perinatal period.

Presenter: Sarah Parkinson, London Health Sciences Centre, London, ON

A-04 The impact of domestic violence on infants and young children

Chaya Kulkarni BAA, M.Ed., Ed.D; Angeliq Jenney PhD, RSW

Purpose: To explore the impact of domestic violence on women's health, and the mental health of infants and young children.

Learning Objectives:

- Learn how the violence experienced by a mother can impact her parenting behaviours and her relationship with her infant.
- Learn how the care giving environment is impacted when domestic violence has been experienced and how mothers can begin to help their young children begin to heal.
- Gain an understanding of the impact of toxic stress on the cognitive and emotional development of infants and toddlers, including who should respond to the infant, and how.

Presenters: Chaya Kulkarni and Lisa Sura-Liddell, Infant Mental Health Promotion, The Hospital for Sick Children, Toronto, ON



.....
CULTURALLY COMPETENT CARE
Upper Fallsview Studio A

A-05 24-hour rooming-in: Engaging with patients to overcome challenges and seek opportunities

Irene Sarasua RN, MSc(A), PNC(C), IBCLC; Marie-Josée Bourassa RN, BScN; Ginette Aucoin RN, MSc(A), IBCLC; Rivky Farkas

Purpose: To describe the process of engaging with Jewish Orthodox postpartum patients to identify opportunities for reconciling standards around 24-hour rooming-in and patient care expectations.

Learning Objectives:

- To understand the challenges experienced by a tertiary care postpartum unit in adopting a 24-hour rooming-in policy.
- To understand the meaning of, and expectations surrounding, rooming-in among Orthodox Jewish postpartum patients.
- To understand the principle and application of Strength-Based Nursing Care in a postpartum context.

Presenters: Marie-Josée Bourassa and Irene Sarasua, Jewish General Hospital, Montreal, QC

A-06 A counselling tool to support pregnant women who plan to fast during Ramadan

Diane Bourget M.Sc. Nursing; Jennifer Somera RN, MSc(A), IBCLC; Cristina Lidia Novac P.Dt., IBCLC

Purpose: The purpose of the counselling tool is to guide health care professionals (nurses, dietitians) to open conversations and support the pregnant patient and her family in decision-making and management of her health during Ramadan. It serves as a guide for teaching and to discuss risk factors while being mindful of the cultural and environmental components that may influence the decision to fast or to continue fasting.

Learning Objectives:

- To learn the purpose of the counselling tool and understand its application in clinical practice.
- To learn how to educate pregnant women regarding fasting safely during Ramadan using the counselling tool.
- To identify existing risk factors and teach warning signs of fasting for the pregnant patient and her unborn baby.

Presenters: Diane Bourget, Jewish General Hospital and Jennifer Somera, St. Mary's Hospital Centre, Montreal, QC

.....
EDUCATION STRATEGIES
Strategy Room 7

A-07 Implementation of the new Neonatal Resuscitation Program (NRP) guidelines for interdisciplinary team members

Janet Andrews RN, BScN, MN; Catherine Bishop RN, BScN

Purpose: To identify that teaching and evaluating (using simulation) all interdisciplinary team members within a three month time period together, improves communication, diminishes role overlap issues and improves collaboration during newborn resuscitation. Improved communication and collaboration improves teamwork in neonatal resuscitation.

Learning Objectives:

- To describe the process, the learning stations, the use of group online exams and the simulation technology used.
- To discuss the results of the mixed methods used to evaluate our process.
- To discuss principles of teamwork, high reliability organizations and impact on patient safety.

Presenters: Janet Andrews and Catherine Bishop, Saint Michael's Hospital, Toronto, ON

A-08 Enhancing team effectiveness through training simulations

Jacqueline Barrett RN, MHSc; Julie Pace RN; Marnie Buchanan RN, HBScN; Kimberley Ross RN, BScN, PNC(C); Steve French B.Comm., MBA; Anna Marie Smith RN, BScN; Susan Alliston

Purpose: To demonstrate the effectiveness of a unique approach to learning simulations to proactively train a multidisciplinary team in providing safe and effective obstetrical and neonatal care, particularly for emergency scenarios.

Learning Objectives:

- Understand how scenario-based, nurse-led training develops team skills that directly translate into safer and more effective patient care.
- Appreciate the importance of proactive training to strengthen team functioning in a safe learning environment.
- Learn about innovative applications of high-fidelity simulation equipment in a clinical setting.

Presenters: Jacqueline Barrett, Julie Pace and Marnie Buchanan, St. Joseph's Healthcare Hamilton, Hamilton, ON

.....
POSTPARTUM CARE
Strategy Room 5/6

A-09 Walking the tight rope of PATH - The balancing act of safe and timely discharge

Jacqueline Barrett RN, MHSc; Julie Pace RN; Marnie Buchanan RN, HBScN; Kimberley Ross RN, BScN, PNC(C); Steve French B.Comm., MBA; Anna Marie Smith RN, BScN

Purpose: As a multidisciplinary team, we came together to develop a discharge process to help facilitate a safe and timely discharge for families who have expressed interest in early discharge. Along with the discharge process, we developed a readmission process for newborns requiring minimal intervention post discharge for phototherapy and/or feeding/weight loss concerns. We recognize that in order to facilitate a safe discharge, the mother and newborn must be linked with community care providers, but also have the ability to link back to the hospital if there are any concerns related to newborn feeding and jaundice concerns.

Learning Objectives:

- Learn about the development of the PATH initiative.
- Review principles of nurse-led postpartum care from a low-risk perspective.
- Understand the role of readmission protocols for newborns requiring minimal intervention post discharge.

Presenters: Jacqueline Barrett, Kimberley Ross and Anna Marie Smith, St. Joseph's Healthcare Hamilton, Hamilton, ON

A-10 Are Registered Nurses REALLY discharging moms and babes? Yes! Our unit's story about development and implementation of a care directive

Barbara Whynot RN, BSc, BScN, PNC (C), MHSM; Lisa Bland RN, BScN; Seely Alder RRT, BSc., BScHE, MHS

Purpose: To share how one post partum unit developed and implemented a Care Directive so that certified Registered Nurses are able to discharge post partum families.

Learning Objectives:

- To discuss what a care directive is and its application in a post partum setting.
- To share the impetus for a care directive and the strategies for successful implementation.



- To share early data on what impact the care directive has had on length of stay and patient satisfaction.

Presenters: Seely Alder, Lisa Bland and Barbara Whynot, IWK Health Centre, Halifax, NS

LABOUR & BIRTH
Strategy Room 3

A-11 Get it right the first time - Preventing the first cesarean birth

Marie-Josée Trépanier RN, BScN, MEd, PNC(C); Lisa Keenan-Lindsay RN, MN, PNC(C)

Purpose: To discuss the evidence that links various factors to the first cesarean birth and the related clinical implications.

Learning Objectives:

- Provide an overview of Canadian cesarean birth statistics and impact of the first cesarean birth on future pregnancies.
- Review the evidence on the factors contributing to the first cesarean birth and their clinical implications.
- Discuss the role of nurses in assisting women and collaborating with the interprofessional team to reduce the likelihood of a first cesarean birth.

Presenters: Marie-Josée Trépanier, Champlain Maternal Newborn Regional Program, Ottawa, ON; and Lisa Keenan-Lindsay, Seneca College, King City, ON

A-12 The experiences of women in early labour sent home following hospital assessment

Marilyn Morson BA, BNSc, MSN; Landa Terblanche PhD, RN; Maggie Theron DCur, MCur, BCur, RN, RPN

Purpose: The purpose of this research was to generate new knowledge about women's experiences to determine how women describe their experiences, including psychosocial aspects, of being sent home in early labour following assessment in hospital; and what recommendations can be developed for nurses when assessing women in hospital.

Learning Objectives:

- To gain understanding of the experiences of women in early labour who are sent home after hospital assessment.
- To gain awareness of influences such as cultural background and pregnancy concerns which may disempower women.
- To apply critical thinking in consideration of the findings for diverse hospital settings.

Presenter: Marilyn Morson, Trillium Health Partners Mississauga Hospital, Mississauga, ON

PATIENT SAFETY
Upper Fallsview Studio B

A-13 Perinatal fall assessment and prevention for the elective caesarean patient

Andrea Castonguay RN, BN., MSc. (A) Student; Ginette Aucoin RN, MSc A (c), IBCLC; Diane Bourget RN, MSc A (c)

Purpose: The purpose of this clinical project is to standardize nursing care, to promote patient safety and to reduce falls/near falls experienced by the elective caesarean patient.

Learning Objectives:

- Gain increased awareness of the perinatal risk factors and best practice preventive interventions for falls/near falls of the elective caesarean section subgroup.

- Learn about the process undertaken in adapting a pre-existing fall assessment and prevention intervention tool for elective caesarean mothers.
- Gain insight as to the implications for nursing practice and recommendations for future development of the tool.

Presenter: Andrea Castonguay, Jewish General Hospital, Montreal, QC

11:45 – 13:00 Lunch / Exhibitors Great Room AB

13:00 – 14:30 Concurrent Sessions B (2 X 45 min)

BREASTFEEDING
Strategy Room 1

B-01 The portrayal of breastfeeding in the Canadian media: 2006-2012

Cynthia Mannion RN, MSc (A) PhD; Kevin Talbot BA, MPH (c)

Purpose: The purpose of this study was to examine how Canadian newspapers portrayed breastfeeding over the time period 2006-2012.

Learning Objectives:

- To view how breastfeeding is reported in the media over time.
- To appreciate changes in media content with respect to breastfeeding across Canada from east to west.
- To understand the possibility that media can influence health decisions such as breastfeeding due to its public image.

Presenter: Cynthia Mannion, University of Calgary, Calgary, AB

B-02 Hand expression of breast milk: Empowering nurses to embrace this simple yet powerful practice

Sonya Boersma, RN, IBCLC, BN, MScN(c); Vicki Bassett, RN, PNC (C), BNSc, MEd, IBCLC

Purpose: To share the results of a quality improvement project focused on empowering nurses through an interactive educational intervention to support mothers in learning hand expression of breast milk.

Learning Objectives:

- Review the rationale for teaching all postpartum breastfeeding mothers hand expression.
- Describe an educational intervention for postpartum nurses focused on why, when and how to teach mothers hand expression.
- Discuss evaluation and outcomes of the intervention, and implications for use of hand expression as an integral part of breastfeeding.

Presenters: Sonya Boersma, Lactation Care Ottawa and Vicki Bassett, The Ottawa Hospital, Ottawa ON

UNIQUE POPULATIONS
Strategy Room 3

B-03 What we know, what we don't know, and what we can do: Physically disabled women during the perinatal period

Lesley Tarasoff MA

Purpose: To share the perinatal care experiences and outcomes of physically disabled women and to provide recommendations for nurses and other health professionals to address barriers that physically disabled women encounter during the perinatal period, to ultimately improve perinatal care experiences and outcomes.



Learning Objectives:

- To gain a better understanding of physically disabled women's perinatal care experiences and outcomes.
- To identify barriers to perinatal care for physically disabled women.
- To share and discuss strategies to improve perinatal care experiences and outcomes for physically disabled women.

Presenter: Lesley A. Tarasoff, Dalla Lana School of Public Health, University of Toronto, Toronto, ON

B-04 An evolving process to meet the unique needs of a special population: Surrogate pregnancy

Nancy Watts RN, MN, PNC (C); Kathryn Wodrich RN, PNC (C)

Purpose: To highlight the process of ensuring that legal, medical and patient needs are met in the midst of potential ethical dilemmas.

Learning Objectives:

- To provide knowledge regarding the current process of surrogacy in Canada.
- To highlight ethical dilemmas that can be encountered when providing care to these women/families.
- To provide information on a interdisciplinary team effort to try to ensure best practice in provision of care.

Presenters: Nancy Watts and Kathryn Wodrich, London Health Sciences Centre, London, ON

NEONATAL CARE
Strategy Room 5/6

B-05 "From the Heart" – Supporting infant attachment in the neonatal intensive care unit

Chaya Kulkarni BAA, MEd, Ed.D

Purpose: To educate professionals on the importance of the attachment relationship, and how it can be supported while infants are in the Neonatal Intensive Care Unit (NICU).

Learning Objectives:

- Learn about the latest research on the importance of the attachment relationship for infants who are in the NICU.
- Learn ways to show a parent how they can be a key and active part of their baby's NICU stay with an emphasis on the attachment relationship their baby needs.
- Gain insight into the way the "From the Heart" campaign works at the Hospital for Sick Children.

Presenter: Chaya Kulkarni, Infant Mental Health Promotion, The Hospital for Sick Children, Toronto, ON

B-06 Canadian neonatal follow-up programs - Mothers' and health providers' perspectives of barriers to care

Marilyn Ballantyne RN (EC), PhD; Karen Benzies RN, PhD; Abhay Lodha MSc, MBBS, MD, DM

Purpose: Neonatal follow-up (NFU) programs provide care for infants at greatest risk for developmental problems subsequent to very preterm birth and extended neonatal intensive care hospitalization. Up to 30% of mothers do not attend NFU programs with their infant. The purpose of this research was to investigate the barriers to NFU care from the perspectives of both mothers and health providers.

Learning Objectives:

- Identify barriers from the mothers' perspective that they encounter in attending NFU care for their high-risk infants.

- Identify barriers from the health providers' perspective that mothers encounter in attending NFU care for their high-risk infants.
- Develop an integrated perspective of barriers to NFU care (i.e., mothers and providers) and identify gaps, opportunities, and strategies to improve health service access and delivery related to Canadian NFU programs.

Presenter: Marilyn Ballantyne, McMaster University, Hamilton, ON

WOMEN'S HEALTH
Upper Fallsview Studio A

B-07 SAFER (Studying Adverse events From Elective surgery Research): How one group used online tools to better support women following gynecological surgery

Barbara Whynot RN, BSc, BScN, PNC (C), MHSM; Donna Gilmour MD, FRCSC

Purpose: To share an innovative, interactive, online program that provides information and anticipatory guidance to women to help them have a safe and healthy recovery following gynecological surgery.

Learning Objectives:

- To share the history of how SAFER was developed.
- To discuss the most common adverse events following gynecological surgery and strategies to help women identify when they need to seek medical attention.
- To demonstrate how the SAFER program can be applied to recovery following cesarean birth.

