January 2007

TouchPOINTS

UBC School of Nursing

PUTTING SCHOLARSHIP INTO PRACTICE

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In the Finest Faculty Tradition

Dr. Sally Thorne

The UBC School of Nursing is a hub of constant activity, creating the foundation for education and knowledge development within a wide range of issues of critical importance to the modern health care system. The stories of our students, graduates and alumni attest to the many ways in which UBC nursing faculty confront challenges, embrace new opportunities and support initiatives that can make a real difference in the learning process and in the development of a knowledge base for nursing practice.

Having completed an initial five-year term as Director, I have had the distinct privilege of witnessing the dedication that my UBC School of Nursing faculty colleagues consistently show as they rise to every occasion. These have not been easy years within the health care system. Similarly, in the education sector, we have faced unprecedented complexity in securing optimal clinical learning sites for our undergraduate students, constant pressure to accept more students and expand our programs, and increasing difficulty sustaining the professoriate as our senior colleagues make the transition into retirement. The faculty are all fully aware that impending nursing shortages are bound to increase that pressure, and so the faculty role within the current context can be characterized as too much to do with too little time.

We collectively love to celebrate and honour our graduates and share our pride in their achievements. However, it is also important to take note of the professional drive and commitment within the faculty that lies behind the success of each graduate, and at the heart of each service initiative or research endeavour. The accomplishments of the UBC School of Nursing faculty are a product of long hours, creative synergies, and an incredible sustained passion for the work. As current

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Faculty members share in the celebration of convocation, November 22, 2006.

Raising the Bar

Pumping the Country with Programs Full of Heart

From an early age, Dr. Carol Jillings, Associate Professor in the School of Nursing, knew the value of not-for-profit organizations. "When my father recovered from heart surgery, he volunteered with the American Heart Association. It became clear to me what non-profit organizations could do for patients and I became aware of their role in education and research," says Carol. "Over time, health-focused non-profits have been directing their attention to the psychosocial side of disease—families and people involved need emotional support, education and care."

As a master's student, the focus of Carol's thesis research was on the psychological aspects of recovering from open heart surgery. She presented her paper at the annual conference of the Canadian Council of Cardiovascular Nurses (CCCN) and it was at that conference that her commitment to engaging with the professional association began. Carol eventually became president of the BC chapter of CCCN and through that position became engaged at the national level as well. It was at this time that the research content of meetings and conferences began to increase. "Nursing knowledge in cardiovascular care really began to grow," says Carol. "There was greater attention paid to research and a growing commitment to funding graduate students."

This year Carol took up the prestigious role of Chair of the Heart and Stroke Foundation of Canada (H&S). In its 50th year, Heart and Stroke has adopted a federation-wide mission statement directed at the common goals of research, health promotion and advocacy. They are currently the secretariat for the Canadian Heart Health Strategy, a pan-Canadian approach modeled on the successful stroke strategy.

"We are in a very exciting period right now," says Carol. "Things are converging, there is a common mission across the country and we are in the process of developing a research mandate that includes population-based and health promotion research as well as basic science." Over the last 50 years H&S has provided over one billion dollars in research funding, 52 million in the last year alone. The key to optimizing the findings of research is knowledge translation—the transformation of information into user-friendly programs such as "Heart Smart Kids." All three main areas of focus of the H&S (funding research, health promotion and advocacy) work synergistically to provide the best possible resources for the public.

Carol Jillings and Dartmouth-Coal Harbour MP, Michael Savage, share in the celebration of the Heart and Stroke Foundation's 50th anniversary.

"I am excited to be engaged right now because there are over 140,000 excellent volunteers and staff across the country, the Board is composed of people who are leaders in their own provinces, all provinces are linked by a common mission, and they work to fulfill their mandates in unique ways."

