

# 2015 | 2016 Annual Report

“Creating Positive Change in the Health of All British Columbians.”



COVER PHOTO COURTESY OF WENDY BOWLES.

NPS AT FRASER HEALTH. THESE NPS WERE AT A CME. PHOTO WAS TAKEN AT JIM PATTISON OUTPATIENT SURGICAL CARE CENTER (JPOCSC).

FROM LEFT TO RIGHT: THERESA SABISTON NP(F) PRIMARY CARE, VICTORIA STAFFORD NP(F), MAXINE WRIGHT, MATERNAL CARE, MICHELLE AMBROSE NP(F) ABORIGINAL HEALTH PRIMARY CARE, ASHLEY MARTENS NP(F) MENTAL HEALTH PRIMARY CARE, MIKA NANOUCHE N(F) MENTAL HEALTH PRIMARY CARE, ELIZABETH LOFTS NP(F) PRIMARY CARE.

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WORKING TOGETHER TO PROVIDE THE BEST CARE TO PATIENTS IN VCH. PHOTO TAKEN AT THREE BRIDGES PRIMARY CARE.

LEFT TO RIGHT: IONA ELGABRY RN, MICHELLE SIMS NP, TANIA CULHAM MD, DONNA NICHOLSON NP, NESA TOUSI RN, FRASER NORRIE, MD.

# President's Message

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Submitted by: Kathleen Fyvie, BCNPA President 2015/16.

The annual report is an opportunity to reflect on our work of the past year, and acknowledge our successes and challenges as we consider priorities for planning the goals of the coming year.

2015-16 was a year of significant learning and relationship-building within the Board, and with stakeholders. We began the year with many new faces on the Board and varying levels of experience, however, the commitment level was high and there was a keen interest to dive in and identify the areas to focus on.

At our strategic planning retreat in August 2015, facilitator Debbie Hultgren maintained structure and focus throughout the day, and produced a summary document that built on the five year plan developed in 2011 for 2012-2017.

The key areas the Board identified included:

- Membership numbers.
- Committees (number and structure).
- Communication (internal and external, including website).
- Stakeholder relationships.
- Development of an Executive Director role.
- Finances.

Collectively, we have streamlined the committees to more effectively meet the needs of the association.

The website has had considerable work done on it within the structure of the budget to clean up important functions such as membership renewal and conference registration.

Our relationships with our key stakeholders - CRNBC, Ministry of Health, BC Coalition of Nursing Associations, and Health Authorities -continue to grow and evolve.

The role of an executive director is also being piloted.

Finances have improved with the implementation of a lean budget and additional structured policies and guidelines.

I want to acknowledge the exceptional work done by the enthusiastic individuals who volunteered for the committees. Thank you for your tremendous contributions over the past year. Your hard work and support ensure the sustainability of BCNPA as an autonomous and independent professional association for BC's NPs.



*Photo courtesy of Kathleen Fyvie.*

As healthcare needs become greater and more complex, and associated costs escalate, it is imperative for NPs to provide assistance and guidance to stakeholders in their efforts to effectively utilize NPs.

BCNPA is a recognized source of NP expertise for stakeholders, and an action-oriented advocacy group for innovative care models to meet the care needs of British Columbians.

Finally, thank you to all of our members. Creativity and courage are needed to support innovation in meeting the growing healthcare needs of BC's citizens. NPs provide crucial services in a variety of settings, and have proven to be an integral resource in planning and delivering care.

BCNPA represents NPs as key providers who can and do lead in transformational healthcare delivery. Our message and diligent work is supported by you, our visionary members, and we thank you all.

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*Creativity and courage are needed to support innovation in meeting the growing healthcare needs of BC's citizens.*

*NPs provide crucial services in a variety of settings, and have proven to be an integral resource in planning and delivering care.*

”

## BCNPA Member Profile: Tammy Campbell



I'm a family nurse practitioner on Hornby Island. I completed the NP program at Athabasca University in 2012 and started my position on Hornby in December 2013. Prior to becoming an NP, I worked in various areas and specialties as a RN (both in Canada and the US), including ER, ICU, primary care, chronic disease management and teaching in the BSN program at VIU (in Nanaimo).

Hornby Island is home to approximately 1,000 people, ranging from seniors (about 27% of the population) to families and small children. In the summer months we experience a bit of an explosion in the population because of our beautiful beaches, hiking and biking trails...not to mention the world-class artisans that call Hornby home.

As a primary care NP, I am able to practice to my full scope and provide continuity to Island residents throughout the year. My practice ranges from chronic disease management to maternal care.

I see episodic visits throughout the year, particularly in the summer when we tend to have a multitude of visitors who injure themselves in various ways! I recently completed the six-week Chronic Disease Self-Management Workshop with several residents; it was a great success and allowed me to connect with people outside of the clinical area. The Hornby Island Medical clinic is staffed by a full time GP position (shared by two physicians), three office assistants, and me.

I am the first NP to work on Hornby Island, and though there have been some growing pains, integration of the role has been very successful. The community has embraced the NP role. They have also welcomed, with open arms, my daughter and me into the community. The Hornby community is very vibrant and close-knit. People here really do care about each other, and it is reflected in the various community resources that volunteers provide for people of all ages.