Presenters: Barbara Whynot and Donna Gilmour, IWK Health Centre, Halifax, NS

B-08 Pain following childbirth in first-time mothers

Erna Snelgrove-Clarke RN, PhD; Natalie Rosen PhD, R. Psych; Jill Chorney PhD; Ron George MD, FRCPC; Maria Glowacka; Lucy Doan; Scott McPhee

Purpose: To determine the association between pain during childbirth and the development of chronic pain and its impact on a woman's and her family's lives.

Learning Objectives:

- To describe factors impacting the incidence of pain following childbirth.
- To name three variables influencing pain and the impact of these variables on nursing practice.
- To propose an interdisciplinary research agenda for women's pain related to childbirth.

Presenter: Erna Snelgrove-Clarke, School of Nursing / Department of Obstetrics & Gynecology, Dalhousie University and IWK Health Centre, Halifax, NS

RESEARCH INFORMED PRACTICE
Strategy Room 7

B-09 Cancelled

B-10 Encountering the other in nurse-patient pedagogic relationships: Becoming We

Glenda Carson PhD, RN, PNC(C), IBCLC

Purpose: Using interpretive phenomenology, consistent with the philosophy of Martin Heidegger, this research study explores the meaning of the relationships that develop for patients with nurses during their learning experiences about gestational diabetes mellitus. It affords a better understanding of how patients engage with the Other in their mutual relationships and what influences their Being-in-the-World.



Learning Objectives:

- To gain understanding into the everyday experience of patient education within the relational pedagogical space where patient and nurse connect as learner and teacher.
- To gain insight into the meaning embedded in the pedagogic relationships that patients have with registered nurses during their learning experiences.
- To consider the implications of the research findings for patient education, nursing practice and education, health policy and research.

Presenter: Glenda Ann Carson, IWK Health Centre, Halifax, NS

EARLY YEARS

Upper Fallsview Studio B

B-11 Father involvement through the co-parenting alliance and its contribution to children’s developmental outcomes

Patrick Mahoney BScN, RN

Purpose: A systematic review of the most current (within the last five years) and most credible evidence of father involvement through a coparent alliance was undertaken to illuminate the interrelationships between coparents (father and mother) and the resultant consequences that this relationship has on a preschool child/children’s physical, social and emotional health and development.

Learning Objectives:

- To expand knowledge and understanding of the research behind father involvement through the coparenting alliance and the contribution of this alliance on preschool children’s developmental outcomes.
- To expand knowledge of how family systems theory influences coparenting predictors of parenting quality and the effects of family interactions on the coparenting alliance.
- To consider practical implications for implementing evidence-based strategies, as a result of this research, with pre and postnatal clients/groups, and community partners.

Presenter: Patrick Mahoney, Toronto Public Health, Toronto, ON

B-12 Indicators of mental health in the early years for infants and toddlers

Chaya Kulkarni BAA, MEd, Ed.D

Purpose: To educate perinatal and women’s health nurses about indicators of mental health in the early years, and how this can be supported for families, infants, and toddlers who they have access to.

Learning Objectives:

- Gain an understanding of how mental health begins from preconception and continues on into a child’s first few years of life and beyond.
- Learn about contributors to positive infant mental health and factors that put mental health in the early years at risk.
- Gain insight into what happens when mental health is compromised by factors such as trauma in the early years.

Presenter: Chaya Kulkarni, Infant Mental Health Promotion, The Hospital for Sick Children, Toronto, ON

14:30 – 15:00 Poster Viewing - 5th Floor Foyer

15:00 – 16:30 Concurrent Sessions C (2 X 45 min)

BREASTFEEDING

Strategy Room 1

C-01 Supporting breastfeeding women in Canada: Is domperidone a safe option?

Kathy Hamelin RN, BA, MN, IBCLC

Purpose: A recent Health Canada alert resulted in physician reluctance to prescribe domperidone to breastfeeding women. The purpose of this presentation is to review the evidence that precipitated this alert as well as risk factors related to milk production - to enable nurses to provide evidence-based information and practice to support breastfeeding women.

Learning Objectives:

- Examine the evidence behind the Health Canada alert regarding domperidone - and its relevance to postpartum women.
- Discuss risk factors related to suboptimal milk production in breastfeeding women.
- Review evidence-based strategies to optimize breastfeeding when milk supply issues arise.

Presenter: Kathy Hamelin, Women’s Hospital, Health Sciences Centre, Winnipeg, MB

C-02 To supplement or not to supplement, that is the question - Implementing evidence-based supplementation practice guidelines on a postpartum unit

Irene Sarasua RN, MSc(A), PNC(C), IBCLC; Ginette Aucoin RN, MSc(A), IBCLC; Lilleth Wishart RN, IBCLC; Mary Grace Espinosa RN, PNC(C), IBCLC

Purpose: To describe the development, implementation, and outcome monitoring of an in-hospital infant supplementation practice guideline.

Learning Objectives:

- To understand the evidence-based content of an in-hospital infant supplementation practice guideline.
- To understand the process of implementation of the new guideline.
- To understand patient outcomes following implementation of the new guideline.

Presenter: Irene Sarasua, Jewish General Hospital, Montreal, QC

NEONATAL CARE

Upper Fallsview Studio B

C-03 Implementing universal neonatal bilirubin screening: Lessons learned through a survey of Ontario hospitals

Liz Darling RM, M.Sc., PhD (C); Ann Sprague RN, PhD; Astrid Guttmann MDCM, MSc, FRCPC; Mark Walker MSc, MD, FRCSC

Purpose: To describe how universal bilirubin screening has been implemented in Ontario hospitals and outline the challenges and successes associated with this process.

Learning Objectives:

- To describe how universal bilirubin screening has been implemented in Ontario hospitals.
- To describe the challenges encountered by hospitals in implementing universal bilirubin screening.
- To describe the solutions developed by hospitals to support successful implementation of universal bilirubin screening.

Presenter: Liz Darling, Laurentian University, Sudbury, ON



C-04 Bilirubin, bloodwork and blankets: How to implement a home phototherapy program

Barbara Whynot RN, BSc, BScN, PNC (C), MHSM; Seely Alder RRT, BSc., BSChE, MHS

Purpose: To share information on how one unit developed and implemented a home phototherapy program in a tertiary care facility.

Learning Objectives:

- To discuss the issues that led to developing a home phototherapy program.
- To share how using PDSA (plan, do, study, act) helped fine-tune the criteria, tools and overall program.
- To highlight the change management strategy to ensure successful implementation.

Presenters: Barbara Whynot and Seely Alder, IWK Health Centre, Halifax, NS

MIDWIFERY CARE Strategy Room 7

C-05 Midwife-led birth centres: A new birth setting option for Ontario families

Marie-Josée Trépanier RN, BScN, MEd, PNC(C)

Purpose: To provide an overview of the collaboration and process undertaken by an interprofessional team that led to the successful selection by the Ministry of Health and Long-Term Care (MOHLTC) as one of the first two sites in Ontario to develop a midwife-led birth centre.

Learning Objectives:

- Review the evidence about alternative out-of-hospital birth settings.
- Discuss the application process and the pre-operational collaborative work undertaken to develop and build the new birth centre in Ottawa.
- Describe the key performance indicators that will be used to evaluate the birth centres project in Ontario.

Presenter: Marie-Josée Trépanier, Champlain Maternal Newborn Regional Program, Ottawa, ON

C-06 Innovation and growth in midwifery: What it means for clients, colleagues, costs and care

Kelly Stadelbauer RN, BScN, MBA

Purpose: Fostering collaboration, knowledge sharing, and respect among nurses and midwives through the sharing of updates in the midwifery profession, including some innovative work in the development of birth centres, clinical practice guidelines and supporting the resurgence of aboriginal midwifery.

Learning Objectives:

- Know of some of the recent innovations in perinatal health that involve midwives.
- Learn of opportunities to collaborate with midwives.
- Understand the impact of the current growth and innovation within midwifery on their practice.

Presenter: Kelly Stadelbauer, Association of Ontario Midwives, Toronto, ON

BEREAVEMENT Strategy Room 3

C-07 A solitary journey: Women's experiences of perinatal loss in isolated communities

Jennifer Noseworthy RN, BN, BTh, MScN; Christine Jonas-Simpson RN, BScN, MScN, PhD; F. Beryl Pilkington RN, BScN, MScN, PhD

Purpose: To explore how women experience perinatal loss while living in isolated regions such as Labrador, and to identify strategies to better support women and families who are grieving a loss through research, policy, education, and in clinical practice.

Learning Objectives:

- To examine the experiences of perinatal loss shared by women who participated in the study.
- To describe challenges that women and their families may face when they experience perinatal loss in general and, more specifically, in isolated communities.
- To identify strategies to better address the needs of women and families who experience perinatal loss in general and, more specifically, in isolated communities.

Presenters: Jennifer Noseworthy, Sheshatshiu Innu First Nation, Happy Valley, NL; and Christine Jonas-Simpson, York University, Toronto, ON

C-08 Nurse leaders' perspectives of the research-based documentary "Nurses Grieve Too"

Christine Jonas-Simpson RN, PhD; Cynthia MacDonald MScN, RN; Eileen McMahon RN(EC), BScN, MN, PNC(C); Beryl Pilkington RN, PhD

Purpose: To create a space to discuss research findings on nurse leaders' perspectives on nurses' grieving and share ways nurse leaders can support staff and themselves.

Learning Objectives:

- To present the findings of a survey conducted with nurse leaders regarding their experience of viewing the research-documentary "Nurses Grieve Too".
- To discuss the findings in light of audience members' own lived experiences of grieving.
- To share and discuss best practices to support staff and one's own grieving as a nursing leader.

Presenters: Christine Jonas-Simpson, Cindy MacDonald and Eileen McMahon, York University, Toronto, ON

POSTPARTUM MOOD DISORDERS Strategy Room 5/6

C-09 Postpartum depression telephone-based interpersonal psychotherapy treatment trial – 90 minute presentation

Cindy-Lee Dennis PhD; Paula Ravitz MD; Sophie Grigoriadis MD, PhD; Melissa Jovellanos MSc; Ellen Hodnett PhD, RN; John Zupancic MD, ScD; Alexander Kiss PhD

Purpose: To evaluate the effect of telephone-based interpersonal psychotherapy on the treatment of postpartum depression.

Learning Objectives:

- Understand the importance of treating postpartum depression.
- Understand the advantages of providing telephone-based treatment.
- Identify principles of a randomized controlled trial design.

Presenter: Cindy-Lee Dennis, University of Toronto, Toronto, ON

HEALTH CARE SERVICES Upper Fallsview Studio A

C-10 Factors related to women's satisfaction with prenatal care

Patricia A. Gregory RN, PhD; Maureen I. Heaman RN, PhD; Javier Mignone PhD; Michael Moffatt MD, MSc, FRCPC

Purpose: To identify the structural and process factors related to women's satisfaction with prenatal care that can be used to improve current and future models of prenatal care.



Learning Objectives:

- Identify the importance of satisfaction to the utilization of prenatal care.
- Identify the factors that are predictive of satisfaction with prenatal care.
- Discuss implications for future research, practice, education and policy.

Presenter: Patricia Gregory, Winnipeg Regional Health Authority, Winnipeg, MB

C-11 Diversity-inclusive reproductive healthcare services: For whom, why and how?

Sylvia Reitmanova MD, MScMed, PhD; Denise Spitzer BSc, BA, MA, PhD; Ivy Bourgeault BSc, MSc, PhD

Purpose: This presentation will examine how biological characteristics, physiological abilities, social identities and cultural values, and their complex interaction with other health determinants shape the reproductive health needs of women of various minority backgrounds. The findings will inform the development of diversity-inclusive and universally accessible reproductive healthcare services. The development of these services is an important change to happen in the future of nursing practice in Canada.

Learning Objectives:

- Gain an understanding of the reproductive health needs of women of various minority backgrounds.
- Identify the factors contributing to the development of inclusive and

universally accessible hospital environment.

- Discuss the theoretical concepts of diversity and inclusion and their implications for health policy and practice.

Presenter: Sylvia Reitmanova, University of Ottawa, Ottawa, ON

16:30 – 17:30 Special Networking Meetings

The Conference Planning Committee has organized special meetings to promote networking opportunities among conference participants. Connect with colleagues from across the country who play a similar role as you to discuss common areas of interest, share ideas and build new friendships! All are welcome to participate, and you can choose any of the following options:

- 1 – Hospital Staff Nurses **Strategy Room 1**
- 2 – Community / Public Health **Strategy Room 7**
- 3 – Clinical Educators / Advanced Practice Nurses **Strategy Room 2**
- 4 – Managers / Directors **Strategy Room 3**
- 5 – University / College Professors/Researchers **Strategy Room 5/6**

**17:30 – 19:00 Opening Reception with Exhibitors
Featuring the Jeff Luciani Trio
Great Room AB**

DAY 2 – Friday, November 22 / JOUR 2 – Vendredi 22 novembre

- 07:00 – 07:30 Toonie Trot Meet in the Hotel Lobby**
- 07:30 – 08:30 Breakfast Great Room AB**
- 07:30 – 08:30 Advocacy and Health Policy Committee Meeting
Executive Boardroom**
- 08:30 – 08:45 Opening Remarks Great Room C**
- 08:45 – 09:45 Plenary Keynote / Conférence principale
Great Room C**

Steps to deliver change -- Saving the lives of mothers and newborns in the developing world

Lessons learned from Niagara Falls: Saving the lives of 350,000 mothers around the world and another 3 million newborns can be likened to walking across the chasm that spreads the largest waterfall volume in North America. The dense mist and strong winds of culture, social pressure and economic constraints are intense and real. How does one get started, keep going and eventually get to the other side? We'll examine those steps of vision and intentionality that are needed to bring lasting change in a very foggy place.

La santé des femmes à l'échelle internationale : La voie du changement—Sauver la vie des mères et des nouveau-nés dans les pays en développement

Dans les torrents de Niagara... Quelles leçons? : Tenter de sauver 350 000 mères et quelque trois millions de nouveau-nés aux quatre coins du monde, c'est comme faire le funambule à la conquête du gouffre au dessus des plus hautes et féroces chutes de l'Amérique du Nord. La brume opaque et les rafales puissantes de la culture, de la pression sociale et des contraintes économiques nous font perdre pied. Comment faire le premier pas... maintenir l'équilibre et... enfin atteindre l'autre côté? Nous étudierons la vision et la volonté qui s'imposent pour voir clair et changer les choses pour de bon.