Many of the skills Carol uses daily as a member of the teaching faculty in the School are also applied to her service activities. "As part of a university environment and a health science discipline, I have developed a sensitivity to the importance of research and the intricacies of funding," she says. From a nursing point of view, Carol sees how nurses are skilled at being "big picture thinkers." They can see components and relationships, plan strategically and organize knowledge in unique ways—a key skill for working through health policy. "Nurses in academic settings also understand the complexity of the organizational structure," says Carol, "the importance of communicating, working on a team, facilitating relationships and tackling common goals." She also sees her role on the national board as representing the unique perspective of nursing. "I will always bring my commitment to patients to the forefront."

Some nurses would feel that they were missing a part of themselves if they didn't engage in some kind of service, and Carol is no exception. Working with other professionals to improve matters of heart health for Canadians brings colleagueship and connection to Carol. It provides her with the big picture of how organizations and citizens work with government to set different initiatives in motion across the country. "My contribution is in the knowledge transfer arena," says Carol, "to take knowledge to the next step of strategy, program development and advocacy, and to make the end user part of research in that way."

The School is immensely proud of its members like Carol who work towards translating investigative and targeted research into usable programs and strategies for all Canadians and who enact their scholarship in the form of exemplary community service.

Research Excellence

Taking Care of Our Own

Angela Henderson, Associate Professor in the School of Nursing, and six other researchers are taking on the task of discovering and documenting the extent of workplace violence and designing interventions for nurses in a WorkSafe BC study, "Nurses and Workplace Violence: Towards Effective Intervention."

Trish Rampersaud and Angela Henderson develop focus group ideas for the WorkSafe BC study in which they are involved.

Angela started her nursing research career investigating violence toward women and child abuse, but says that abuse and violence of any kind are related in some way. "When I started to investigate how nurses address violence with women who were abused—or didn't address it—it became clear to me that those required to intervene often had personal experiences of it themselves. So, it is vital that we understand these issues as well as what's happening in the workplace in order to help these nurses feel comfortable to intervene."

The literature has grown on workplace violence for nurses, not only helping to illustrate just how dangerous the profession can be, but also illuminating the seemingly endless circumstances and individual experiences that contribute to how nurses effectively deal with violence in the workplace. "When people are feeling isolated, unheard and threatened themselves," says Angela, "how can we expect them to react effectively for someone else?"

Violence, in the context of this study, is defined as including verbal and sexual harassment, sexual and physical assault, as well as more subtle forms of abuse like threats, bullying and demeaning behaviour. The research team, comprised of a social worker, an epidemiologist, clinical nurses from acute care, mental health and the community, and Trish Rampersaud, one of the School's recent MSN graduates, is meeting a number of objectives with this study.

- To review policies currently in use in order to understand workplace environmental culture.
- To understand the impact of workplace violence on nurses' ability to function by interviewing both groups of nurses and other individuals in a number of hospital and community-based settings.
- To uncover the impact of relevant personal experiences of abuse on the individual nurse's own experience of violence at work.
- To pilot test an intervention addressing workplace violence.

"We will compare and merge the information we gather from the focus groups and from individual nurses to develop procedures and supports that build on excellent policies already in use," says Angela.

"Institutions need to make it clear that they don't tolerate abuse, violence and threats," says Angela. "You can't be called names every day and not have it affect you." Nor, as a busy nurse, does one always remember or have the time to report seemingly small, isolated incidents; however, the accumulated impact of these incidents can have a negative influence on the person and on the workplace overall.

Violence is a complex phenomenon and each person reacts to it differently, and perceives violent situations differently. It is not clear that current policies are being used to their full capacity and it is recognized that nurses tend to under-report the level of violence in the workplace. The ultimate goal of this study is to develop a universal system that speaks to the needs of each individual experience. "How can you nurse if you feel isolated, alone, unsupported or unsafe?" asks Angela. "With this study we hope to help nurses do the job they love in a safe environment where they feel honoured."

This research is important for a number of reasons. It is morally unacceptable for nurses to experience the level of workplace violence, abuse and harassment currently described in the literature. Nurses, administrative staff and the public need to understand the issue of workplace violence from the perspective of the nurses who experience it. And, most of all, there is an increased recognition of the significant impact of violence on the growing nursing shortage and the industry's ability to deliver effective health care.