Becoming an NP is truly the best direction I have taken with my career so far. The autonomy and individualized care are pieces of the puzzle that I always felt were missing in my career as an acute care RN.

I have formed very meaningful relationships with so many of my patients. I see how working together encourages their sense of independence and confidence, and improves their outcomes. I encourage them to ask questions and participate in decisions around their health care.

I believe that, because of these attributes, the NP role will continue to flourish on Hornby Island.

# About BCNPA

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## Who We Are

BCNPA is an independent, non-profit professional organization that is nearly 100% run by nurse practitioner (NP) volunteers.

## What We Do

We are the voice of BC NPs. We represent the unique perspectives and needs of NPs and their practice in the province's health and social policy system.

As an organization, we also:

- Provide expertise in how to integrate the NP perspective and practice into:
  - The broader healthcare system in BC.
  - Current models of care.
  - Current models of practice.
  - Health system planning.
  - Multi and interdisciplinary healthcare teams.
- Provide expertise in how to maximize the NP role to improve health outcomes.
- Promote the perspective of NPs as healthcare providers who:
  - Diagnose health conditions.
  - Treat health concerns.
  - Prescribe treatment.
  - Prescribe medications.
- Work autonomously in acute, primary, and residential care environments.
- Clarify the differences between NPs and other nursing professions.
- Collaborate with regulators to address barriers to practice, and improve healthcare delivery to British Columbians.
- Work with other nursing associations to create a unified nursing voice across the continuum of patient care.



*We are an independent, non-profit professional organization that is nearly 100% run by NP volunteers.*



## BCNPA and the Coalition of Nursing Associations

A unified voice among nursing associations to coordinate and collaborate on common issues affecting the nursing community and the health of British Columbians.



BCNPA continues to independently represent the unique perspectives and needs of BC NPs. We also value working collaboratively with other nursing organizations. (Note: All BC RNs and NPs are members of ARNBC.)

NPs carry a protected title and are registered with the CRNBC as a distinct class of healthcare professionals.

BCNPA advocates the integration of NPs into BC's health system to support the continuum of patient care.

The majority of NPs in BC believe an independent voice for NPs is a necessity. BCNPA also recognizes the value of having a coordinated nursing voice on health and social policy issues at the provincial and federal levels.

As a Coalition member, we actively participate in Coalition meetings and activities, while striving to represent the voice and role of BC NPs in health care. This perspective includes insight into:

- Rural and remote practice.
- Primary health.
- Residential care community practice.
- Acute care settings.

## What are Nurse Practitioners and What Do We Do?

In British Columbia, NPs have Master's Degrees in Nursing, and advanced training in the areas of diagnosis, treatment, and prescription. Some NPs have also earned Doctorate Degrees.

BC NPs are also required to complete annual licensing requirements. NPs are registered with the College of Registered Nurses of BC (CRNBC), and credentialed by the health authorities.

NPs take a holistic view on health that includes the patient's physical, emotional, and social well-being.

The BC government enacted legislation in 2005, granting NPs license to practice autonomously. In accordance to federal, provincial, and territorial legislation and policy, NPs are able to:

- Provide comprehensive health assessments and perform check-ups.
- Diagnose health conditions.
- Treat and manage acute and chronic illness.
- Treat and manage simple and complex health issues.
- Order and interpret screening and diagnostic tests.
- Order procedures.
- Prescribe treatment and medications.
- Refer clients to other healthcare professionals and specialists.
- Treat, transfer, and may discharge in-patients, and community out-patients from hospitals.
- Provide counselling and education.

All BC NPs are licensed and regulated by CRNBC.

NPs also carry liability insurance administered by the Canadian Nurse Protective Society (CNPS). (BC NP insurance is equal to the insurance physicians carry.)



*NPs take a holistic view on health that includes the patient's physical, emotional, and social well-being.*



## Where Nurse Practitioners Work in BC

BC has over 300 practicing NPs working independently and in collaboration with other health professionals. (Source: CRNBC 2014/15 Annual Report). You will find BC NPs in a number of rural and urban areas, including:

- Areas with socially vulnerable populations (e.g. HIV/AIDS, addictions).
- Community health centres.
- Family health teams.
- First Nations health clinics.
- Home healthcare agencies.
- Hospitals, including emergency departments, acute care, specialty medicine, and surgical care.
- Immigrant health clinics.
- Long-term care facilities.
- Mental health services.
- NP-led clinics.
- Nursing stations.
- Primary care clinics and health teams.
- Primary care under a health authority.
- Programs for the frail and elderly.
- Rehabilitation facilities.
- Schools and workplaces.
- Specialty clinics.

### BCNPA Member Profile: Lisa Creelman

Photo courtesy of Lisa Creelman.



I am a family nurse practitioner working in Mackenzie, BC.

In 2015, I graduated with my Masters in Science in Nursing: Family Nurse Practitioner Stream through the University of Northern British Columbia.

Through many internships, I was fortunate enough to experience caring for and living as a part of various northern rural communities.

I enjoyed my experiences so much that my family and I relocated to Mackenzie, BC.

Working within Mackenzie has been a great experience.

I am well supported by my physician colleagues as well as the community itself. Everyone has been most welcoming. Within the health clinic, I provide primary care across a lifespan with a special interest in women's health, prenatal and newborn care. Every day presents with new challenges and learning opportunities.