Presenter / Conférencière : Jean Chamberlain (Froese) BSc, MD, MEd, FRCSC, Uganda Christian University, Mukono, Uganda/Ouganda; McMaster University, Hamilton, ON

Dr. Jean Chamberlain (Froese) is an internationally recognized expert in women's reproductive health and winner of the Canadian Royal College's second Teasdale-Corti Humanitarian Award. Dr. Chamberlain has volunteered in some of the world's poorest countries to make childbirth a safer experience. She is founder and executive director of Save the Mothers (STM) International (www.savethemothers.org), an organization dedicated to saving some of the 340,000 mothers who die in childbirth every year. Save the Mothers is an innovative public health program that trains professional and influential champions within developing countries to improve mothers' health through their specific window of influence, including law, media, social services and education.

Dr. Chamberlain spends eight months of the year in at the Uganda Christian University, where she initiated the STM training program in 2005. Dr. Chamberlain spends four months of the year in Canada advocating for safe motherhood while teaching and working clinically at McMaster University, in Hamilton. She is an associate professor in obstetrics and gynecology and co-directs the McMaster International Women's Health Program. She has written a book, "Where Have All the Mothers Gone", and also co-editor of the 2006 book "Women's Health in the Majority World: Issues and Initiatives." She was a special guest speaker for the Youth Summit of the G8 meeting in Muskoka, Canada in June 2010 and has been consulted by the Canadian Prime Minister's Office as an expert in maternal health. She has been an invited speaker at the General Annual Meetings of both the American College of Obstetricians/Gynecologists and the Society of Obstetricians/Gynecologists of Canada.

La Dre Jean Chamberlain (Froese) est une sommité internationale en santé génésique des femmes. Récipiendaire du Prix Teasdale-Corti d'action humanitaire du Collège royal, elle a travaillé bénévolement dans certains des pays les plus pauvres de la planète pour accroître la sécurité des accouchements. Elle est en outre la fondatrice et directrice générale de Save the Mothers (STM) International (www.savethemothers.org), organisme dont la mission est de faire chuter le nombre de mères qui meurent pendant leur accouchement, soit quelque 340 000 par année dans le moment. Save the Mothers y va d'une approche de santé publique novatrice qui forme des chefs de file influents issus de divers domaines—droit, médias, éducation, services sociaux—dans les pays en voie de développement pour leur permettre de défendre et améliorer la santé des mères.



La Dre Chamberlain passe huit mois par année à la Uganda Christian University, où elle a lancé le programme de formation STM en 2005. Elle consacre ensuite quatre mois par année au Canada à la promotion des accouchements sécuritaires, tout en travaillant comme professeure agrégée et clinicienne en obstétrique/gynécologie et comme co-directrice du programme international en santé des femmes à l'Université McMaster à Hamilton. Elle est l'auteure du livre *Where Have All the Mothers Gone* et co-révisseur de *Women's Health in the Majority World: Issues and Initiatives*, publié en 2006. Elle a été conférencière spéciale au sommet de la jeunesse pendant la réunion du G8 à Muskoka (Ontario) en juin 2010 et a servi comme consultante en santé maternelle auprès du bureau du premier ministre du Canada. De plus, elle a prononcé des conférences aux AGA du American College of Obstetricians/Gynecologists et de la Société des obstétriciens et gynécologues du Canada.

09:45 – 10:15 Break / Exhibitors **Great Room AB**

10:15 – 11:45 **Concurrent Sessions D (2 X 45 min)**

BREASTFEEDING Strategy Room 1

D-01 "I don't have a choice, but what can I do, it's part of life": Exploring the boundaries and contradictions of breastfeeding for HIV-positive mothers

Saara Greene MSW, PhD; Allyson Ion MSc; Dawn Elston MA; Gladys Kwaramba; Stephanie Smith; Fatimatou Barry; Adriana Carvalhal MD, MSc, PhD; Mona Loutfy MD, MPH

Purpose: This work highlights the conflicting emotions related to breastfeeding and raises key questions about the impact of global vs. local breastfeeding guidelines, and messaging around breastfeeding more generally, for HIV-positive mothers in Canada.

Learning Objectives:

- To understand the perspectives of breastfeeding of HIV-positive mothers across Ontario.
- To highlight the impact of global vs. local breastfeeding guidelines and messaging for HIV-positive mothers across Canada.
- To highlight the role of healthcare providers to support HIV-positive mothers in infant feeding practices.

Presenter: Allyson Ion, School of Social Work, McMaster University, Hamilton, ON

D-02 Women who are breastfeeding: Increasing Self-Efficacy to improve outcomes (WISE) trial

Cindy-Lee Dennis PhD; Karen McQueen PhD; Daniel Sellen PhD; Robyn Stremler PhD; Mark Walker MD; John Zupancic MD

Purpose: To evaluate the effect of a breastfeeding self-efficacy enhancing intervention provided by combined nurse and peer mentor support on breastfeeding exclusivity among primiparous mothers.

Learning Objectives:

- Identify the principles of a randomized controlled trial design.
- Understand the importance of breastfeeding self-efficacy.
- Understand the need for innovative approaches to provide breastfeeding support.

Presenter: Cindy-Lee Dennis, University of Toronto, Toronto, ON

DRUG DEPENDENCY Strategy Room 3

D-03 Enacting perinatal best practice principles for pregnant women and their newborns suffering the effects of opiate drug dependency and addiction

Glenda Carson PhD, RN, PNC(C), IBCLC; Brenda Hewitt MN, RN, CNCCP(C), IBCLC

Purpose: To explore strategies that have overcome some challenges and positively influenced the prenatal and postnatal health and well-being of mothers and babies suffering the effects of opiate drug dependency and addiction.

Learning Objectives:

- Explore best practice recommendations for the support of pregnant women and their newborns suffering the effects of drug addiction and the challenges experienced in enacting the principles in the presenters' health care environment.
- Explore prenatal care strategies that have overcome some challenges to enacting best practice, including the embracement of harm reduction and the facilitation of pregnant women's opportunities to engage in recovery from opiate dependency and addiction.
- Explore the postpartum care challenges and strategies that support positive parenting experiences and decrease the distress of newborn withdrawal from prenatal opiate exposure.

Presenter: Glenda Ann Carson, IWK Health Centre, Halifax, NS

D-04 Drug testing and its use in perinatal populations – Basis in fact or fallacy

Luisa Ciofani RN, M.Sc.(A), IBCLC, PNC(C)

Purpose: Pregnancy and birth are times when couples are motivated to stop or decrease illicit drug use. The health care provider has a role in assessing parental capacity. This presentation will focus on the utility of drug testing in these situations.

Learning Objectives:

- Determine how to assess the need for drug testing in the perinatal population.
- Describe the utility/ accuracy of current methods of drug testing.
- Using a case scenario approach describe the potential harm and benefits of drug testing.

Presenter: Luisa Ciofani, McGill University Health Centre, Montreal, QC

QUALITY INDICATORS Strategy Room 5/6

D-05 The Amazing Race: Navigating data quality to improve maternal-child health in Ontario

Laurel Silenzi BScN; Glenda Hicks BScN; Tammy Kuepfer BA, MSc, MPH

Purpose: To share lessons learned from implementing the Better Outcomes Registry & Network (BORN), highlight the importance of nurses in data quality management, and showcase how the data is being used to improve maternal child health in Ontario.

Learning Objectives:

- Identify strategies for facilitating data collection and quality.
- Highlight the importance of collaborative relationships for data utilization.
- Gain an understanding of how improved data collection translates into improved patient care.

Presenters: Laurel Silenzi, Glenda Hicks and Tammy Kuepfer, BORN Ontario, Ottawa, ON



D-06 Calming a time of turbulence: Examining newborn transition from hospital to home in Nova Scotia

Leeanne Lauzon RN, MSc, PNC(C); Annette Elliott Rose RN, MN, PhD(c)

Purpose: The Reproductive Care Program (RCP) of Nova Scotia has undertaken an interdisciplinary Quality Assessment Review of newborn transition to home following hospital birth in each provincial District Health Authority. We will describe the process, findings thus far, and future directions for care provision, coordination and planning at local, regional, and provincial levels.

Learning Objectives:

- Describe the Newborn Care Quality Assessment Review process undertaken most recently by RCP.
- Discuss findings from focus group discussions, chart review, and provincial perinatal and billings data.
- Discuss means of affecting change in perinatal practices and processes to optimally meet the needs of mothers and neonates.

Presenters: Leeanne Lauzon and Annette Elliott Rose, Reproductive Care Program of Nova Scotia, Halifax, NS

VULNERABLE PARENTING
Strategy Room 7

D-07 Fathers' postnatal depression: Contributing factors and effects

Francine de Montigny Ph.D.; Christine Gervais Ph.D. (c); Pascale deMontigny-Gauthier M.A.; Kate St Arneault M.Sc.N; Annie Devault P.D.; Diane Dubeau Ph.D.; Carl Lacharité Ph.D.

Purpose: To identify the psychosocial factors associated with paternal postnatal depression in a context where children had been breastfed for a minimum of six months.

Learning Objectives:

- Describe a model of influential factors of paternal postnatal depression.
- Discuss how depression can impact father involvement.
- Share and explore strategies to support fathers' mental health.

Presenters: Pascale de Montigny Gauthier, University of Quebec in Outaouais, Gatineau, QC

D-08 Transition to motherhood in the aftermath of trauma

Marilyn Evans RN, PhD; Jodi Hall PhD; Helene Berman RN, PhD; Robin Mason PhD; Susan Rodger PhD; Catherine Classen PhD; Leonarda Carranza PhD (c); Fatmeh Alzoubi RN, PhD

Purpose: To critically examine the transition to motherhood discourse in the context of women with a history of trauma.

Learning Objectives:

- To discuss the transition to motherhood as an empowering and a unique embodied experience.
- To understand the experiences among women with past trauma as they transition to motherhood.
- To identify facilitators and barriers to the well-being of these women through the transition to motherhood.

Presenter: Marilyn Evans, University of Western Ontario, London, ON

LABOUR & BIRTH
Upper Fallsview Studio B

D-09 Labour and delivery nurses' needs in caring for women undergoing pregnancy termination

Hilary Swanson B.Sc.(FN), M.Sc.(A) student; Alyson Parker B.P.H.E., B.A., M.Sc(A) student; Valerie Frunchak RN, MScN

Purpose: To explore the psychosocial, educational, and administrative support needs of labour and delivery nurses who care for women undergoing termination of pregnancy.

Learning Objectives:

- Gain an understanding of the experience of nurses who provide care to women who are undergoing termination of pregnancy.
- Identify how the experiences of these nurses affect their care of women and families.
- Describe the psychosocial, educational, and administrative resources that nurses identify as being important in supporting practice.

Presenters: Hilary Swanson and Alyson Parker, Ingram School of Nursing, McGill University, Montreal, QC

D-10 Fetal scalp lactate testing comparing two point-of-care meters: Determining the clinical cut-offs for a new fetal scalp lactate device

Melanie Basso RN, MSN, PNC(C); Ivy Fernando RN, BSN, PNC(C); Catherine Halstead MD, FRCPC; Ellen Giesbrecht MD, FRCSC; Elvira Kozak, MLT

Purpose: To describe an interdisciplinary research project that provides leading-edge information on a new clinical practice change in the use of fetal scalp lactate testing.

Learning Objectives:

- To discuss the research methods used to compare two scalp lactate meters.
- To describe the roles of the interdisciplinary team members.
- To present the preliminary results of our findings.

Presenter: Melanie Basso, BC Women's Hospital, Vancouver, BC

PREGNANCY
Upper Fallsview Studio A

D-11 A story of evolutionary prenatal care for young parents - The Saint Michael's Effect

Marisa Cicero BSW, MSW, RSW; Maureen Armstrong BA, RN, IBCLC; Catherine Beatty RN, IBCLC

Purpose: To give delegates an overview of the issues affecting young, street-involved pregnant women and to provide information about best practice gleaned from the innovative My Baby and Me Infant Passport Program at St. Michael's Hospital. A short film from the NFB-produced 'Filmmaker in Residence' program will be used to provide a patient's view of the issues. Presenters will then chart the Program's implementation and evolution to its current day form as well as illustrating the techniques used to maintain the Passport's standing in the community as a useful, quantitatively important innovation.

Learning Objectives:

- Understanding of the complex issues affecting young, street-involved, pregnant women.
- Understand how the simple idea of a "portable health record" was translated into a meaningful, successful and quantitatively significant Program that has been replicated in other parts of the Country and hinges on the collaboration of multidisciplinary team members and excellent clinical practice skills.
- Learn the tenets of the Program and leave with tangible information on how to bring the Passport Program to their areas via the recently produced Toolkit, should they wish.

Presenters: Marisa Cicero, Maureen Armstrong and Catherine Beatty, St. Michael's Hospital, Toronto, ON



D-12 Conceiving a child: Influential factors in men's and women's decision

Pascale de Montigny Gauthier M.A.; Francine de Montigny Ph.D.

Purpose: To improve our understanding of women and men's experiences when deciding to have a first child and factors contributing to that decision.

Learning Objectives:

- Explore differences and similarities in men and women's decision-making trajectories about becoming parents.
- Improve our understanding of how women and men define a planned pregnancy.
- Describe facilitating factors for men's decision to have a child.

Presenter: Pascale de Montigny Gauthier, University of Quebec in Outaouais, Gatineau, QC

11:45 – 13:15 Lunch / Exhibitors **Great Room AB**

13:15 – 16:15 Specialty Sessions (3 hours)

SS-1 EVIDENCE-BASED NURSING Strategy Room 1

Taking evidence-informed decision making in perinatal and women's health care one step at a time: Resources and strategies for incorporating the best available research evidence

Nurses today are faced with increased demands to consider the best available research evidence in the decision-making process guiding their care. This presentation will introduce a step-by-step approach to considering the best available research evidence along with other important contextual factors that impact the decision-making process. The interactive format of this session will provide an opportunity for professional networking, discussion of common challenges faced in using the process of evidence-informed decision making, and identifying strategies to overcome barriers to research implementation. Scenarios will examine current issues in perinatal and women's health with an opportunity for workshop participants to discuss relevant research evidence and implications for practice.