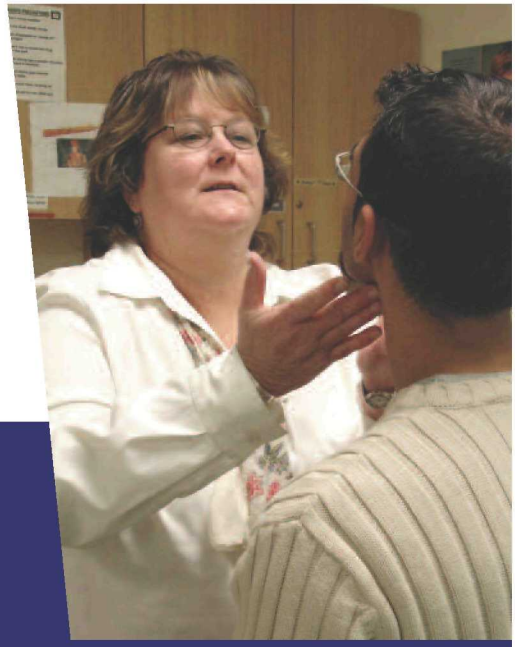
For researchers like Angela, offering just a little help is the best first step in improving the workplace environment for nurses.

Graduate Profile

Going the Distance to Meet the Need

As a midwife working independently in Britain, Deborah Lewis, MSN-FNP '06, developed a penchant for working semi-autonomously. As a recent graduate of the nurse practitioner program at the School of Nursing, Deborah will continue that aspect of her professional life by taking a post in a rural primary health care setting in Chase, BC.

"My last two preceptorships during the program were in primary health clinics," says Deborah, "and these ignited my passion for rural nursing in such a clinic. When you are in a community of 1700 people (like Logan Lake) you really get to know the whole person—not only their health needs, but their role within the community and their relationship with family and friends, and understand the support systems that help with their health care issues. This is an important aspect of health care—understanding the meanings of health issues to individuals within the context of their lives."



Deborah Lewis, MSN-FNP '06, at work in a primary health care setting.

Thanks to funding support for rural clinical placements provided to the UBC School of Nursing by the BC Ministry of Health's Nursing Directorate, Deborah was able to travel outside the Lower Mainland to gain valuable experience in this distinct form of practice. The objective of the rural placements program is to provide students with the opportunity to work closely with family physicians and other health team members in communities where expanded primary care services are needed. Exposure to such practice increases the likelihood that some, like Deborah, will relocate upon graduation and serve communities around the province.

What draws Deborah to the rural primary care clinic is that she can use the skills gained through the UBC NP program to facilitate her clients' access to quality health care and to individualize patient care. "I will have the opportunity to use my full scope as a family nurse practitioner," says Deborah. "In urban settings, employers are more often seeking nurse practitioners for a specific client group, so it can be difficult to stay current with the competencies associated with a practice that involves patients of all ages."

While at her final practicum in Logan Lake, halfway between Merritt and Kamloops, Deborah was surprised to discover how important the teaching and health promotion aspects of the nurse practitioner's role could be. "Clients were receptive to the comprehensive care that I provided," she says. "It was different from that of their physicians because I was able to take additional time to teach as well as to provide the more medical aspects of care. It's the freedom to do these things that appeals to me." She was delighted by the supportive environment that was provided by the interprofessional team members in that setting. "The physicians were also receptive to those skills that I offered that came directly from my nursing background—the health counseling and the health teaching around clients' particular health issues."

During the program, Deborah was continually impressed by the level of commitment the UBC nursing faculty had toward the students, not only individually but as a group. "There was always someone there to listen to the struggles we were having and to confirm that, because this is a new program, the path can be tough at times," she says. "Faculty members were able to remind us continually of our end goal."

A nurse for many years, Deborah was also pleased to witness how her nursing background applied directly to her new career path. "I have been a practicing nurse for a long time," she says. "I love nursing and wanted to continue on that path. Becoming a nurse practitioner is one way I can expand my knowledge, my skills and my career goals, and challenge myself!"

