**PPNO List Serv Query Summary**

**Chan, Angela Mackenzie Health angela.chan@mackenziehealth.ca**

Contact for further information:

Date of Summary: **16 June** **2020**

Abbreviated Question (as it will appear on search results page)

*Our organization is currently reviewing our allergies practice and we are interested in the following:*

1. *Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units?*
2. *If they are decentralized, is there a portion of their role that reports centrally to Professional Practice?*

[ ]  Policy/Procedure [ ]  Practice [ ]  Program Info [ ]  Committee Structure info [ ]  Role [ ]  Students

[x]  Model/Structure [ ]  Care Delivery [ ]  Collaboration [ ]  Regulation/Legislation [ ]  Pt. Safety

[ ]  Quality/Outcome/Indicator [ ]  PP Culture/Leadership [ ]  Other:

Responses:

Please cut and paste responses from emails into the table, save and send summary table to PPNO List Serv. Allow 3 weeks for responses to filter in before sending final version.

| Responder Info | Responses  | Attachment(s)\*  |
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| **Tasha Vandervliet, RN, BScN**Nurse EducatorHuron Perth Healthcare Alliance46 General Hospital DriveStratford, OntarioN5A 2Y6519-272-8210 ext. 2327tasha.vandervliet@hpha.ca | At our Alliance, we report to the Manager of Nursing Practice, then to the CNE. |  |
| **Andrea de Jong RN, BScN, MScN**Manager of Interprofessional Practice, Programs, Education and Research **Runnymede Healthcare Centre**625 Runnymede Road Toronto, ON  M6S 3A3T 416 762 7316 ext. 2249E andrea.dejong@runnymedehc.ca [www.runnymedehc.ca](http://www.runnymedehc.ca/) | 1. Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units?  Clinical educators report to professional practice;  APNs report into Director of Patient Care (also central).
2. If they are decentralized, is there a portion of their role that reports centrally to Professional Practice?
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|  Lindsay Martinek BA.Hon, RRT, MHSDirector, Professional PracticeMichael Garron Hospital | Toronto East Health Network (Formerly Toronto East General Hospital)825 Coxwell Ave | Toronto, ON | M4C 3E7 **Tel:** 416-469-6580 ext 3068|**Twitter:** @MGHTorontoLindsay.martinek@tehn.ca | 1. Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units? They are partnered leaders with the Manager of the unit and report to the program Director.  They also have a dotted line reporting relationship with the Director of Professional Practice, for education and hospital wide (vs program specific) nursing education.
2. If they are decentralized, is there a portion of their role that reports centrally to Professional Practice? See above
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| Paulette Roberts *BNRN, MHA*Manager Professional PracticeCornwall Community Hospital 840  McConnell DriveCornwall, ONTel: 613-938-4240 ext. 4582Email: paulette.roberts@cornwallhospital.ca | 1. The Clinical Educators report centrally to Professional Practice.  We do not APN reporting to PP
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| Amanda Mathur **BScPhm. PharmD. RPh**SAH Collaborative Practice SpecialistSault Area Hospital | 750 Great Northern Road | Sault Ste. Marie, ON P6B 0A8Phone: 705.759.3434 x5535 |  Email Mathura@sah.on.ca | 1. Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units? They report centrally to Collaborative Practice
2. If they are decentralized, is there a portion of their role that reports centrally to Professional Practice?
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| **Lorraine Bird, RN, MScN** **Interim Clinical Educator** **Collingwood General and Marine Hospital**  **705-445-2550 Collingwood, ON, L9Y1W9** | Hi Angela,We have an N of 1 Clinical Educator who reports to the CNE as part of the  program portfolio titled VP Patient Experience and CNE.  In  my previous role as an APN at Sick Kids we had a dual reporting structure – to both our Program Director and to the Nursing Exec in Professional Practice.Let me know if I can provide you with any further info. |  |
| **Lynda Hoffmeyer** MN, RNI Manager Interprofessional Practice**Grey Bruce Health Services** │ Owen Sound T 519.376.2121 x2717 | F 519.372.3939[www.gbhs.on.](http://www.gbhs.on.ca/) | 1)      Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units?Clinical Educators report to our Director of Quality and Risk Management.  Advanced Practice Nurses report to their program/unit.  They do have quarterly meetings with our VP of Clinical Services and the Chief of Staff.2)      If they are decentralized, is there a portion of their role that reports centrally to Professional Practice?Both groups have a representative sitting on our Professional Practice Council as well being standing members of our  Nursing Leadership Committee. |  |
| Kelly Verhoeve RN BScNManager Professional DevelopmentProfessional Practice Facilitator & Accreditation CoordinatorWoodstock Hospital | 1. Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units? Our FT Clinical Educators report to the Manager of Staff Development/Professional Practice. Our FT composite educators report jointly to the Director of Patient Care for their area AND the Manager of Staff Development/Professional Practice