This presentation is intended for nurses working in perinatal and women's health, clinical nurse specialists, nurse practitioners, and program managers/directors, in addition to all staff responsible for the planning and delivery of best practice programs and services.

Learning Objectives:

- Become familiar with the steps of the process for evidence-informed decision making.
- Increase awareness of available methods, tools, and resources to support evidence-informed decision making.
- Practice integrating research evidence, along with other important factors (e.g., resources; clinical expertise; clinical setting; patient preferences), into decision making.
- Exchange knowledge and experiences with other participants about using research evidence in decision making.

Presenters: Jennifer Yost RN PhD, Assistant Professor, School of Nursing*; Jackie Muresan RN MSc, Public Health Nurse, Family Health, Region of Peel; Donna Ciliska RN PhD, Professor, School of Nursing* and Co-Principal Investigator, McMaster Evidence Review and Synthesis Centre; Rebecca Ganann RN MSc, Assistant Clinical Professor, School of Nursing*; Diana Sherifali RN PhD, Assistant Professor, School of Nursing*; Maureen Dobbins RN PhD, Professor, School of Nursing* and Scientific Director, National Collaborating Centre for Methods and Tools and Health Evidence; Nancy Carter RN PhD, Assistant Professor, School of Nursing*

* McMaster University

SS-2 CRITICAL CARE OBSTETRICS Strategy Room 2

Finding a way through thickening fog: A collaboration between critical care and obstetrical nursing to provide excellent patient care

This interactive session will examine complex patient care issues involving both critical care and obstetrical nursing expertise. Case studies will be used to illustrate a variety of obstetrical challenges such as post partum hemorrhage, diabetic ketoacidosis, amniotic fluid embolism and maternal cardiac arrest. Resource requirements including laboratory and critical care support will be discussed as we explore the assessment, intervention and evaluation of care.

Learning Objectives:

- Describe the potential for collaboration between critical care and obstetrical nursing in order to provide high quality care for complex patients/families.
- Provide examples of critically ill obstetrical patients/families and essential elements of their care.
- Describe the high risk obstetrical population and why it is increasing.

Presenters: Nancy Watts RN, MN, PNC(C), Clinical Nurse Specialist, Women's Care Program; Brenda Morgan RN BScN MSc CNCC(C), Clinical Nurse Specialist, Critical Care Trauma Centre, London Health Sciences Centre, London, ON

SS-3 MOTHER-BABY DYAD CARE Strategy Room 3

Rediscovering ancient skills: Skin-to-skin care and breastfeeding

This presentation will discuss the important relationship between the ancient skills of skin-to-skin contact and breastfeeding in view of modern day mother-baby dyad care. Skin-to-skin care has profound effects on maternal-infant attachment and infant feeding behaviours that should not be underestimated. The recommendations from Ontario's Provincial Council for Maternal and Child Health's Mother-baby Dyad Care Work Group will also be discussed.

Learning Objectives:

- Discuss the mother-baby dyad care recommendations from Ontario's Provincial Council for Maternal and Child Health.
- Discuss the relationship between the neurological, psychological, and physiological effects of skin-to-skin contact and successful breastfeeding.
- Identify strategies to support mother-baby dyad care in the birthing and postpartum hospital settings.
- Describe and/or demonstrate key skills for breastfeeding success.
- Value skin-to-skin care as an essential component of mother-baby dyad care.

Presenters: Ruth Turner RN, BScN, PNC(C), Senior Project Manager, Provincial Council for Maternal and Child Health (PCMCH), Toronto, ON; Kathy Venter RN, IBCLC, RLC, BFHI Assessor and Trainer, Breastfeeding Committee for Canada

SS-4 LEGAL and ETHICAL ISSUES Strategy Room 5/6

Presentation #1 – Legal Issues

Medical-legal issues in perinatal nursing: "You have been served..."

This session will review the types of legal proceedings perinatal nurses may be exposed to during the course of their career. A case study approach will be used to illustrate the experience of a registered nurse going through a civil



proceeding (from the time the Statement of Claim is received, through the Examinations for Discovery, preparation for court and the actual court case). Key learnings will be shared with participants.

Presenters: Kathryn Doren RN, BScN, MScN, Patient Care Manager, Maternal Child Program, Halton Healthcare; Clinical Lecturer, School of Nursing, Faculty of Health Sciences, McMaster University, Oakville, ON; Laura Lee RN, BScN, Halton Health Care, Oakville, ON

Presentation #2 – Ethical Issues

“I just did what I had to do”: Moral responsibilities when caring for the “difficult” patient and family

In this interactive specialty session, participants will engage in discussion about recognizing and responding to ethical issues in perinatal nursing practice, particularly when caring for the “difficult” patient and family. Using relevant ethical theory, case examples and their own stories from practice, participants will consider circumstances under which the label of “difficult” is applied, and why. Gaps between the ideals and the realities of practice – specifically related to the provision of family-centred maternity care - will be discussed and debated. Participants will be asked to give thoughtful consideration to the values and assumptions that influence their approach with these patients and families, as well as factors in the clinical environment – such as institutional policies, relationships within the team and availability of resources – that impact the provision of care. The session will conclude with specific strategies for “building a bridge” with “difficult” patients.

Presenter: Anne Simmonds RN, PhD, Lecturer, Lawrence S. Bloomberg Faculty of Nursing, University of Toronto, Toronto, ON

SS-5 PERINATAL CERTIFICATION and ACCREDITATION Upper Fallsview Studio A

Presentation #1 – Perinatal Certification

Preparation for the Perinatal Certification Examination — Clearing the Mist

A certification credential from the Canadian Nurses Association (CNA) indicates to patients, employers, the public and professional licensing bodies that nurses are qualified, competent, and current in a nursing specialty/area of nursing practice. This interactive workshop will provide an overview of the CNA Certification Program and discuss the benefits of certification in the perinatal specialty. In small groups, participants will discuss how to prepare for the rigorous certification exam, including tools, resources and activities such as participation in study groups. This session will also include testimonials from certified nurses as well as provide examples of questions from a mock exam.

Learning Objectives:

- Describe the purpose and professional value in becoming certified in specialty nursing.
- Discuss resources and activities to support candidates to be successful on the Perinatal certification exam.
- Provide the participants with the opportunity to complete some practice questions for the Perinatal certification exam.

Presenters: Melanie Basso RN, MSN, PNC(C), Senior Practice Leader - Perinatal, BC Women’s Hospital, Vancouver, BC and Julia Wigmore, BScN, RN, University of Calgary, Calgary, AB

Presentation # 2 – Accreditation

A practical workshop on preparing for Perinatal Accreditation

Learning Objectives:

- Share particular concerns or questions about the accreditation process in perinatal areas of their organization and receive practical advice from an experienced surveyor and maternal newborn pediatric nurse administrator.
- Engage in discussions about how to prepare staff to be engaged in the accreditation process.
- Leave with a toolkit of ideas and tips to address common situations, staff anxieties, and how to best highlight their perinatal achievements.
- Gain an understanding on how to use the results of their accreditation process to develop their quality agenda post survey.

Presenter: Susan Kwolek, VP Patient Services and Chief Nursing Officer, Niagara Health System, St. Catharines, ON

SS-6 NEONATAL ABSTINENCE SYNDROME Strategy Room 7

The infant at risk for Neonatal Abstinence Syndrome: Supporting the mother-baby relationship

Substance use in pregnancy is a marker for social and environmental risks that contribute to mental, physical and developmental challenges for infants and children that may last a lifetime. Infants born to women who are dependent on drugs are at risk of developing Neonatal Abstinence Syndrome (NAS) as a result of drug withdrawal following birth. Health care providers play a critical role in the long term health of the family through their support of the baby, together with its mother, in the immediate post partum period. This includes assessment and screening of the baby for symptoms of NAS during rooming-in and skin-to-skin care. The growing incidence of NAS makes it imperative for health care providers to position the family for success by providing compassionate care and treatment that supports the unique needs of this complex and vulnerable population as the mother-baby relationship develops during this critical time.

Learning Objectives:

- Discuss the experiences of substance using women during pregnancy, their challenges and unique needs as they adapt to motherhood.
- Discuss implementation considerations for mother-baby dyad care on the postpartum unit for babies who are identified as being at risk of NAS.
- Learn effective communication strategies for working with the substance using mother.
- Value your role as a health care provider to enhance the mother-baby relationship for substance using mothers and the infant at risk for NAS.

Presenters: Sandra Seigel MD, FRCP(C), Chief of Pediatrics, St. Joseph’s Healthcare and McMaster Children’s Hospital, Hamilton, ON; Jodie Murphy-Oikonen MSW, RSW, PhD, Family and School Health Program, Thunder Bay District Health Unit, Thunder Bay, ON; Laurie Yamamoto RN, MNSc, Project Coordinator, Hamilton Health Sciences Centre, Hamilton, ON

16:15 – 17:00 Poster Viewing 5th Floor Foyer

18:00 DINNER AND TAILGATE PARTY
Featuring the Brad James Band
Great Room C

DAY 3 – Saturday, November 23 / JOUR 3 – Samedi 23 novembre

07:00 – 08:30 Breakfast and Annual Business Meeting & Awards Great Room C

08:30 – 08:45 Opening Remarks Great Room C

08:45 – 09:45 Plenary Keynote / Conférence principale Great Room C

Women's health through the lens of cultural diversity

Cultural diversity is a norm in today's society; however neither gender nor culture are homogeneous categories. Both are recognized as determinants of health and thus appreciating the interactions between these concepts is critical to understanding and supporting women's health. This presentation will illustrate how our knowledge of key issues in women's health may evolve when viewed through the lens of cultural diversity.

Learning Objectives:

- Describe the interactional influence of culture and gender on selected aspects of women's health and help-seeking behaviours.
- Describe an approach to developing cultural competence at the individual and organizational level to enhance quality care.

La santé des femmes dans l'optique de la diversité culturelle

La diversité culturelle est monnaie courante dans la société contemporaine; par contre, ni la culture, ni le sexe des personnes forme une catégorie claire et nette. Pourtant, les deux sont des facteurs déterminants dans la santé, alors il faut reconnaître leurs interactions pour pouvoir bien comprendre et donc favoriser la santé des femmes. Cet exposé souligne dans quelle mesure notre connaissance des questions clés en santé des femmes peut évoluer lorsque nous les considérons dans l'optique de la diversité culturelle.

Objectifs d'apprentissage :

- Décrire comment la culture et le sexe d'une personne interagissent pour influencer sur la santé des femmes et sur la façon dont les femmes recherchent de l'aide.
- Décrire comment les établissements et les particuliers peuvent enrichir leurs compétences culturelles et donc améliorer la qualité des soins.

Presenter / Conférencière : Rani Srivastava BN, MSN, PhD, Chief of Nursing & Professional Practice, Centre for Addiction and Mental Health, Toronto, ON / Chef des soins infirmiers et des pratiques professionnelles, Centre de toxicomanie et de santé mentale, Toronto, ON

Dr. Rani Srivastava currently holds the position of Chief of Nursing & Professional Practice at the Centre for Addiction & Mental Health (CAMH), Assistant Professor at the Lawrence Bloomberg Faculty of Nursing, University of Toronto and Adjunct Professor, York University, Toronto. Her areas of expertise include: cultural competence and health equity; knowledge transfer; organizational dynamics, and professional practice. She is the author/editor of a textbook entitled: The Healthcare Professional's Guide to Clinical Cultural Competence and has written on the influence of religion and ethics on health care. She has served as chair for a national panel which developed best practice guideline for Embracing Diversity: Developing Cultural Competence and worked with the regulatory body to develop practice guideline for nurses in Providing Culturally Sensitive Care. Her current work is focused on cultural competence from a leadership and organizational perspective that inextricably links equity to professional practice and quality care. Dr. Srivastava earned a Bachelors degree in Nursing from Dalhousie University, Halifax and completed her graduate and doctoral studies at the University of Toronto.

Rani Srivastava est chef des soins infirmiers et des pratiques professionnelles au Centre de toxicomanie et de santé mentale à Toronto, (CAMH), professeure adjointe à la Lawrence Bloomberg Faculty of Nursing à l'Université de Toronto et professeure auxiliaire à l'Université York (Toronto). Spécialiste en compétences culturelles, équité des soins de santé, transfert des connaissances, dynamique organisationnelle et pratique professionnelle, elle est l'auteure/révisseur d'un manuel de cours intitulé The Healthcare Professional's Guide to Clinical Cultural Competence et a rédigé divers articles sur l'influence de la religion et de l'éthique sur les soins de santé. Elle a en outre présidé une table d'experts nationale chargée d'élaborer un guide des meilleures pratiques, Embracing Diversity: Developing Cultural Competence, et a travaillé au sein d'organismes de réglementation pour mettre au point des lignes directrices favorisant les soins respectueux de la culture. Son travail actuel vise une approche organisationnelle et un style de leadership forts d'une compétence culturelle où équité, pratique professionnelle et qualité des soins sont indissociables. La professeure Srivastava détient un baccalauréat en sciences infirmières de l'Université Dalhousie (Halifax) et a fait ses études de maîtrise et de doctorat à l'Université de Toronto.

09:45 – 10:00 Break **Great Room AB**

10:00 – 11:45 **Concurrent Sessions E (3 X 30 min)**

BREASTFEEDING Strategy Room 1

E-01 Born to breastfeed: Program planning to protect breastfeeding exclusivity in infants born to diabetic mothers

Jo Watson PhD, RN(EC), IBCLC, PNC(C); Sue Hermann MN, RN, IBCLC, PN(C)

Purpose: To raise awareness of the benefits of breastfeeding for both diabetic mothers and their infants and to provide strategies to increase breastfeeding rates in a vulnerable population like infants of diabetic mothers.

Learning Objectives:

- Explain how breastfeeding initiation and duration differ for women with diabetes.
- Recognize the opportunity to improve rates of breastfeeding exclusivity in women with diabetes through program planning.
- Describe the elements of a standardized care plan to support breastfeeding women with diabetes antenatally and in the early postnatal period.