Deborah is excited by the challenges and opportunities that her new position at the Health Centre in Chase will provide. Although an initial aspect of the role will be learning about the excellent programs and services the Interior Health Authority already offers in this area, Deborah feels confident that there will be room to expand, ensuring that there is a strong women's health component at the health centre. "I have a long history in women's health," says Deborah, "and it brings me great joy to see well-functioning services in place for women in all stages of their life."

The School stands behind Deborah as she works toward satisfying the needs of families and individuals in her new community. We are proud of the role nurse practitioner graduates like Deborah are playing in bringing primary health care to the people of British Columbia, wherever they reside.

Undergraduate Profile

Driven by a thirst for knowledge

Olympians are often in the company of medical professionals and Jaime Fortier, BSN '06, is no exception. By the time she became a member of the 1998 and 2002 Olympic Cross Country Ski Teams, Jaime had had her fair share of sitting with physicians, physiotherapists and other health care professionals. "The ones I remember distinctly and who comforted me the most were those who listened to me and met my needs," says Jaime, who decided after much discussion with female physicians and nurses to choose nursing as her career.

One of Jaime's clinical experiences while an undergraduate student was in Vancouver's Downtown Eastside. During the experience she was able to participate in an after school education program for children of addicts and sex trade workers. "I loved it," she says. "I loved how much I connected with the community down there." The experience ignited a desire in Jaime to work more with marginalized people. During her course work at the School, Jaime was struck by the level of psycho-social education she received. "The courses we took in communication and cultural sensitivity and ethics were important to build the base for more effective nursing practice," Jaime says. "Nursing is more than medical, it's holistic."

Jaime was a grateful recipient of several scholarships while completing her undergraduate degree. "They helped us so much," says Jaime. "My husband was the only one working and receiving the scholarships meant I didn't have to work but could focus my attention on my studies."

Scholarship support also afforded Jaime the opportunity to travel to Ghana as part of a final clinical learning experience within her nursing program. "I have done lots of international travel," she says, "but never worked while in another country. So, to see inside people's homes, to see and hear the most intimate parts of their lives was an incredible opportunity. It's one thing to see it on a television show, but to be immersed in populations that are struggling for survival really encouraged and motivated me to keep going in the direction of working with marginalized population groups."

Not only did the experience allow Jaime to see first hand how other cultures struggle to obtain basic health care for themselves and their families, it also allowed her to witness a different kind of health care system, from which she could cull processes that would work in her own practice, and from which she could appreciate some of the excellent strategies in place in the Canadian health care system. "I am always keen to keep learning and improving my practice," Jaime says. "I love the opportunity nursing provides to interact with patients and colleagues and to learn from them."

Jaime Fortier, BSN '06, in Tamale, Ghana caring for the younger generation.

Currently Jaime works full-time in the Leukemia/Bone Marrow Transplant Unit at Vancouver General Hospital, where she enjoys the collaborative team effort and the opportunities for communication with the patients. "My philosophy is to listen to the patients, in order to better meet their needs and goals. I'm happy to put what I think is best aside and listen to the patients to discover what they think is best for them." In the long term, Jaime's desires lean toward becoming a nurse practitioner. "Maybe it's my intrinsic drive to always go a bit further and reach higher," says Jaime, "or it could be that I love challenges and learning." Ideally, Jaime's goal revolves around increasing her scope of practice, working directly with communities, and meeting the needs of those most at risk. "Treating the whole person doesn't have to be curative. It's more about maintaining optimal health for the individual."

The School joins in Jaime's excitement at bringing her passion for optimal health to medically compromised people and to marginalized communities at home and abroad.

In the Finest Faculty Tradition

Continued from page 1

occupant of the Director's chair, I have the special privilege, each and every day, to witness faculty members going above and beyond the call of duty, extending themselves to reach out to lead just one more project, support just one more student, or resolve just one more problem. This unique community of scholar-educators is blessed with the full spectrum of internationally acclaimed celestial bodies and quiet shining stars, and it is deeply moving for me to witness the light of faculty passion shining in so many different ways on a daily basis throughout the School.