# Our Vision for NPs in BC

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NPs practice autonomously and collaboratively to provide healthcare services that contribute to the health and well-being of British Columbians. NPs practice in diverse settings, improving access to health care by contributing to a system that is responsive to the needs of all in the province.

# Our Mission

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We support and advance the professional interests of BC NPs by promoting a social, economic, and political climate in which NPs can provide accessible, efficient and effective health care that meets the highest professional standards and scope of practice.

# Our Values

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As BCNPA members, we value:

- Honesty, transparency, and open dialogue.
- Respect and professionalism.
- Relationships, collaboration and inclusivity.
- Integrity and trust.
- Innovation and diversity.
- Holistic determinants of health.
- Evidence based approaches.
- Leadership.
- Sustainability.

GO, NP AWARENESS, GO!

BCNPA STUDENT REP MICHAEL GARTNER COMPLETES THE SCENIC, YET GRUELING 21.1KM VANCOUVER INTERNATIONAL HALF MARATHON THROUGH BEAUTIFUL DOWNTOWN VANCOUVER ON MAY 1, 2016 TO RAISE AWARENESS OF THE IMPORTANCE OF NPs IN BC'S HEALTH SYSTEM.

"I MADE SOME REALLY NICE FRIENDS, INCLUDING A LOVELY LADY FROM 'TEAM DIABETES'. WE ENDED UP ROAMING THE FINISH LINE AREA TOGETHER PREACHING ABOUT DIABETES AND NP AWARENESS.

DEFINITELY WAS A FUN DAY! BUT, NOW, I NEED TO GET BACK TO STUDYING FOR THE AANP AND OSCE EXAM!"



*Photo courtesy of Michael Gartner.*

# Strategic Priority Areas for 2015/16

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## Membership

Membership is one of the primary streams of revenue. A higher number of members also facilitate succession planning: the more members, the more help also becomes available for projects and initiatives. Larger membership numbers are also important in demonstrating we have “power in numbers” and credibility in health circles.

## Committees

In 2015, there were six committees that supported the organization:

1. Conference committee.
2. Membership committee.
3. Communications committee.
4. Professional development committee.
5. Nominations committee.
6. Student committee.

There was a desire to consolidate the number of committees to more effectively resource projects.

The number of committees was reduced to five:

1. Conference committee.
2. Membership committee.
3. Nominations committee.
4. Communications committee.
5. Past-presidents’ committee.

Executive roles were also assigned to each committee. These roles act as liaisons between the committees and the board.

## Communications

The need for a single, robust communications policy and strategy for the organization was identified at the Board’s summer retreat.

The communication strategy is developed once the strategic plan is established. Each priority and project identified by the organization will have communication implications – internal and/or external.

The website, a key tool for enabling our communication efforts, is also not functioning in a way that best serves the organization. Functionally, BCNPA wanted the website to:

1. Facilitate membership registration and payment.
2. Help us generate additional revenue through the posting of ads.
3. Act as a source of quality content for members and the general public when they need it.

## Executive Director Role

The board has had ongoing discussions about adding an executive director role to the leadership team for quite some time. The role itself would provide continuity during leadership changeovers and oversee the operations of the organization. The executive director would become a member of the Board.

Lorine Scott, past-president and long-time BCNPA member, has offered to volunteer her time for two years to work with the board, BCNPA administrative assistant Brenda Ingram, and the organization to produce a role description for a part-time executive director that may be filled upon the end of her contract, or when appropriate funding becomes available.

Once a finalized version of the executive director role description is produced, the Board will be in a better position to discuss how to more formally integrate the role.

## Relationships

The 2014/2015 year saw BCNPA forge new relationships with a number of external stakeholder groups, such as ARNBC and the BC Nurses' Coalition. We also saw a stronger relationship with the Ministry of Health, and the College of Registered Nurses of BC.

By being involved with more of these kinds of stakeholder groups, there was a key opportunity to provide input into the governance structure of new teams, and articulate BCNPA's role and position on key topics.

The Board recognized that key messages must be prepared for all future stakeholder meetings to ensure the BCNPA voice is consistent, our position clear, and our mandate understood.



MEMBERS OF THE REGIONAL DEPARTMENT OF NPs (RDNPs) AND WAS TAKEN AT SURREY CENTRAL CITY AT A DEPARTMENT MEETING. NPs IN FRASER HEALTH WORK ACROSS MANY AREAS INCLUDING, ACUTE, SPECIALTY, PRIMARY, AND RESIDENTIAL CARE.

NPs ARE PART OF THE MEDICAL STAFF GROUP, AND HAVE THEIR OWN DEPARTMENT OF NPs, INCLUDING A REGIONAL DEPARTMENT HEAD (RDH), AND A MEDICAL QUALITY COMMITTEE (RDMQC). OUR NUMBERS CONTINUE TO GROW WITH A CURRENT GROUP OF APPROXIMATELY 75. WE HAVE AN NP LEADER IN ADDITION TO OUR RDH. AND OUR LEADERSHIP STRUCTURE ALSO CONTINUES TO EVOLVE AND GROW.

*Photo courtesy of Wendy Bowles.*

# Milestones

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Celebrating 10+ years as an association.

Member of BC's Coalition of Nursing Associations.

Ongoing dialogue with Ministry of Health Services.

Key player at major health meetings with government and health agencies.