Presenters: Jo Watson and Sue Hermann, Sunnybrook Health Sciences Centre, Toronto, ON

E-02 The effect of lanolin for the treatment of nipple pain among breastfeeding women: A randomized controlled trial

Kimberley Jackson RN, MN, PhD Candidate; Cindy-Lee Dennis RN, PhD; Ellen Hodnett RN, PhD; Michael McGillion RN, PhD

Purpose: The purpose of the study was to evaluate the effectiveness of lanolin ointment for the treatment of nipple pain among breastfeeding women in the early postpartum period.

Learning Objectives:

- Increased knowledge of recent evidence regarding management of nipple pain for breastfeeding women.
- Review evidence-based guidelines available for the management of nipple pain for breastfeeding women.
- Discuss implications for nursing practice and future direction for research related to nipple pain management.

Presenter: Kimberley Jackson, University of Western Ontario, London, ON

E-03 Learning together to work together: A nursing/pharmacy collaboration for breastfeeding support

Faith Wight-Moffatt PhD, RN; Maureen White RN MN IBCLC PNC(c); Susan Mansour BSc(Pharm), MBA; Jennifer E. Isenor BSc(Pharm), PharmD

Purpose: To use interactive approaches to explore an innovative strategy to help nursing and pharmacy students work together to learn about breastfeeding support.

Learning Objectives:

- Stimulate discussion about evidence-informed interprofessional learning and practice.
- Learn with, from and about each other's experiences with interprofessional learning.
- Explore strategies to engage students in health professions in critical thinking for interprofessional breastfeeding support.

Presenters: Faith Wight-Moffatt and Maureen White, Dalhousie University, Halifax, NS



VULNERABLE POPULATIONS
Strategy Room 2

E-04 Postpartum depression among adolescent mothers: A literature review

Barbara Chyzzy RN, BN, MN; Cindy Lee Dennis PhD

Purpose: This literature review will determine the current evidence on psychological and psychosocial interventions for preventing postpartum depression (PPD) among adolescent mothers.

Learning Objectives:

- To critically review the literature on PPD in adolescents.
- To determine risk factors for PPD among adolescent mothers.
- To determine psychological and psychosocial interventions for preventing PPD among adolescent mothers.

Presenter: Barbara Chyzzy, University of Toronto, Toronto, ON

E-05 Improving the healthcare experiences of women living with HIV by enhancing healthcare provider knowledge, attitudes and beliefs about HIV

Dawn Elston BA, MA; Allyson Ion BSc, MSc; Marcia Stirling RN; Lynda Aliberti RN, BScN

Purpose: Women increasingly bear the burden of HIV. Advances in HIV care and treatment have resulted in increased healthcare utilization. Yet women's healthcare experience suggests a lack of HIV knowledge and is perceived as HIV stigma. The purpose of this research abstract is to raise awareness about this important issue among nurses.

Learning Objectives:

- Discuss challenges faced by vulnerable populations.
- Explore strategies to optimize quality and patient safety in our diverse health care environments.

Presenters: Dawn Elston and Allyson Ion, Hamilton Health Sciences, Hamilton, ON

E-06 Understanding the tension between making a decision to stay or leave and becoming a mother for women who experience intimate partner violence during pregnancy

Kathryn Banks RN, MSN, PhD

Purpose: To generate a description of how women make decisions about staying or leaving an abusive intimate partner relationship when violence and abuse takes place during pregnancy.

Learning Objectives:

- To aid in understanding the complex relationship between the woman, her baby, and her male partner.
- To increase nurses understanding of how to support pregnant women making decisions about intimate partner violence.
- To help nurses explore how interdisciplinary care can be used to support pregnant women who experience abuse.

Presenter: Kathryn Banks, School of Nursing, University of Northern British Columbia, Prince George, BC

LABOUR & BIRTH
Strategy Room 3

E-07 The Creta Triplets

Sharon Dore RN PhD

Purpose: To describe how the increased rate of creta placentas associated with increasing cesarean section rates is presenting an increasing burden to all levels of hospitals.

Learning Objectives:

- Present a case of percreta placenta, including antenatal, intrapartum and post partum care.
- Review the three types of creta presentations, including causative factors encompassing risk factors and rates of occurrence, monitoring during pregnancy and post partum, and the changing management options.
- Discuss the nurse's role during the ante, intra and post partum as well as the potential for post traumatic stress disorder.

Presenter: Sharon Dore, McMaster University, Hamilton ON

E-08 Measuring through change: Outcomes following a move to single-room maternity care

Jo Watson PhD, RN(EC), IBCLC; Monica Nicholson RN, MN; Deborah Cull Hollingsworth RN, BScN

Purpose: To track clinical, operational, safety, efficiency and satisfaction measures following the move of a regional perinatal unit that incorporated the introduction of a model of single-room maternity care (SRMC).

Learning Objectives:

- Understand the literature regarding other obstetrical units' moves to single room maternity care.
- Be able to describe the outcomes in clinical, operational and satisfaction measures following a move to SRMC.
- Be able to describe factors that may affect staff adjustment following a physical move and changes to care delivery models.

Presenters: Jo Watson, Monica Nicholson and Deborah Cull Hollingsworth, Sunnybrook Health Sciences Centre, Toronto, ON

NURSING EDUCATION
Strategy Room 5/6

E-09 Undergraduate nursing education: A survey of perinatal curriculum in Canada

Lisa Keenan-Lindsay RN, MN, PNC(C)

Purpose: To present an overview of undergraduate perinatal curriculum with the intent to highlight trends and concerns and allow for discussion regarding next steps.

Learning Objectives:

- To identify trends highlighted from a survey of nursing schools across the country.
- To highlight key factors impacting perinatal undergraduate nursing curricula.
- To initiate the development of strategies to address the future direction of perinatal undergraduate nursing education and perinatal practice.

Presenter: Lisa Keenan-Lindsay, Seneca College of Applied Arts and Technology, King City, ON

E-10 A new nurse integration program: Introducing perinatal genesis

Melanie Sabbagh BScN, MSc(A); Malisa Khongkham BScN, MScN; Catherine Oliver RN, BA, MSc(A); Sonia Turcotte BScN, MScN; Nancy Turner RN, MSN

Purpose: To introduce the Perinatal Genesis Program to colleagues. We will provide rationale for such initiatives, the successes and challenges faced, as well as outcomes observed with our program and in the literature.

Learning Objectives:

- Recognize the current challenges faced by new nurses in their transition from student to professional.
- Describe a program which can aid new nurses' transition from novice



to competence: the Perinatal Genesis Program.

- Identify outcomes of transition programs that have been described in the literature and those found at our tertiary care, university teaching hospital.

Presenters: Melanie Sabbagh and Malisa Khongkham, McGill University Health Centre, Montreal, QC

E-11 Alpha and Omega: From beginning to end - Supporting nursing adaptation to change

Sabrina Haas BSN, MScN, PNC(C); Anna Balenzano BScN

Purpose: To provide a strategy for guiding the proficient and expert nurse in creating a safe and healthy work environment during times of transition.

Learning Objectives:

- How to include junior and senior staff during practice change and transition.
- How to incorporate innovative concepts in daily practice.
- To learn from our experience of implementing a strategy to support staff.

Presenters: Sabrina Haas and Anna Balenzano, The Royal Victoria Hospital (MUHC), Montreal, QC

QUALITY CARE
Strategy Room 7

E-12 Accuracy and precision testing of a transcutaneous bilirubin meter

Julie Smith-Fehr RN, BScN, MN; Krista Barg BScN, MD, BScMed, FRCPC; Martha Lyon PhD, DABCC,FACB; Julie Smith-Fehr RN, BScN, MN

Purpose: To determine the precision and accuracy of transcutaneous bilirubin (TcB) compared with total serum bilirubin (TSB) screening and describe the development of an easy-to-use nomogram.

Learning Objectives:

- To understand the importance and strength in collaborative research.
- To describe the process of implementation of a transcutaneous bilirubin meter.
- Implications for nursing practice, improved information flow between healthcare providers.

Presenter: Julie Smith-Fehr, Saskatoon Health Region, Saskatoon, SK

E-13 Code Lavender: Right place, Right people, Right time

Kimani Daniel RN, MSc(A), IBCLC, PNC(c); Serge Cloutier RN, B. Sc.N.; Line Pinsonneault RN, BN, MHEd; Lyne Charbonneau RN, M.Sc.

Purpose: To describe the implementation of an interdisciplinary neonatal resuscitation team in a tertiary care perinatal centre.

Learning Objectives:

- To describe the context of managing neonatal resuscitation at the time of delivery in a tertiary care perinatal centre.
- To describe the process of developing the Code Lavender team to manage neonatal resuscitations.
- To share our successes and lessons learned in implementing Code Lavender at our hospital.

Presenter: Kimani Daniel, Jewish General Hospital, Montreal, QC

E-14 Optimizing patient safety through an electronic “Kardex” system

Susan Harrison RN, BN, IBCLC; Shauna Mason RN, BN, ICBLC, PNC

Purpose: To share the innovative development of an electronic “Kardex” in a busy postpartum unit. This initiative has increased patient safety / quality of care and enhanced nursing “time to care”.

Learning Objectives:

- To review the need for a changes in patient data collection on a busy postpartum unit.
- To discuss the development of an electronic “Kardex”.
- To review the outcomes of this initiative on patient safety and nursing “time to care”.

Presenter: Susan Harrison, Women’s Hospital, Health Sciences Centre, Winnipeg, MB

INNOVATIVE PROGRAMS
Upper Fallsview Studio A

E-15 Using high tech to promote normal birth care practices

Nancy Hewer RN, MSN, PNC(C)

Purpose: To share a new innovative education strategy developed to assist in the translation of knowledge of the cardinal movements of labour to perinatal clinical practice.

Learning Objectives:

- Describe a new 3D model/animation used to teach new perinatal nurses the cardinal movements of labour.
- Describe learning activities that utilize the model.
- Explain the rationale for development of this new technology and discuss opportunities for its use.

Presenter: Nancy Hewer, British Columbia Institute of Technology, Burnaby, BC

E-16 Intimate frontiers: Teaching pelvic exams

Lenore Riddell MSN, NP(F)

Purpose: To share an innovative teaching program.

Learning Objectives:

- Understand the barriers for women to access cervical cancer screening.
- Appreciate the importance of a woman-centred approach to cervical cancer screening.
- Gain knowledge of the components of a successful training program.

Presenter: Lenore Riddell, BC Women’s Hospital and Health Centre, Vancouver, BC

E-17 Preparing leaders in maternal child health nursing: Opportunities for success

Melanie Basso RN, MSN, PNC(C); Becky Palmer RN, CNM, PhD CHSRF EXTRA Fellow, EDAC, CEC

Purpose: To describe the development of a nurse leadership program designed for maternal child nurses.

Learning Objectives:

- Describe the key components of the leadership model used as the foundation for the leadership program.
- Describe the overall structure of the 18-month academy.
- Provide personal examples of experiences as participants as well as faculty members of the leadership academy.

Presenters: Melanie Basso and Becky Palmer, BC Women’s Hospital and Health Centre, Vancouver, BC



TECHNOLOGY & HEALTH PROMOTION
Upper Fallsview Studio B

E-18 M+B 2B (Mom & Baby to Be) Prenatal App

Lia Swanson RN, BScN, MSc(T); Peggy Braun RN, BScN; Laurel Broski Hons. B.A., MSc

Purpose: To present a dynamic, interactive prenatal app called M+B 2B (Mom and Baby to Be).

Learning Objectives:

- Review the objective of the M+B 2B app.
- Demonstrate a variety of functions available on the app.
- Describe the evaluation process.

Presenter: Lia Swanson, Reproductive Health Program, Niagara Region, Thorold, ON

E-19 Moving forward through technology-based health teaching: A mobile app for postnatal families

Cindy Leclerc R.N., IBCLC; Jana Stockham R.N., IBCLC

Purpose: This mobile app is designed to assist postnatal families to collect health information about their baby in a way that is convenient and relevant for them. Having accessible and pertinent data collected in their mobile device eases the sharing of essential information with healthcare professionals. Timely evidence-based health information, which follows the Baby-Friendly guidelines, is integrated throughout the app and accompanying website. The aim is to help families achieve their breastfeeding goals, leading to an improvement in breastfeeding exclusivity and duration, subsequently improving the long-term health of babies.

Learning Objectives:

- To understand why our health care teaching needs to evolve to meet the learning needs of the child-bearing generation.
- To obtain knowledge about the specifics of this mobile app and how it can assist the postpartum family and health care professionals.
- To become aware of how this mobile app supports families to make informed feeding decisions following the Baby-Friendly guidelines.

Presenter: Cindy Leclerc, Cindy and Jana Health Resource, Saskatoon, SK

E-20 New directions in education for expectant parents

Karon Foster BScN, MEd., R.N.; Greg Lubimiv B.S.W., M.S.W., C.A.C.P.T.S

Purpose: To share the evaluation results for the online component of these prenatal and parenting classes in an innovative blended prenatal and parent education program that used evidence-based knowledge to educate expectant and new parents.

Learning Objectives:

- To describe the online prenatal and parenting classes and program website.
- To discuss the engagement of parents with the on-line classes of the Parenting Partnership program.
- To describe the challenges, lessons learned and factors to consider when implementing an online program.

Presenter: Karon Foster, The Phoenix Centre for Children and Families, Pembroke, ON

11:45 – 13:15 Lunch and Final Keynote **Great Room C**
Repas du midi et conférence principale

Stretchmarks to laughlines: A woman's journey to her own heart

Deb Gauldin, RN, PMS, owns and manages a public speaking and consulting business specializing in healthcare morale and women's well being. An obstetric nurse for the first 20 years of her career, Deb has spent the past decade replenishing audiences of overextended and underappreciated women from Fargo to New Zealand!

An author and recording artist, Deb has collaborated on a variety of media and materials used in nursing education. Her cartoon and column, "Deb's Last Laugh" is a regular feature published in the Journal of Perinatal Education. She is a regular contributor for The Journal of Nursing Jocularly.

Deb's story is featured in the books: Heroic Acts in Humble Shoes: America's Nurses Tell Their Stories; The Princess Principle: Women Helping Women Discover Their Royal Spirit; and Ordinary People, Extraordinary Lives: The Story of Nurses, published by Sigma Theta Tau. She is also a contributing author to the book Humor US: America's Funniest Humorists on the Power of Laughter.