For all of its history, the UBC School of Nursing has relied on the finest of faculty to achieve its goals, and today's faculty most certainly sustain that excellent tradition. I take my hat off to my colleagues, and publicly acknowledge their individual and collective brilliance.

New Faces in Research

Dr. Maura MacPhee

"I get fan mail all the time," says Dr. Maura MacPhee, newly-appointed Assistant Professor, thinking about nurses who have participated in the Nursing Leadership Institute (NLI). The NLI is a collaborative initiative between the BC Ministry of Health, BC Chief Nursing Officers and the UBC School of Nursing to support "first line nursing leaders" across the province. Maura, along with Dr. France Bouthillette, Adjunct Professor, have for the last two years run a four-day intensive training workshop with one year follow-up to help build the leadership and management competencies of nurses beginning to take up leadership positions.

France Bouthillette, Adjunct Professor in the UBC School of Nursing (l) and Maura McPhee at a recent Nursing Leadership Institute conference.

"Some of these novice leaders are doing great things with minimal resources and support," says Maura, who hopes to continue her program of scholarship working in leadership development. Along with pursuing funding to evaluate the outcomes from the NLI, and to look at how leadership behaviour influences nurse, patient and organizational outcomes, Maura hopes to systematically study trust formation, since she views trust as a necessary condition for nursing job satisfaction. "What is it based on? How can it be cultivated by nurse leaders?" The UBC School of Nursing is proud that Maura's special expertise is placing it in a position to reach out to the next generation of nurse leaders.

Paul Galdas, already enjoying the Vancouver scenery (note computer monitor).

Dr. Paul Galdas

"Throughout my clinical career, I regularly encountered male patients who had suffered an acute cardiac event but had failed to act on their symptoms promptly," says Dr. Paul Galdas, the School's newest Assistant Professor. Paul comes to UBC from the University of Sheffield, England where he was a Lecturer. "I was aware of the excellent international reputation of the UBC School of Nursing as a research-intensive institution, particularly in the field of the social contexts of health behaviour—such as John Oliffe's work on men's health—and this initially stimulated my interest."

Paul's current research focuses on men's health, specifically men's health help-seeking behaviours. "I hope to grow and develop my research at UBC by investigating how men's health behaviours differ from community to community, in particular, the South Asian male population in BC who suffer from coronary heart disease. In developing the evidence base for men's health, my hope and aim is for gender to be considered alongside race and class in the planning and provision of all health policies and services."

"Expanding the Liver Network"

In November, the Canadian Liver Foundation held a tribute event at which they honoured Natalie Rock, BSN '92—a true leader in the field of hepatology. This was the first time in Canadian history that a nurse was so honoured.

As Clinic Director of the Liver and Intestinal Research Centre (LAIR), Natalie trains both nurses and physicians in the field of hepatology. Since graduating from the UBC School of Nursing, she has developed her nursing practice to include delivering presentations internationally, publishing over 23 papers and becoming one of the founding members of the Canadian Association of Hepatology Nurses (CAHN). Natalie was also instrumental in developing an effective nursing model for the LAIR Centre which has been duplicated by other clinics in British Columbia, the Prairie provinces and Australia.

Natalie also works as a consultant for international pharmaceutical companies. "When a research study is developed, the objectives are typically two-fold: safety and efficacy of the drug being studied. The purpose of my involvement has been to focus on the needs and rights of the patient," she says. This includes adherence to treatment and quality of life. Due to the model created, the LAIR Centre has a high rate of clinical studies and the highest adherence rates to conventional treatments.

Since the CAHN was founded, the number of nurses focusing on liver disease has grown to over 100. "Sharing information has improved my practice by helping me to explore and expand on what I have developed with feedback from other nurses in this field," she says. "I never dreamed that I would be fielding phone calls from other health care professionals all over Canada asking for my advice. This is simply amazing."

Natalie's passion for her practice in this distinctive area is also amazing, and the School congratulates Natalie on her work and her recent recognition.

