"The trained nurse has become one of the great blessings of humanity, taking a place among the physician and the priest."

William Osler

Note: This week's Departmental Acknowledgement has graciously been provided by one of my Associate Chairs, Robert Brouillette - Michael

This week's departmental acknowledgment goes to our MUHC Neonatal Nurse Practitioners: Rose Boyle, Martine Claveau, Philippe Lamer, Marie-Eve Moreau, Linda Morneault, and Margarida Ribeiro-da Silva. We applaud their outstanding contributions to the clinical and academic life of the neonatal division at both the MCH NICU and the RVH NICU. Furthermore, by these contributions they support patients who will be managed for months to years after discharge in respiratory medicine, neurology and neurosurgery, cardiology and cardiac surgery, general pediatric surgery, and numerous other specialties. Thereby these contributions are essential to the well-being of our department as well as our hospital.

In 1994, we began a pilot project for neonatal nurse practitioners at a time when Québec had no nurse clinicians/practitioners and when there was no formal agreement for funding from the provincial government. Martine, Philippe and Linda trained locally and obtained certification in the United States. It took 18 years, but beginning in 2012 the ministry of health has now recognized the importance of having NNPs in tertiary care units, has agreed to fund salaries for new NNPs, and has designated McGill as the provincial training program for NNPs. The two-year training program within the McGill School of Nursing is seen as a model for nurse practitioner training, playing a leading role in advanced practice nursing. To date, there are 14 trained and certified NNPs practicing in several Québec NICUs with an estimated need of 65.

At the MUHC we will need 16 NNPs to cover the clinical and academic needs of our 52 NICU beds at the new Children's Hospital. At present, the physician to patient ratio is lower in the NICUs than on the pediatric wards or in the PICU. In fact, at present and over the past several years if we had not had NNPs, the RVH would have had to revert to a level II unit given the shortages of pediatric residents and neonatal staff.

Although the clinical contributions of the NNPs are obvious to all who work in the NICU environment at either the MCH or the RVH, the NNPs also contribute importantly to the academic life of the Department of Pediatrics and the academic health center more generally. They are the university teachers for the incoming NNP students who will practice in our new Children's Hospital and in other Québec NICUs. By the excellent care they provide they serve as role models for our residents, fellows and staff. As role models for nursing, they provide a shining example of advanced care nursing practice. For long-term patients of the NICU they play an important role in ensuring continuity of care. They have provided leading roles in program development and support in such areas as hypothermia for perinatal asphyxia, nutrition protocols, the INFANT team for intestinal insufficiency, developmental care, and percutaneous intravenous central catheters. Several of the NNPs have been involved in research.
and administrative programs such as the executive committee of the Canadian neonatal network and the MCH/MUHC Council for Services to Children and Adolescents.

This is also an appropriate time to thank the administration of the Montréal Children's Hospital for funding the weekday activities of the NNPs from the nursing budget over the last 20 years.

Likewise, we acknowledge the important contribution of the Pediatric Medical Group (a portion of the Department of Pediatrics) for funding night/weekend overtime over the last several years.

In closing, we acknowledge the important contributions of the NNPs, applaud their dedication and excellence, and look forward to continued collaborative practice as we transition to our new 52 bed NICU in the new Children's Hospital.

Bob Brouillette and Thérèse Perreault