A member of numerous professional nursing organizations and past president of the National Speaker's Association - Illinois Chapter, Deb currently serves on the board of the Association for Applied and Therapeutic Humor. Deb and her husband raised their two children in the Chicago area and now live amongst the tall pines of North Carolina. Of her many adventures and awards in the field of nursing and women's well being, Deb insists her credibility and best qualifications are evidenced by her stretchmarks and laughlines.

De mes vergetures à mes rides du rire... Le parcours vers mon cœur de femme

Deb Gauldin, I.A., SPM (PMS), est la propriétaire-directrice d'une firme de consultation et de conférences publiques qui se spécialise dans le moral du personnel de santé et dans le bien-être des femmes. Infirmière en obstétrique pendant les 20 premières années de sa carrière, Deb voyage maintenant partout dans le monde depuis dix ans pour prononcer des conférences énergisantes et tonifiantes à des femmes surmenées et sous-estimées.

Auteure et artiste d'enregistrement, Deb a collaboré à diverses œuvres pédagogiques en sciences infirmières. Sa bande dessinée/chronique Deb's Last Laugh paraît régulièrement dans le Journal of Perinatal Education, tout comme ses contributions au Journal of Nursing Jocularly.

On peut lire l'histoire personnelle de Deb dans les livres Heroic Acts in Humble Shoes: America's Nurses Tell Their Stories; The Princess Principle: Women Helping Women Discover Their Royal Spirit; et Ordinary People, Extraordinary Lives: The Story of Nurses, publiés par Sigma Theta Tau. Deb a aussi contribué au livre Humor US: America's Funniest Humorists on the Power of Laughter.

Membre de nombreux organismes professionnels en sciences infirmières et ancienne présidente de la National Speaker's Association, section de l'Illinois, Deb siège au conseil de l'Association for Applied and Therapeutic Humor. Elle et son mari ont élevé leurs deux enfants près de Chicago et vivent maintenant parmi les pins majestueux de la Caroline du Nord. Malgré sa vaste expérience et ses nombreuses distinctions en sciences infirmières et dans la promotion du bien-être des femmes, Deb soutient que la preuve de sa crédibilité et de son savoir-faire réside dans ses vergetures et ses rides du rire.

Presenter / Conférencière : Deb Gauldin RN, PMS, Raleigh, NC

13:15 - 13:30 Closing Remarks **Great Room C**

14:00 - 18:00 **Optional Wine Tour**



Poster Presentations / Présentations par affiches

P-01 Understanding caesarean deliveries: A choice for new mothers

Julia Wigmore BScN, RN; Cynthia Mannion PhD, RN; Graham Mc Caffrey PhD, RN

Presenter: Julia Wigmore, University of Calgary, Calgary, AB

Purpose: To explore new mothers' understanding of their choice of caesarean delivery in the absence of medical indication.

P-02 Changing with the times: An online prenatal and parent education program

Karon Foster BScN, MEd., R.N.; Greg Lubimiv B.S.W., M.S.W., C.A.C.P.T.S.

Presenter: Karon Foster, The Phoenix Centre for Children and Families, Pembroke, ON

Purpose: To share an innovative online prenatal and parent education program that has used evidence-based knowledge to educate expectant and new parents.

P-03 Growing into parenthood: An online prenatal and parenting program for young parents

Karon Foster BScN, MEd., R.N.; Greg Lubimiv B.S.W., M.S.W., C.A.C.P.T.S.

Presenter: Karon Foster, The Phoenix Centre for Children and Families, Pembroke, ON

Purpose: To share a new innovative online prenatal and parent education program for expectant youth and young parents.

P-04 Nurturing our young, reaping the rewards 5 years later...

Louise Glaude RN, BScN (H), SCM, PNC(C); Raylene MacLeod RN, BScN, IBCLC, PNC (C); Mary Agnes Beduz RN, MN, Ph D; Alison Gilmour RN, MN, PNC(C)

Presenters: Louise Glaude and Raylene Macleod, Mount Sinai Hospital, Toronto, ON

Purpose: By reviewing this innovative recruitment and retention strategy, we will highlight the process and success of this program.

P-05 Privacy and safety planning in women's health and perinatal populations

Melanie Basso RN, MSN, PNC(C); Alexxa Abi-Jaoude B.H.Sc., MPH

Presenter: Melanie Basso, BC Women's Hospital & Health Centre, Vancouver, BC

Purpose: To describe a collaborative process to optimize quality patient care for women with privacy and safety concerns.

P06 Early-pregnancy assessment unit - Providing safe, quality care outside the emergency room

Janine Jackson RN, BScN, MN; Myrna Henry RN, BScN, MN; Kirsi Mynittinen RN

Presenters: Janine Jackson and Myrna Henry, The Scarborough Hospital, Scarborough, ON

Purpose: The Early Pregnancy Assessment Unit provides safe, quality care to women with non-critical pregnancy complications before 13 weeks gestation by diverting them away from the emergency room to a specialty clinic.

P-07 No more life raft: One hospital's experience of closing their neonatal observation centre (nursery)

Sabrina Haas BSN, MScN, PNC(C); Anna Balenzano BScN; Angèle Robillard BScN, PNC(C); Melanie Sabbagh MScA

Presenters: Sabrina Haas and Anna Balenzano, The Royal Victoria Hospital (MUHC), Montreal, QC

Purpose: To share our experience with others of closing our neonatal observation centre (nursery).

P-08 Toward a quality prenatal decision-making process: Using the amniocentesis patient decision aid during genetic counselling

Neda Etemadi RN, MScN, PNC (c)

Presenter: Neda Etamadi, Mackenzie Health Hospital, Richmond Hill, ON

Purpose: This project aimed to strengthen prenatal genetic counselling at the Mackenzie Health Hospital Maternal Fetal Medicine (MFM) Clinic by supplementing the genetic counselling process with a Patient decision aid (Pt DA) to better prepare prospective parents in making an informed quality decision.

P-09 Strategies to support the implementation of a varied scope of nursing practice on a high-risk antenatal care unit

Glenda Carson PhD, RN, PNC(C), IBCLC; Renata Kolanko MN, RN; Linda Mason BScN, RN; Diane O'Reilly MHSM, BScN, RN, ARDMS

Presenters: Glenda Carson, Renata Kolanko and Linda Mason, IWK Health Centre, Halifax, NS

Purpose: To enhance understanding of creative approaches that are helpful in the facilitation of safe and effective perinatal care within a nursing team comprised of varied scopes of practice.

P-10 Quality counts postcards: Improving care for women and their families

Alida Bowman BScN, MSN

Presenter: Alida Bowman, Hamilton Health Sciences, Hamilton, ON

Purpose: To receive real-time feedback from women and their families about their hospital experience.

P-11 Collaboration to provide best practice breast feeding support from hospital to the community

Joan Hillier RN, BScN; Nicole Labrie RN, BScN, CCHN(C); Lynne Eyles RN

Presenters: Joan Hillier, Lynne Eyles, Trillium Health Partners - Credit Valley Hospital, Mississauga, ON and Nicole Labrie, Peel Public Health, Peel, ON

Purpose: Create seamless support for breastfeeding families in hospital and the community.

P-12 Nurses' perception of teaching and standardized communication of postpartum care

Carolyn Crowley RN, BScN; Ann Salvador RN, BScN, MPA

Presenter: Carolyn Crowley, Hôpital Montfort, Ottawa, ON

Purpose: Patient satisfaction data (from NRC Picker) from women delivering at a teaching community hospital was consistently showing that about 50% of them felt they did not receive enough information regarding postpartum care. Our objective was to evaluate the reasons for this perception and to develop tools to better equip nurses to provide more comprehensive postpartum teaching.

P-13 Post discharge phone calls: Getting real-time patient satisfaction results

Carolyn Crowley RN, BScN; Ann Salvador RN, BScN, MPA

Presenter: Carolyn Crowley, Hôpital Montfort, Ottawa, ON

Purpose: To describe the development of a strategy to capture real-time feedback from women after their discharge from the hospital, leading to immediate responses to patient satisfaction issues.

P-14 Women's perspectives of the fetal fibronectin testing process

Wendy Peterson RN, PhD; Ann Sprague PhD; Jessica Reszel RN, MScN; Mark Walker MD; Deshayne Fell PhD(c); Sherry Perkins MD; Sandy Dunn PhD; Moya Johnson RN

Presenter: Wendy Peterson, University of Ottawa, Ottawa, ON

Purpose: To describe the value of fetal fibronectin testing from the perspective of women with symptoms of preterm labour.



P-15 Fathers' support in Québec's integrated perinatal and early childhood services (SIPPE): A challenge for social workers and healthcare professionals

Kate St-Arneault RN, M.Sc.; Francine de Montigny RN, Ph.D.; Christine Gervais RN, Ph.D.(c)

Presenter: Pascale de Montigny Gauthier, Université du Québec en Outaouais, Gatineau, QC

Purpose: To explore social and healthcare workers' perceptions and beliefs about their professional practices towards fathers.

P-16 La place des pères dans les politiques publiques en périnatalité et petite enfance

Kate St-Arneault inf., M.Sc.; Francine de Montigny inf., Ph.D.; Christine Gervais inf., Ph.D.(c)

Conférencière : Pascale de Montigny Gauthier, Université du Québec en Outaouais, Gatineau, QC

But : Exposer le rôle spécifique des pères dans la santé et le développement des enfants et examiner l'espace qui leur est accordé dans les différentes politiques publiques de périnatalité et de petite enfance du Québec.

P-17 Creating Circles of Supports for New Parents and Preventing Post-Partum Depression

Presenter: Claire Kerr-Zlobin, Healthy Start, Healthy Future & Life With A Baby Program, Thornhill, ON

Purpose: To describe the importance of peer support in reducing social isolation and preventing Post-Partum Depression.

DON'T FORGET TO COMPLETE YOUR EXHIBITOR PASSPORT!

EXHIBITOR PASSPORT

Each of the exhibitors participating in our conference has one of the answers to the questions about Niagara Falls, CAPWHN and football. Complete all your answers by Friday afternoon and submit your passport at the registration desk to be eligible for the grand prize of a 2014 CAPWHN membership. Draw for the prize will take place at the Annual Business Meeting on Saturday morning.

INSTRUCTIONS

1. Obtain the answer to each of the questions from each of the exhibitors.
2. Write in the answer to each question and the name of the exhibitor.
3. When complete deposit in the box at the registration desk.

SAVE THE DATE!

CAPWHN 4th National Conference
October 23-25, 2014
Delta Regina
Regina, SK

NOTEZ À VOTRE AGENDA!

4^e Conférence nationale de CAPWHN
Du 23 au 25 octobre 2014
Hôtel Delta Regina
Regina, SK

GE Healthcare



A solution born from 22 years of experience

Centricity Perinatal[®] helps you deliver your best care to every mother and baby for quality outcomes from L&D, through the NICU or Nursery. Our industry-leading solution was created with critical user input from perinatal practitioners, so it works the way you do. With easy access to an unprecedented depth of patient information and improved transparency between providers, you'll spend less time documenting so you can focus more on the people who count. Contact your representative or learn more at www.gehealthcare.com



imagination at work

healthymagination

2013 Exhibitors / Exposants 2013

Advanced Surgi-Pharm

www.surgmed.com
Booth/Kiosque 29



Established in 1987, Advanced Surgi-Pharm provides a wide range of value-added products for Women's and Neonatal Health that includes Hysterosonography Catheters, Cervical Dilators, Fetal Blood Sampling Kits, PICC lines, Enteral Feeding Tubes and Infant Warming Products. Advanced Surgi-Pharm is a member of the Surgmed Group of companies that includes Imperial Surgical and Batrik Medical Manufacturing.

Établie depuis 1987, la compagnie Advanced-Surgi-Pharm propose une variété de produits à valeur ajoutée dédiés à la santé des femmes, ainsi qu'aux soins néonataux et qui comprend : cathéters pour la réalisation des hystérosographies, dilateurs cervicaux, trousse de prélèvements de sang fœtal, PICC lines, tubes d'alimentation entérale, ainsi qu'une gamme de produits chauffants pour nourrisson. Advanced Surgi-Pharm est un fier partenaire des compagnies du Groupe Surgmed, qui implique; Imperial Surgical et Batrik Medical Manufacturing.

Alberta Health Services Alberta Health Services

<http://www.albertahealthservices.ca/careers/>
Booth/Kiosque 10

Alberta Health Services (AHS) is one of the leading healthcare systems in Canada, responsible for the delivery of healthcare to more than 3.9 million Albertans. We offer programs and services at over 450 facilities throughout the Province, including hospitals, clinics, continuing care facilities, mental health facilities and community health sites.

AHS values the diversity of the people and communities we serve and is committed to attracting, engaging and developing a diverse and inclusive workforce. Working at AHS enables a better quality of life, not only for our staff, but for their families – there's no shortage of reasons to join our team.

For more information email careers@albertahealthservices.ca or search and apply for positions on our website.

AmniSure International LLC

www.amnisure.ca
Booth/Kiosque 18



AmniSure® (www.amnisure.com) is the first FDA-cleared and Health Canada approved rapid immunoassay that detects Rupture Of [fetal] Membranes (ROM), a major cause of pregnancy complications. It is the only ROM test that does NOT require speculum examination and is ~ 99% accurate. AmniSure® International LLC hopes to establish AmniSure® as a Gold-Standard test for ROM worldwide.

AmniSure® (www.amnisure.com) est le premier tests diagnostique approuvé par la FDA et Santé Canada qui détecte les ruptures de membranes fœtales (RMF), une cause majeure des complications pendant la grossesse. C'est le seul test de RMF qui ne nécessite pas examen au speculum et a ~ 99% de précision. AmniSure® International LLC espère établir l'AmniSure® comme le test standard pour les RMF dans le monde entier.

Arbonne

www.margmcfadyen.myarbonne.com
Booth/Kiosque 21



Arbonne is a 33+ year-old Swiss-formulated, health and wellness company. We have over 400 consumable products including premium skin care, personal care, aromatherapy, nutrition, cosmetics, etc. Arbonne products are current available in 4 countries: Canada (just 6 years and growing), the US, Australia, UK, with plans for global expansion.

Arbonne products are:

- Botanically-based and pH correct
- Vegan certified
- Never tested on animals
- Paraben free
- Formulated without mineral oil and petroleum based ingredients
- Formulated without formaldehyde donating preservatives, PABAs
- Formulated without artificial dyes or chemical fragrances
- Hypoallergenic
- Dermatologist, ophthalmologist and pediatrician tested.