 1. If they are decentralized, is there a portion of their role that reports centrally to Professional Practice?
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| **Vera Heldmann**Clinical Educator ICU & MedicineTelephone: 519-621-2333 ext. 5365 Email: vheldmann@cmh.org | 1. Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units?  Here at CMH we report centrally to our Professional Practice Specialist, while working collaboratively with individual Managers.
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| **Susan MacNeil RN, MN**Advanced Practice Nurse – Clinical Nurse Specialist for GerontologyProfessional PracticeProvidence Care Hospital752 King Street West, Kingston ON K7L 4X3Phone: 613-544-4900 x 53394Email: macneis4@providencecare.ca  | Our Clinical Educators and Advanced Practice Nurses report Centrally to Professional Practice.  |  |
| **Leigh-Anne Sinnaeve, RN, BScN****Professional Practice- Interim Clinical Educator****Office: 519-631-2030 Ext. 2891****St. Thomas Elgin General Hospital** | At our organization the Clinical Educators report centrally to Professional Practice. We do cover for each other but otherwise take the lead on or support specific programs and units.There is a small portion of the role in the specialty areas that is designated as a 0.25 Educator. This role is an experienced RN that works in ED, W&C, MH and is designated a specific amount of time per month to complete education and project lead related work for that unit. This role is decentralized reporting to the manager of the unit.  |  |
| Susan Murphy RN BScN CPMHN( C )Practice SpecialistMental Health Program Behavioral Supports Transition UnitQuinte Health Care265 Dundas St E.Belleville, ON Office: 613 969 7400 ext 2111Email: smurphy@qhc.on.ca   | We report centrally to the director of the professional practice department. Professional practice specialists (PPS) are supposed to meet regularly for a “traid” meeting  involving mangers, patient care leads and themselves to evaluate the needs on the unit and planning. However, I believe this practice varies from manager to manager. Often our PPS are covering multiple areas, some areas require more support and therefore the PPS availability is not distributed equally amongst the units.  There also seems to also be a lot of variability in regards to the expectations managers have of the PPS. We have been working on role clarity as a result.   |  |
| **Rebecca Law, RN, BScN, CNeph(C)**Clinical Practice Leader*In-Centre Hemodialysis – CP2, T4  & Satellite Sites***Scarborough Health Network****C:** 647-200-3880| **T:**416-431-8200 x2293**Email:** rlaw@shn.ca | At SHN, Clinical Practice Leaders report to Professional Practice.  |  |
| Corinne Savignac, R.N., BScN, Nurse Clinician General Internal Medicine705-523-7100Extension 3315**Health Sciences North | Horizon Santé-Nord**41 Ramsey Lake Road Sudbury, Ontario P3E 5J1  E-mail: csavignac@hsnsudbury.ca | 1. Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units? Nurse clinicians aka clinical educators and our few Advanced Practice Nurses all report to specific departments/programs.
2. If they are decentralized, is there a portion of their role that reports centrally to Professional Practice? We no longer have a professional practice department.
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| **Colleen Wilkinson, RN, MS(N)**Director, Interprofessional PracticeT. 905.576.8711 ext. 34479 cwilkinson@lh.ca | Our Clinical Practice Leaders report centrally to me as the Director for Interprofessional Practice. There is a dotted line reporting relationship to each of the clinical program directors as well. I feel that this works very well. They used to report to each clinical program and it posed many challenges. Our APN reporting is mostly decentralized. I do have the would care APNs reporting to me. For other roles I would favor having a different structure that includes at least some form of reporting centrally but we have not taken steps as an organization to visit this with our various stakeholders.   |  |
| George Fieber RNNursing Practice LeaderThunder Bay Regional Health Sciences CentreOffice: (807) 684-6691Cell   : (807) 629-0889 | 1. Do your Clinical Educators and Advanced Practice Nurses report in centrally to Professional Practice or do they report de-centrally specifically to their programs/units? At TBRHSC we have a CNS dedicated to each major dept. of the hospital who has teaching responsibilities specific to those specialties and supports education for nurses in those clinical areas. They have a matrix reporting structure to the Director of Nursing as well as to the Directors of the individual services they support. This was set-up when the organization moved to a program mgmt. model. This is not an ideal situation but we have had a lot of turnover in the Chief Nsg. Executive position and this issue is long over due for review. There are 3 Nsg. Practice Leaders (myself included) who fall into this APN classification and report soley to the Direct of Nursing. We also have an Inter-Professional Education team that is responsible for more organization wide education re HR issues, Occ. Hlth and Safety and hospital orientation. That team reports directly to the Director of Academics and Inter-Professional Education.
2. If they are decentralized, is there a portion of their role that reports centrally to Professional Practice?
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