Liability insurance covered by CNPS, which defends Canada's NPs and nurses.

Continuing to bring NPs together through conference and campaigns.

Relaunch of the BCNPA member newsletter.

Active participation in NP CoPs in all Health Authorities.

Capacity attendance at 2016 Conference.

Restructured working committees to link volunteers to the Board.

First year with a Nominations and Past-Presidents' Committees in place.

Developed and piloted executive director role.

# Financial Report

Submitted by: Karen Sims, BCNPA Treasurer 2015/16.

BCNPA's financial records are maintained in accordance with accounting standards for non-soliciting Canadian Nonprofit Society with less \$1 million in revenue. Loen and Company Certified General Accountants prepared year-end financial statements for the 2015 fiscal year beginning January 1, 2015 to December 31, 2015, and assisted in the 2015 T2 corporation income tax return, GST preparation and T4 preparation and filing.

As a reminder, in the previous fiscal period, the decision was made to dissolve the restricted fund and transfer the balance to the operating fund to cover anticipated operating expenses for 2015. At the same time, many cost cutting attempts were made, including:

- The reduction of executive travel costs.
- The reduction in telecommunications costs.
- Attempts to increase sponsorship revenue at the 2015 conference.

Although revenues did increase for the annual conference last year, the total expenses needed to run the society were still greater than the total revenues received. Venue and catering (including the conference, ARNBC meetings and BC Nurses coalition meetings) and consulting fees were a large expense in 2015.

Moving forward for 2016, we do have a balanced budget with an anticipated small increase in revenue and efforts to decrease expenses to guide our operations.

## 2015/16 Financial Highlights

- Canadian Revenue Agency (CRA) formally approved and confirmed the change to our fiscal year to reflect the calendar year (January 1- December 31). This process was started in 2013. This has simplified our bookkeeping processes by spacing out time between registration renewal, fiscal year end, and conference registration.
- Creation and board approval of a financial policy to ensure there is a clear and complete financial management process – from approval, through delivery to final payment. This policy will not only prevent problems, but also enhance efficiency.
- Creation and board approval of an expense reimbursement policy.
- Completion of CRA GST audit for the period from April 1, 2012 to December 31, 2013.
- Revision of accounts receivable (A/R) process and reconciliation: An allowance for doubtful accounts was created this year due several accounts being outstanding for over 365 days. The majority of these accounts were for website postings, or GST on conference sponsorship. The amount totaled \$916.00. BCNPA did a full write off and deleted the balance from the A/R aged listings. Going forward, BCNPA has an improved A/R process.
- Web posting continues to generate significant revenue for BCNPA. This is in no doubt due to the online advertising policy drafted by the board in 2014 with the goal of enhancing opportunities for revenue generation in 2015-16.

# Committee Reports

## Membership Committee

--Submitted by: Elizabeth Mulvaney, Membership Committee Chair 2015/2016.

This year the Membership Committee has focused on strategies to increase the number of BCNPA members. We have targeted new members especially student NPs, returning members, and lapsed members.

We have worked to disseminate information emphasizing the value of BCNPA membership and highlighted the important work they do.

The themes have included there being strength in numbers and having an organization that is run by and advocates for nurse practitioners only.

We are also working on creating three NP of the year awards to be presented at the annual conference starting next year.

**Membership Committee Members:** Elizabeth Mulvaney (Chair), Diane Middagh, Lauren Irving.

**Executive Liaison:** Michael Gartner, BCNPA Student Rep 2015/16.

### BCNPA Member Profile: Annaliese Hasler



*Photo courtesy of Annaliese Hasler.*

I'm a Family NP in Vancouver Coastal Health, and provide outreach Women's and Youth Health primary care services on the Sunshine Coast. I graduated from the University of British Columbia in 2012, and have been practicing for the past four years.

I've been an active BCNPA member since 2010, participating on the board as a student representative, the strategic directions committee, communications committee, and am now one of the newest additions to the BCNPA newsletter editorial team. I feel BCNPA has provided me with opportunities to be involved in the shaping and growing of the NP role in the province.

The motivation behind obtaining an NP degree was to be able to provide access to comprehensive, compassionate health care for women, the elderly and First Nations people. I'm pleased to have found fulfilling work at such an early stage in my NP career!

## Conference Committee

--Submitted by: Louann Janicki, and Karen Irving Conference Committee Co-Chairs 2015/2016.

The annual BCNPA conference is the association's hallmark event. Aside from membership, the conference is the only fundraising event for the organization.

The theme for the 2015/16 Conference was *Opportunities: Leadership in Action*.

The committee's main goals were to:

- Have at least 140 people register for this year's conference.
- Develop a program that is well-rounded, and value-add for participants.
- Hold an event that was memorable.

At the time this report was written, the number of registrants has exceeded our goal, and we are nearing capacity. We will have to close registration due to the higher than anticipated numbers of registrants. We are also pleased to share that tickets to the Gala event are nearly sold out.

We feel the conference program is well-rounded, and the venue for the conference and gala, top-notch.

As a result of the team's cumulative efforts, we expect this year's conference to generate a budget surplus.

The main challenge for this team is time. Planning an event of this size and scale is a huge commitment, and produces quite a heavy workload for the committee members. Outsourcing the event registration to Venue West was money well spent: this company provided an off-the-shelf registration technology that was easy to use, bug-free, and produced the data we needed to track revenue, registration numbers, and registrant details.