Bio-Oil (Advanced Innovations Inc.)

www.bio-oil.com

Booth/Kiosque 6



Specialist skincare for: Scars, stretch marks, uneven skin tone, aging skin, dehydrated skin.

Soins de la peau spécialisés pour : cicatrices, vergetures, teint irrégulier, vieillissement de la peau, peau déshydratée.

BOMImed Inc.

www.bomimed.com/CanadaEnglish

Booth/Kiosque 1



BOMImed specializes in the manufacturing and distribution of airway management, anesthesia, critical care and warming therapy products. Since 1985 we have been dedicated to providing quality comprehensive solutions backed by trusted clinical expertise. Through our commitment to continued innovation, integrity and superior customer service we have firmly established ourselves as a leader in the health care industry.

Better Answers for Better Care!

BOMImed est une entreprise spécialisée dans la fabrication et la distribution de produits dans la gestion des voies aériennes pour l'anesthésie, les soins critiques et pour les produits de thermorégulation. Depuis 1985, nous nous sommes illustrés à promouvoir des solutions de qualités associés à notre excellente expertise clinique. Par notre engagement à continuer d'innover, notre intégrité et notre service à la clientèle supérieur, nous avons fermement établi notre réputation de chef de file dans l'industrie des soins de santé.

La Meilleure solution pour les meilleurs soins!

Canadian Hospital Specialties



www.chsltd.com

Booth/Kiosque 3

Canadian Hospital Specialties (CHS) is a leading national specialty distributor of medical, surgical and NICU supplies including the new Natus NatalCare LX Infant Incubator.

Canadian Hospital Specialties (CHS) est un chef de file national en distribution spécialisé de fournitures médicales, chirurgicales et Néonatalogie incluant le nouvel incubateur pour enfant Natus NatalCare LX.

Dräger Medical Canada



PLATINUM SPONSOR

www.draeger.com/CA

Booth/Kiosque 19/20



Dräger is a leading international company in the field of Neonatal Care. Dräger brings thermoregulation, respiratory support, jaundice management, vital sign monitoring, IT, neonatal transport and architectural systems together. With decades of neonatal experience, Dräger can support you in developing a thriving environment for your newborns and an efficient and effective place to work for your staff. Our worldwide one vision: Dräger. Technology for Life® is present in more than 190 countries. Dräger has approximately 12,000 employees worldwide. Please visit www.draeger.com for more information.

Chef de fil international en soins néonataux, la compagnie Dräger vous propose une expertise des plus polyvalentes : thermorégulation, soins respiratoires, prise en charge de l'ictère, surveillance des signes vitaux, transport néonatal, TI et systèmes architecturaux. Forte de sa vaste expérience, Dräger peut vous aider à créer un environnement sain et sécuritaire pour vos nouveau-nés et un milieu de travail efficace et productif pour votre personnel. Notre vision universelle, Dräger. La technologie pour la vie®, rayonne dans plus de 190 pays. Dräger compte environ 12 000 employés à l'échelle de la planète. Pour en savoir plus, consultez le www.draeger.com.

Fraser Health



<http://careers.fraserhealth.ca/>

Booth/Kiosque 7

Fraser Health serves 1.6 million people in 20 diverse communities from urban to rural in Metro Vancouver area. With a billion dollars of hospital infrastructure projects planned, there are unprecedented opportunities for Nursing and Health Science professionals with the opening of the Surrey Memorial Hospital Critical Care Tower in 2014.

GE Healthcare



SILVER SPONSOR

www.gehealthcare.com

Booth/Kiosque 23

GE Centricity® Perinatal helps clinicians improve patient safety in Labor & Delivery, Mother-Baby, and the NICU. With a regionally deployed solution across multiple institutions, we enhance workflow and help to drive informed, collaborative care across the perinatal continuum.



Scalable solutions allow you to start with a basic system, and move on to advanced functionality later as your needs change. Centricity® Perinatal provides a wide variety of inbound/ADT, lab, and outbound HL7 interfacing options to further increase the reach and value of interoperability with your existing hospital information system.

The GE Healthcare Centricity® suite of proven, advanced solutions spans the entire care spectrum – from independent physician practices, to academic medical centers, to large and complex integrated delivery networks. Our «healthymagination» vision invites the world to join us on our journey as we continuously develop innovations, which focus on reducing costs, increasing access and improving quality and efficiency.

Healthcare IT Re-imagined. Please visit GE Healthcare at booth 23 at the CAPWHN Conference in Niagara Falls.

Centricity® Perinatal de GE permet aux cliniciens d'améliorer la sécurité des patients dans les départements Travail et accouchement, Mère-bébé et dans l'unité néonatale des soins intensifs. Grâce à une solution déployée à l'échelle régionale dans plusieurs établissements, nous vous permettons d'accroître le flux de travail et d'assurer que des soins judicieux et collaboratifs sont prodigués dans l'ensemble du continuum périnatal.

Nos solutions évolutives vous permettent de commencer avec un système de base et de passer plus tard, à mesure que vos besoins changeront, à une fonctionnalité avancée. Centricity® Perinatal offre une grande variété d'options d'interface ADT entrante, laboratoire et HL7 sortante. Vous pourrez ainsi augmenter la portée et la valeur de l'interopérabilité de votre système d'information d'hôpital actuel.

La suite de solutions éprouvées et perfectionnées Centricity® de GE Santé couvre tout le spectre des soins, des cabinets privés aux grands et complexes réseaux intégrés de prestation de soins, en passant par les centres médicaux universitaires. Notre vision, intitulée « healthymagination », invite le reste du monde à nous rejoindre dans notre effort pour mettre continuellement au point des innovations axées sur la réduction des coûts, l'augmentation de l'accès et l'amélioration de la qualité et de l'efficacité.

Healthcare IT Re-imagined. Venez visiter GE Santé au kiosque n° 23

Hannah House

www.hannahhouse.ca
Booth/Kiosque 26



Safety, security, shelter, and support; changing the lives of TWO generations - mother and child.

Hannah House Maternity Home is a non-profit agency providing supported transitional housing to pregnant and parenting young women under the age of 21 in the Niagara Region. Our focus is on facilitating the transition from adolescence to adulthood and equipping young moms and moms-to-be for their future roles in the community.

Health Canada – Canada Vigilance

www.health.gc.ca
Booth/Kiosque 27



Health Canada Santé Canada

The Canada Vigilance Program is Health Canada's post-market surveillance program that collects and assesses reports of suspected adverse reactions to health products marketed in Canada. The Canada Vigilance Program is supported by seven Canada Vigilance Regional Offices who provide a regional point-of-contact for health professionals and consumers.

Le Programme Canada Vigilance est le programme de surveillance après la mise en marché de Santé Canada qui recueille et évalue les déclarations d'effets indésirables présumés associés aux produits commercialisés au Canada. Le Programme Canada Vigilance est soutenu par sept bureaux régionaux de Canada Vigilance qui offrent un point de service aux professionnels et aux consommateurs.

Health Nexus / Best Start Resource Centre

www.beststart.org
Booth/Kiosque 14



The Best Start Resource Centre supports service providers working on preconception health, prenatal health and early child development. We provide consultations, respond to inquiries, deliver training and professional development (e.g., webinars, workshops, conferences, online courses), supply you with evidence-based resources and keep you connected (e.g., e-bulletins, electronic networks).

Le Centre de ressources Meilleur départ vise à faciliter le travail des intervenants dans les domaines de la santé avant et pendant la grossesse et du développement de la petite enfance. Nous offrons des consultations, formation et perfectionnement professionnel (ex. webinaires, ateliers, conférences, apprentissage en ligne), nous répondons aux demandes, nous offrons des ressources fondées sur des données probantes et nous vous tenons au courant (ex. bulletins, réseaux).

Hill-Rom Canada

www.hill-rom.com/canada

Booth/Kiosque 24/25

Hill-Rom's comprehensive product and service offerings are used in hospitals, extended care facilities and home care settings to enhance patient safety and the quality of patient care. A leading provider of hospital beds and therapeutic surfaces, Hill-Rom's offering also includes stretchers, headwalls and workflow information technology solutions.

La gamme exhaustive de produits et services offerte par Hill-Rom est utilisée dans les hôpitaux, les centres de soins prolongés et à domicile, afin d'améliorer la sécurité des patients et la qualité des soins qui leur sont offerts. Chef de file dans la production de lits d'hôpital et de surfaces de traitement, Hill-Rom offre également des civières, des murs de tête et des solutions technologiques pour le suivi du déroulement du travail.

Inception Lifebank Cord Blood Program

www.inception.com

Booth/Kiosque 13



Inception Lifebank is Canada's largest and most experienced cord blood program. Partnered with Mount Sinai Hospital, Sunnybrook Health Sciences Centre and The Scarborough Hospital, Inception Lifebank specializes in preserving and saving your baby's cord blood so that the beneficial stem cells it provides are always available to your family for medical intervention should you need them.

Inception Lifebank est le programme de préservation du sang ombilical le plus important et le plus ancien au Canada. En partenariat avec l'hôpital Mount Sinai, Sunnybrook Health Sciences Centre et l'hôpital de Scarborough, Inception Lifebank est spécialisé dans la préservation et la conservation du sang ombilical de votre bébé afin que les cellules souches bénéfiques qu'il contient soient toujours à la disposition de votre famille au cas où une intervention médicale s'avérerait nécessaire.

Johnson & Johnson Inc.

PLATINUM SPONSOR

www.johnsonsbaby.com/index.do

Booth/Kiosque 8/15

Caring for the World.....one person at a time inspires and unites the people at the Johnson & Johnson Family of Companies. We embrace



research and science – bringing innovative ideas, products and services to advance the health and well-being of people. Employees of the Johnson & Johnson Family of Companies work with partners in health care to touch the lives of over a billion people every day, throughout the world.

Prendre soin de l'humanité... une personne à la fois, tel est le principe qui inspire et qui unit les employés de la Famille des compagnies Johnson & Johnson. Nous puisons dans le domaine de la recherche scientifique afin de mettre au point des idées novatrices, des produits et des services qui permettront d'améliorer la santé et le bien-être des humains. Les employés de la Famille des compagnies Johnson & Johnson collaborent avec des partenaires du secteur de la santé afin de toucher, au quotidien, la vie de plus d'un milliard d'individus à travers le monde.

Maquet-Dynamed

BRONZE SPONSOR

www.maquet-dynamed.com

Booth/Kiosque 16

MAQUET-DYNAMED represents the Maternal Infant Care division for GE and will be presenting the entire product spectrum for L&D and NICU including Corometrics: Maternal and Fetal Monitoring, Panda iRes neonatal Resuscitation warmer, Giraffe Shuttle transportation device, Standalone resuscitation unit (StAR), a hand held ultra sound (V Scan), Giraffe incubators and combination OmniBed for NICU and new Phototherapy treatment devices as well as specialty preemie products such as diapers, soothers and phototherapy eye-covers.

MAQUET-DYNAMED représente la division de soins aux nourrissons et aux mères de GE et proposera toute la gamme de produits pour les unités d'accouchement et de soins néonataux intensifs, dont les appareils de surveillance de la mère et du fœtus Corometrics, les appareils de réanimation néonatale Panda iRes, le Shuttle Giraffe pour le transport intrahospitalier, des incubateurs et une combinaison d'appareils OmniBed conçus pour l'unité de soins néonataux intensifs et la photothérapie.

McArthur Medical Sales Inc.

www.mcarthurmedical.com

Booth/Kiosque 11



McArthur Medical is proud to be a CAPWHN supporter, providing quality solutions for the following challenges: Developmentally supportive sleep and positioning, calming and soothing, baby care, jaundice management, respiratory care, monitoring and measurement, enteral safe feeding, arterial/venous access and fluid management.

McArthur Medical est fière de participer à la conférence CAPWHN, afin de vous offrir des solutions de qualité dans la résolution des défis suivants :

Le soutien dans le développement du sommeil et du positionnement, le réconfort et le soulagement, les soins du bébé, la gestion de la jaunisse, les soins respiratoires, la surveillance et la tempérance, l'alimentation entérale sécuritaire, l'accès artérielle / veineuse et la gestion des fluides.

Mothers Choice Products

www.motherschoiceproducts.com

Booth/Kiosque 5



Mothers Choice Products is a national distributor of mom and infant products including the WHO Code compliant breastfeeding company Ameda. Mothers Choice Products knows how much breastfeeding matters to moms and their babies and that is why we strive to educate and support the professional community. Mothers Choice Products is also a distributor of TENS products which provide natural labour pain relief and pelvic floor exercisers for optimal women's health.

Mothers Choice Products est un distributeur national de produits pour mamans et nourrissons, incluant la marque Ameda, manufacturier de produits d'allaitement se conformant au code de l'OMS. Mothers Choice Products connaît l'importance de tout ce qui a trait à l'allaitement pour les mamans et leurs bébés, et c'est pourquoi nous nous efforçons d'éduquer et de soutenir la communauté professionnelle. Mothers Choice Products est également le distributeur canadien des produits TENS qui offrent un soulagement naturel de la douleur liée à l'accouchement ainsi qu'un exercice du plancher pelvien favorisant une santé optimale chez la femme.

Northern Health

<http://careers.northernhealth.ca/>

Booth/Kiosque 17



Northern Health is responsible for the delivery of health care across Northern British Columbia, including acute care, mental health, public health, addictions, and home and community care services. Through the efforts of our dedicated staff and physicians, in partnership with communities and organizations, we provide exceptional health services for Northerners. Northern Health leads the way in promoting health and providing health services for Northern and rural populations.

Northern Health est chargée d'offrir des soins de santé dans toute la région nord de la Colombie-Britannique, dont des soins actifs, des soins de santé mentale, des services de santé publique, des soins contre la dépendance, ainsi que des soins communautaires et à domicile. Grâce aux efforts de notre personnel et de nos médecins dévoués, en partenariat avec les communautés et les organisations, nous offrons des

services de santé exceptionnels aux habitants de cette région. Northern Health est un chef de file de la promotion de la santé et de l'offre de services de santé aux populations rurales et du Nord.

Philips Healthcare

PHILIPS

www.philips.com/healthcare

Booth/Kiosque 12

Philips is dedicated to creating the future of healthcare and saving lives. We develop innovative solutions across the continuum of care in partnership with clinicians and our customers to improve patient outcomes, provide better value, and expand access to care. www.philips.com/healthcare

Philips se consacre à créer l'avenir des soins de santé et à sauver des vies. Nous développons des solutions innovantes dans le continuum de soins en collaboration avec des cliniciens et nos clients pour améliorer les résultats pour nos patients, accroître la rentabilité et élargir l'accès aux soins. www.philips.com/healthcare.

Progenics Cord Blood Cryobank Inc.

www.progenicscryobank.com

Booth/Kiosque 22



Saving cord blood is an important option for families because: It is rich in hematopoietic (blood-forming) stem cells, which are immature cells that can divide with an unlimited capacity to generate new blood cells. It also contains valuable, therapeutic stem cells and ongoing research on cord blood has shown promising outcomes in repairing damaged tissues and organs.

Bone marrow transplantation is a definitive or adjuvant therapy for patients with otherwise life-threatening diseases; however finding a suitable bone marrow donor in a timely manner when a patient requires a transplant can be extremely difficult. Cord blood contains the same types of stem cells as those found in bone marrow and are a useful alternative that can save the lives of patients. Cord blood stem cells from a family member have proven to be more successful for transplantation than those from an unrelated donor.

Préserver le sang ombilical est une option importante pour les familles par ce que :

Le sang ombilical contient des cellules souches hématopoïétiques (précurseurs de cellules sanguines) qui sont des cellules immatures dotées d'une capacité infinie de division et de renouvellement. Grâce aux avancements des recherches sur le sang ombilical, il deviendra possible de traiter, dans le futur, un plus grand nombre de maladies notamment dans le cadre de la médecine régénératrice, afin de réparer les tissus et organes endommagés. Il peut être extrêmement difficile de trouver un donneur de moelle osseuse compatible lorsqu'un patient nécessite une greffe. Or, le sang ombilical contient les mêmes types de cellules souches

que celles qui se retrouvent dans la moelle osseuse. Il est donc possible d'utiliser les cellules du sang ombilical au lieu de celles de la moelle osseuse pour sauver la vie des patients. De plus, les cellules souches ombilicales d'un membre de la famille sont beaucoup plus favorables à la transplantation que celles d'un donneur n'ayant aucun lien de parenté.


Provincial Health Services Authority

<http://careers.phsa.ca>
Booth/Kiosque 28



The Provincial Health Services Authority (PHSA) plans, manages and evaluates selected specialty and province-wide health care services across BC, working with the five geographic health authorities to deliver province-wide solutions improving the health of British Columbians. BC Women's Hospital (BCW) is an agency of the PHSA. BCW is the only facility in British Columbia devoted primarily to the health of women, newborns and families. It provides a broad range of specialized women's health services that address the health needs of women of all ages and backgrounds. BC Women's is one of the largest maternity facilities in Canada, with over 7,000 births a year! As an academic health centre BCW's mandate includes providing strong leadership in research and the education and professional development of health care professionals in areas related to the health of the populations we serve. Discover a Nursing career with an organization that touches every facet of specialty health care across the province! Apply online at <http://careers.phsa.ca>

Save the Mothers International / Change Her World


www.savethemothers.org
Booth/Kiosque 4


www.changeherworld.ca

Save the Mothers (STM) is an international organization that equips professionals (from a wide array of disciplines) in developing countries to improve the health of mothers and babies. Through their specific vocations, graduates of our Master in Public Health Leadership program become influencers for positive societal change, working to overcome preventable maternal death. STM is recognized as a groundbreaking program because of how it links leaders from various disciplines to form a network for lasting societal change. It is built on the truth that maternal mortality is not just a medical issue, but a societal problem.

CHANGE HER WORLD, a Canadian Registered charity co-founded in 2010 by Linda Willis (a special education teacher) and Carol Hamilton (Parent and Infant nurse consultant and ordained minister), is dedicated to removing the barriers that prevent girls and women from being educated in the developing world. Currently girls and women in the remote region of Northern Malawi, Africa receive

support including payment of school fees, provisions such as school uniforms, shoes, socks, school supplies, mosquito nets, solar lamps, underwear, clothing, and blankets. Larger community projects are also vital to this work including the establishment of a medical scheme to provide health care, both emergency and preventative, to the girls and their families, cooking pots for many schools, repairing of girls' hostels, provision of bicycles for those walking long distances, and building of female teachers homes. Visit www.changeherworld.ca to find out more about how you can be a part of this making a difference in the life of a girl. If you want to change the world, start with her!

Spacelabs Healthcare (Canada) Inc.

www.spacelabshealthcare.com
Booth/Kiosque 2



Spacelabs Healthcare is featuring the OBIX Perinatal Data System and the Spacelabs Encore Fetal Monitor at this year's show. The OBIX system is an open systems product that works with the fetal monitors of your choice.

Stryker

www.stryker.com
Booth/Kiosque 9



Stryker Medical is an industry leading manufacturer of medical patient handling equipment for hospitals and emergency and rescue operations. We are dedicated to superior patient care and caregiver safety. Stryker Medical offers a broad portfolio of hospital beds, support surfaces, stretchers and hospital room furniture that feature BackSmart technology — ergonomic-based design that helps to reduce the risk of caregiver injury and improve patient outcomes. Stryker's mobility solutions, support surface therapies, bed monitoring and Connected Hospital technologies set new standards for successful patient care.

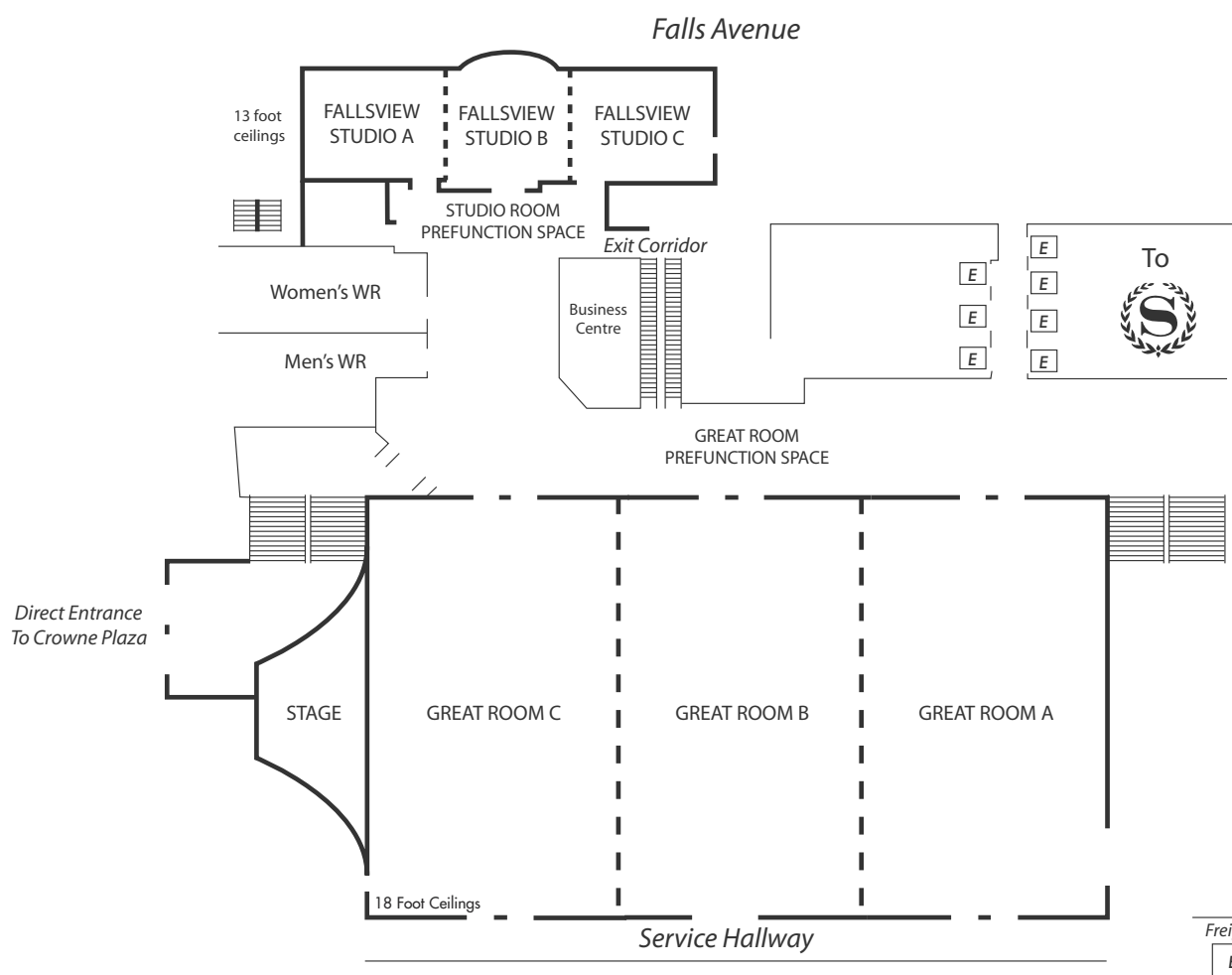
Stryker Médical est une compagnie manufacturière de produits médicaux et chirurgicaux spécialisés servant entre autre en salle d'opération, pour le transport des patients dans les réseaux de santé hospitalier et en soins paramédicaux. Nous sommes dédiés aux soins aux patients afin d'assurer une sécurité supérieure aux intervenants impliqués à les prodiguer. Stryker Médical propose une large gamme de lits d'hôpitaux, de surfaces d'appui, de civières et de meubles de chambre d'hôpital qui intègrent la technologie ``BackSmart`` - basée sur une conception ergonomique qui aide à réduire le risque de blessure des intervenants tout en aidant à améliorer la santé des patients. Les solutions de mobilité, les surfaces thérapeutiques, la technologie de détection de sortie du lit et les technologies ``Connected Hospital`` établissent de nouvelles normes en matière de soins aux patients avec succès.



Floor Plan / Plan de l'étage

3rd level - Conference Center


Sheraton on the Falls
HOTEL & CONFERENCE CENTRE

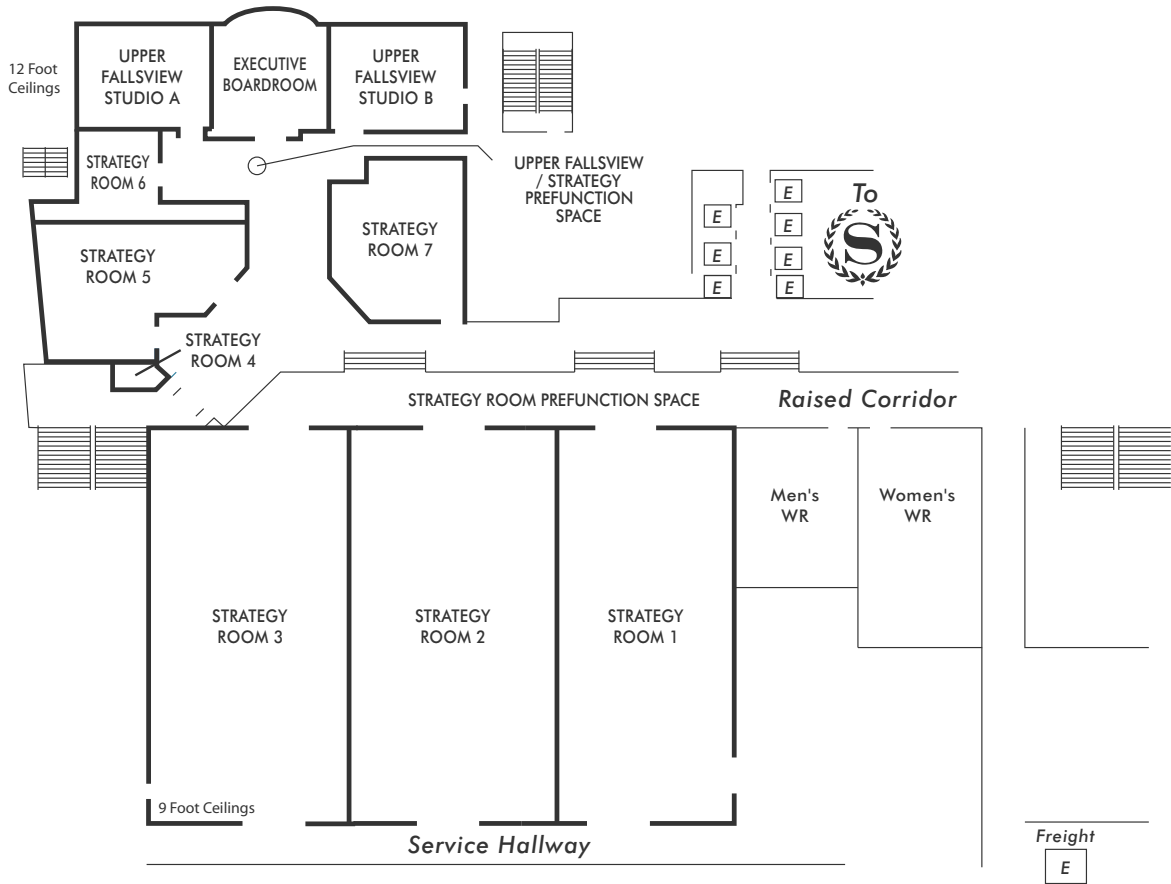




Floor Plan / Plan de l'étage

5th level - Conference Center


Sheraton on the Falls
HOTEL & CONFERENCE CENTRE





Johnson's®

The mark of trust.

Since 1890, JOHNSON'S® Brand has been helping mothers care for their babies with products built on pioneering research and rigorous science that continues today. We have worked hard to raise the standards of infant skin care. That's why moms, nurses, and paediatricians continue to trust our mild, gentle, effective formulas. And why you can continue to recommend JOHNSON'S® baby products with confidence. It's a trust we'll always work to keep.

Please visit booth No. 15 to learn more about JOHNSON'S® latest scientific research.

© Johnson & Johnson Inc. 2013



Johnson's®

Earning trust with every bottle.



www.babyfirst.com

A neonatal community for
clinicians & parents of premature babies.

Comprehensive neonatal education for clinicians along
with support and education for parents.