Moving forward, we certainly recommend the current and past committee chairs work together to share lessons on what worked and did not, and to have the past chair mentor the new chair.

We also recommend creating a list of duties and time commitment required for the role for people thinking about joining the team: we want to ensure members know what they are signing up for!

Finally, we recommend using the Venue West technology for registration in the future, and actively engaging BCNPA's executive assistant Brenda Ingram as a member of this committee – she is not only wonderful, but a great help!

**Conference Committee Members:** Louann Janicki (Co-chair), Karen Irving (Co-chair), Brenda Ingram, Annaliese Hasler, Celia Evanson, Dana Jones, Denise Tarlier, Kim Hayter, Julia Walker, Nancy Wright, Pamela Klassen, Wendy Bowles, Colleen Regehr, Deborah Lewis.

**Executive Liaisons:** Lori Verigin, BCNPA Secretary 2015/16, Janice Brown, BCNPA Regional Director – Island 2015/16.

## Communications Committee

--Submitted by: Minna Miller, Communications Committee Chair 2015/2016.

The current communications committee met initially in December 2015, and formally commenced work in January 2016. The committee accomplished much in a short amount of time. As of May 2015, the projects completed to date include:

- Conducting an online survey to benchmark the information needs and preferences of the current membership: Survey results were used to inform the Strategic Communications Plan, the Communications Policy, and the direction of the member newsletter.
- Assisting with the completion of the BCNPA Strategic Communications Plan: The communications plan aligns with the main focus areas defined in the Association's Strategic Plan.
- Developing a comprehensive Communications Policy: This single communication policy guides all communication and information sharing moving forward. A robust policy ensures consistency in approach, messaging, and resourcing.
- Relaunching the BCNPA Member Newsletter: With the appointment of an Editor and an editorial team, the Committee also put forth a newsletter template, a production timeline, and content outline for each issue. The intent is to provide as much upfront support to this new team as possible, and to ensure that the member newsletter maintains its new, quarterly distribution frequency.
- Developing process map to guide the work of the committee: This process includes ensuring we are intentional about doing the appropriate research and analysis of the project, being proactive with the planning and execution of activities, and involving the right people in the development and approvals of materials.
- Developing a project plan and time line for key communication projects: This project plan approach ensured that any interdependencies with other projects and teams were addressed, and we weren't taking on more than we should as volunteers.
- Producing this year's annual report.

One of our biggest obstacles we had to overcome was the absence of a formalized communications committee from the time period beginning in June to November 2015, which made knowledge transfer and project handovers from the previous year a challenge. A major benefit was the inclusion of a contracted communications expert, Debbie Hultgren from Links Communications Solutions, to support and assist the committee on priority projects.

Moving forward, we're looking forward to the new projects we have planned in order to establish sound communication processes to facilitate honest, timely, and transparent information sharing, and continue supporting the association's larger strategic priorities.

**Communications Committee Members:** Minna Miller (Chair), Gwyneth McIntosh, Tamera Stilwell, David Marceniuk, Teresa Smith, Camara Van Breemen, Lorine Scott.

**Executive Liaisons:** Karen Sims, BCNPA Treasurer 2015/16; Janice Brown, BCNPA Regional Director – Island 2015/16.

## Web Operations Team

--Submitted by: Karen Sims, BCNPA Treasurer, Communications Committee Executive Liaison, Web Operations Team Chair 2015/16.

The Web Operations, or Web Ops, team is a subcommittee of the larger communications committee. The team's mandate is to develop and maintain the BCNPA website in order to support the organization's operational and communication needs. Our team focuses on technical functionality, rather than content. (I can hear you all groaning as we have been technically challenged for the past couple of years.)

In short, this year we tried to fix what was broken and not to break anything else in the process. While considering cost containment, the work this year focused on urgent fixes and upgrades:

- Revision of the long tedious membership registration form.
- Improving the online security of the credit card number display function.
- Improving the look and content of payment receipts.
- Updating the online conference pages and sponsorship payment platform for 2016.
- Improving website communication for situations such as mistyped credit card numbers and attempts at duplicate membership registration.
- Adding membership status field to membership profile.

And finally, with the assistance of many members who endured a lot of trouble registering for, or renewing memberships, we were able to find and correct a long standing coding error (from last year) that was causing all the problems. On behalf of BCNPA, we are so very sorry it took so long to figure this out. Thank you to everyone for your patience and persistence.

Looking forward, the Web Ops team will explore technical requirements for an electronic voting platform that will allow annual executive board elections to take place online on our own platform in 2017. We will also be exploring the financial feasibility of transitioning our website to a more mobile friendly format (tablet and smart phone friendly). In collaboration with the communication committee, the Web Ops team will continue to ensure that the website functionality meets the needs of our organization as our main communication tool.

**Web Ops Team:** Karen Sims (Chair), Lorine Scott, Lori Verigin.

### BCNPA Member Profile: Michelle Sims

Photo courtesy of Michelle Sims.



I am a nurse practitioner at Three Bridges Primary Care where I provide outreach health care in Vancouver's Downtown and Downtown Eastside, and at our primary care clinic at 1292 Hornby Street, Vancouver.

I specialize in delivering primary care for youth 24 years and under and in the areas of women's health, sexual health and communicable disease prevention, addiction and mental health care, and harm reduction.

## Newsletter Editorial Team

--Submitted by: Debbie Hultgren, Acting Editor and Senior Consultant at Links Communication Solutions.

Like the Web Ops team, the newsletter editorial team is a working sub-committee of the communications committee. The communications committee was originally seeking a volunteer to take on the role of newsletter editor, and was pleased to have three members step up.

The purpose of this team is to ensure members receive the quarterly newsletter on time, and that they receive four complete issues a year. A large part of the team's responsibilities is to write articles, and engage other members to either contribute content or write an article themselves.

The current team was officially formed in March 2016, and is committed to a two year term. Each newsletter edition requires between 20 to 25 hours to complete.

As the newsletter is a key perk of membership, it was important to leverage the data in the survey conducted by the communications committee to ensure the content presented is value add and relevant. It was also important to distribute the newsletter regularly.

We also leveraged the content outline and production schedules, and simplified newsletter template, which were also produced by the communications committee. We had a great starting point, and continue to have their support.

There were some challenges we had to address as a team:

- Incoming team members were new to the process of producing a newsletter.
- We had to work with some very aggressive timeframes to produce the first edition.
- We had to develop processes for review and approval while producing the first edition.

To address these obstacles, the team is being mentored by Links Communication Solutions to learn the ins and outs of writing and newsletter production as we work on the editions. Processes for review and approvals are in place, and are continually adjusted as we learn more about what works well in a volunteer-run organization. The newsletter production is also sponsored by Links Communication Solutions, who works closely with BCNPA's executive assistant Brenda Ingram to ensure timely distribution of editions.

As the team becomes more comfortable with the process of writing and producing the member newsletter, the less support they will need from Links Communication Solutions, to the extent where the newsletter itself could be written and produced in-house, and other interested volunteers could easily transition onto the team.

The team has a lot of enthusiasm for the role, and passion for the NP profession. There is no doubt the newsletter will only get better and better with each edition.

**Newsletter Editorial Team:** Debbie Hultgren, Annaliese Hasler, David Marceniuk, Ranbir Atwal.

## BCNPA Member Profile: Dianne Middagh

Photo courtesy of Dianne Middagh.



I graduated from the University of Alberta in 1987 as a BScN and worked in a many roles, including acute care, addiction, abortion services, Vancouver inner city clinics, and as a mentor with the UBC CHIUS program.

I started my journey to become a nurse practitioner in 2002 after a colleague, Sharon Thompson, mentioned it as an option for expanding my scope of practice. At that time there were no NP programs in BC so I started studying in the NP program at Athabasca University.

While working on my master's degree I was hired at the Midmain Community Health Center in Vancouver in an NP like role. I loved this job! I worked in a great team that really wanted to work with an NP (even though there were no official NPs in BC yet). During this time I have many fond memories of gatherings with other nurses working in NP like roles throughout the lower mainland to develop what is now known as the BCNPA. After obtaining my NP license, the Midmain physicians continued to mentor me until I took a position at BC Women's Hospital and Health Centre.

I have always been drawn to NP roles that support marginalized populations. This interest has seen me working in an aboriginal women's outreach clinic, reproductive healthcare services for women with disabilities and primary healthcare services for marginalized women and families in the Downtown East Side of Vancouver. I have always welcomed the opportunities presented to me as a nurse practitioner and am humbled by the many people I have had the pleasure of meeting over the years. This wealth of experience was paramount in securing my most recent position.

In February 2015, I was offered a unique opportunity to come to Nanaimo and work in collaboration with Vancouver Island University and Island Health. My role has been to develop a nurse practitioner-led health centre responsive to the students at the university. I see a variety of students who often have complex mental and physical health challenges. My practice includes a very diverse international population. The move from the Vancouver area to Nanaimo was not as difficult as it could have been as I was welcomed with open arms by the NP community and the university. This has become a wonderful and challenging NP position in a community that has become my home.

I am also actively involved with CRNBC as an examiner for the OSCE's and am part of the clinical faculty team for the UNBC NP program.

Most weekends find me deep under the cold ocean water as I am an avid scuba diver and Vancouver Island is a cold water diving paradise.

## Governance for 2015/16



Kathleen Fyvie  
President

Kathleen is a family NP working in a tertiary centre acute care hospital. She is the NP for an innovative multi-disciplinary team responsible for the care and management of people with multi-system traumatic injuries. Kathleen's background in Emergency and Post-anaesthetic recovery nursing includes community nursing in the Northwest Territories.

She was on the BCNPA board from 2007-2011 serving as president elect, president and past president, and has held leadership roles on various committees within the BCNPA and community, worked on both MOH Encounter Code working groups and currently sits on the CRNBC NP Exam Committee.

She is passionate about delivering quality healthcare to all British Columbians and committed to working to ensure that NPs will continue to grow in this province and increase access to healthcare in primary care and acute care settings.



Stan Marchuk  
Past President

Stan is a family NP whose work involves complex care management of patients (and their families) with end stage renal disease in the area of hemodialysis. Stan has worked in leadership and management roles where has been responsible for system utilization and management and strategic information development. He is adjunct faculty with the University of Victoria School of Nursing. His interests are in health promotion and informatics and political action, especially as it relates to the role of advanced practice nurse integration and utilization in the Canadian healthcare system.

"It's been an honour and privilege to represent NPs during my time on the board. As I leave the board as Past President, I reflect upon the many accomplishments BCNPA has made in its past 10 years and look forward to the ongoing leadership, collaboration and advocacy work BCNPA will do to propel our profession forward. United as an NP profession we are stronger. I encourage all NPs to become actively involved in the BCNPA as we create a positive change in the health of all British Columbians!"



Natasha Prodan-Bhalla  
Vice President

Natasha is an adult NP living and working in Vancouver. She has worked as an NP in cardiac surgery, cardiology and women's health and has volunteered with Doctors Without Borders in Sri Lanka.

Her current practice focus is women's health, and includes leading a primary prevention heart program for women and working in a primary health clinic for marginalized women in the downtown eastside of Vancouver.

She recently completed her DNP from the University of Colorado, Colorado Springs, and is an adjunct faculty at both UBC and University of Victoria. She is passionate about being an NP and the contribution all NPs can make to improve the healthcare system in BC.



Lori Verigin  
Secretary

Lori has been nursing for 25 years now, mostly in rural communities, and currently works as a family nurse practitioner in Trail, BC where she has been practicing for 10 years. Lori graduated from Athabasca University's Advanced Practice Nursing program in 2006. She then joined Dr. Blair Stanley at Waneta Primary Care clinic to work in an Interprofessional collaborative partnership. Lori has many interests related to family practice. One of her recent passions has been using technology to enhance practice and improve care delivery.

In her role as a family NP, she continues to learn about the human condition and the challenges facing both healthcare providers and patients. Lori has been a strong advocate for NP practice: she never misses an opportunity to educate her colleagues about the value of NPs in a variety of settings and roles.

Lori is also a member of the Kootenay boundary Collaborative services Committee and an executive member of the KB Divisions of family practice. Participation at both of these tables has provided yet another opportunity to highlight the important contributions NPs make to the health system. She continues work to elevate the role of NPs and to ensure a future for new NP entering the work force particularly in primary care settings.



Karen Sims  
Treasurer

Karen completed a combined Masters/Acute Care Nurse Practitioner (ACNP) program through the University of Toronto in 2006, initially worked with an acute general surgery service, and now works in primary care. She was the secretary for BCNPA from 2009-2012. As the current treasurer, she is the custodian of BCNPA funds. While working closely with our book keeper and accountant her goal is to monitor BCNPA's financial situation and advocate for decisions that contribute to the financial stability of the association.

Karen loves the outdoors and recently completed a diploma in mountain medicine through the University of British Columbia. In her spare time you will likely find her swimming, biking, or running as she trains for a triathlon at the end of August in Penticton, BC.



Michael Gartner  
Student Rep.

Michael, a second year NP student at UBC, completed his BSN and Critical Care at BCIT and has been working in Cardiology at VGH since 2011. His experience volunteering with the British Columbia Mobility Opportunities Society and the Lookout Emergency Aid Society in the Downtown Eastside, and his RN experience helped him gain a better understanding of the complexities of our healthcare system and the need for NPs in BC.

Michael has partaken in medical missions to the Philippines and sits on the Board of the Canadian Medical Mission Society. As a student representative on BCIT's Board of Governors and Education Council, he has come to appreciate the importance of being engaged in matters affecting his future profession. His personal goals are to increase BCNPA membership, establish an effective and sustainable student communication network for NP students in BC and advocate for concerns, needs, and ideas of students and novice NPs.



Barb Eddy  
Regional Director -  
Vancouver

Barb works as a family NP at an interdisciplinary primary care clinic in Vancouver's inner city. She has held the Canadian Nurse certification for hospice-palliative care since 2004.

Barb regularly works with the CRNBC OSCE exam marking committee and recently contributed to CASN's work on competency development for controlled drug prescribing. She is involved with the clinic's quality improvement projects aimed at improving health screening for the marginalized population. Her research is focused on improving colon screening rates.

Barb holds appointments with the UBC and UVIC Schools of Nursing and the UBC Department of Medicine, Division of Family Practice. She also teaches in the graduate and undergraduate programs.



Linda Van Pelt  
Regional Director – North

Linda currently practices in an inter-disciplinary clinic that provides primary health care to a broad variety of patients, including those with mental health, addictions and chronic pain conditions.

Her past experience includes intensive care, trauma and emergency care, psychiatry and advanced practice in remote communities in the Canadian North. She has been the coordinator of the UNBC FNP Program since 2009. Linda has served as the Northern Representative for the BCNPA in the past, and currently serves on several committees, including the Interprofessional Education Committee at UNBC, the CRNBC CDS Prescribing and Involuntary Admission expert panels, as well as the CASN Committee for Control Substance Prescribing.

Her research includes patient perceptions related to barriers to access to primary health care for patients with mental health, addictions and chronic pain conditions (PI), and the Rural and Remote Nursing Survey II (Co-I).



Wendy Bowles  
Regional Director – Fraser

Wendy is a NP with more than twenty years of experience in Vascular, Wound Care and Cardiovascular.

She has also worked in the community, the north and within the correctional system. Wendy is currently working with the Frail Elderly population.

All her experiences have added to her diverse perspectives on the healthcare system, its challenges and opportunities.



Janice Brown  
Regional Director – Island

Janice completed a Bachelor of Science in Nursing from the University of Alberta in 1987. In 1988 she moved to Vancouver Island where she worked in acute care, primarily on an orthopedic surgical ward. In 1992 Janice transferred to a registered nursing position with the Quick Response Team in Home & Community Care. In 2011 Janice completed the Masters in Nursing, Nurse Practitioner (Family) from the University of Victoria. Janice currently works as a Nurse Practitioner in Home and Community Care (H&CC). The focus of her practice is the provision of episodic and/or a continuum of primary care for eligible H&CC clients in the community who either do not currently have a primary care provider or who are unable to access their provider in a timely manner.

“As the outgoing BCNPA Island Health Regional Director, I would like to comment on the valuable experience I have gained working with BCNPA Executive over these past two years. I take away an increased awareness that as individual NPs we are all passionate about our practices and the ability to provide primary care to our clients. As a member of the BCNPA board, I have come to recognize that while individuality is important, it is the collective voice for NPs which must be strong on a provincial and national level, in order to continue the ongoing success of NPs in BC. I salute the past and present BCNPA executive for their dedication and energy to be that voice for NPs in BC. Thank you for allowing me to be a part of this process.... you have my ongoing support.”



Colleen Regehr  
Regional Director –  
Interior

Colleen has practiced in primary health care as a family NP for 10 years.

Her practice population includes all ages and stages, with a focus on the complex comorbid aging population. In the past she has worked in isolated northern communities, as an outpost nurse and in medical emergency transport.

Other professional activities include CRNBC board and committee work, and consultation on NP role integration and NP professional privileging.

Outside of work Colleen enjoys cycling, skiing, and other outdoor activities. She enjoys the rural life in Kamloops with her family and dog.

## Staff

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Brenda Ingram  
Executive Assistant

Brenda has been the executive assistant to BCNPA's board since 2011. She has worked many years as the executive assistant for the presidents of Riverview Hospital.

Brenda then held the executive assistant position for the president of the BC Mental Health and Addiction Services at PHSA for another 10 years before retiring 2013.

On her off-time, Brenda enjoys hiking, yoga, reading, taking continuing education studies and course, travel, and gardening on her little farm in Whonnock, BC.

"I first took on the executive assistant role as a favour. I thought it would be a temporary role...and I'm still here! It's turned out to be an interesting retirement part time job and gives me purpose."



Lorine Scott  
Acting Executive Director

As a family NP, Lorine wanted to make a difference: she and her NP colleagues established the BCCH - RICHER Initiative in 2006, an outreach practice designed to improve access to health care across the continuing spectrum of NP led primary care - MD specialist care for inner city children, youth and their families. The program was the first of its kind in Canada, and was awarded a Health Canada Award for Innovation. She remains a passionate NP and believes the NP role has the power to transform the system and contribute to better health outcomes for our patients.

In providing part time, executive director support, Lorine sits on the Board as a non-voting member. Her work in this new volunteer role includes providing assistance and guidance to the Communications and Membership Committees, drafting correspondence for the President/board on key issues, drafting responses to media enquiries, providing advice and historical background to the board, member recruitment, supporting the web operations team, responding to email requests for information when delegated, reviewing strategic documents and plans, and working in the background on any task or project the board requires.

"It has been a busy but rewarding and fulfilling year and I look forward to 2017. I encourage every NP in BC to get involved and be a part of the organization that represents their issues and concerns and speaks from the NP perspective! Together we have a bold voice."

## Partners

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BCNPA is pleased to be working with our partners to continue making positive changes in the health of all British Columbians:

- Ministry of Health.
- Canadian Association of Advanced Practice Nurses (CAAPN).
- Canadian Nurses Foundation (CNF).
- Coalition of BC Nursing Associations (BCCNA), which includes:
  - Association of Registered Nurses of BC (ARNBC).
  - Association of Registered Psychiatric Nurses of BC (ARPN).
  - Licensed Practical Nurses Association of BC (LPNBC).
  - The Nursing Education Council of BC (NECBC).
- College of Registered Nurses of BC (CRNBC).

## Acknowledgements & Thanks

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The BCNPA Board thanks Emmanuel Factor, of Loen and Company, and Maiturtizi Uribe, Certified Bookkeeper, for their professional services throughout the year. Loen and Company Certified General Accountant prepared year-end financial statements for the 2015 fiscal year, and assisted in the 2015 T2 corporation income tax return, GST preparation and T4 preparation and filing.

Web Operations Team would like to thank Travis Brown from Flightdeck Media not only for providing technical support for our online presence, but also a thoughtful approach to our needs as a non-profit organization.

The Conference Committee thanks our generous sponsors and donors, Venue West for helping BCNPA with conference registration, Delta Grand Okanagan Resort & Conference Centre for hosting the conference, and the volunteer teams who helped make the 2016 Conference in Kelowna a success.

The Communications Committee thanks Debbie Hultgren from Links Communication Solutions for providing communications support to the Board, assisting the committee on communication projects, and for sponsoring the production of the member newsletter and the 2015/16 annual report.

The BCNPA Board thanks the committee chairs and their working teams of volunteers for the incredible work they have done on projects that help the association thrive.

Finally, BCNPA thanks its members for continuing to help grow the organization, and represent the value of the NP profession in BC's health system.