Clinical Practice Innovation

Caring for the Health Care System

"My interest in improving health care stems from my desire to really make a difference for patients and for the people who live in our community," says Sue Carpenter. Sue is a 2005 graduate of the UBC MSN program delivered in collaboration with Thompson Rivers University (TRU). Her capstone degree project was an examination of the impact of emergency room overcrowding on staff and patients and proposing solutions. "I studied what other countries were doing to address emergency department congestion," says Sue. "Historically, emergency departments tend to be the ones left to deal with congestion. The more the system can be involved—acute care, home care, community, etc.—the more help there is to solve the problem. We need to be sure the system recognizes that emergency patients are everyone's responsibility."

In her capacity as Corporate Director of Emergency Services for the Interior Health Authority, Sue works with 35 emergency departments across the region. "Because we have several small rural communities, access to service and sustainability of coordinated service are very important." An idea that Sue uncovered as a result of her MSN project was the creation of multidisciplinary "access and flow" teams including senior leadership. Toward this end, Sue and colleagues sponsored a series of "Decongestion Forum" sessions. At each, invited physicians, nurses and other health care professionals were challenged with the question "What would you do in your own sector of health care in order to decrease the emergency congestion?" These initiatives stimulated working together to share the responsibility of congestion and to create proactive solutions. Although there is no "quick fix," says Sue, "we are seeing incremental differences." Her colleagues, however, see these initiatives as having province-wide impact. Recently, they acknowledged Sue's work in this area with the Thompson Rivers University Distinguished Alumni Award for professional achievement.

Sue has also been active in further key initiatives to resolve health care system challenges. Faced with an unexpectedly high potential rate of attrition among nurses in the ICU, Sue organized in-house critical care training programs in partnership with the British Columbia Institute of Technology (BCIT) and the provincial government. Drawing on evidence from the literature, she also helped shape a new strategy for helping with staffing shortages. By "over hiring," or assigning an extra nurse on each shift to provide vacation and sick relief, she demonstrated that it was possible to reduce last minute relief nurse requirements. "At the beginning it was difficult to convince everyone of the program's value because of the risk in paying for an extra shift," says Sue. "However, I knew it was right. Our casual nurses wanted full-time and this gave us the opportunity to build relief into the schedule."

"Sue has led Interior Health Emergency Services in directions that many individuals within the system thought were not possible," says Tom Fulton, Professional Practice Leader and Chief Nursing Officer, Interior Health Authority. "Our multiple and culturally varied emergency departments have been drawn together to work collaboratively on system-wide approaches to unending challenges. Sue has been able to facilitate these diverse groups and support them in identifying common issues and solutions."

"I am very fortunate to love my work. It is not hard to give of your time when you believe you can make a difference for providers and patients. Winning an award for that is quite overwhelming, and it fuels my passion even more." Norma Watts(l), co-chair of the TRU Alumni Association Board of Directors, Sue Carpenter and Sharon Simpson (r).

Sue recognizes the influence graduate education has had on her ability to advance patient and staff care within Interior Health. "The UBC/TRU cooperative was a great opportunity for me. I had just started my new full-time role as Corporate Director of Emergency Services, so this provided me with the opportunity to live at home and enroll in the program," she says. "It was great to have a program coordinator who lived in Kamloops as well."

Sharon Simpson, Assistant Professor at the TRU School of Nursing and on-site program coordinator for the Kamloops-based students, agrees that the joint initiative has been an excellent opportunity. "Many nurses in our community have told us they could not have obtained a graduate degree if this opportunity had not been made available," Sharon says. "I know that other faculty members in our School have also been involved in the UBC program in ways that have expanded their learning."

For Sue, returning to complete her master's degree at UBC has given her the confidence she required to take on a more senior position within her local Health Authority and to develop care delivery programs with the potential to really make a difference. "It is great to have an impact on clinical care from this position and to continue to improve the experience for both staff and patients."

Development

Ask, Listen and Learn

Kirstine Griffith, BASc'45, UBC School of Nursing, who also holds an MA, exemplifies the image of creative ongoing nursing alumni involvement. Inspired by nursing texts that encouraged a spiritual dimension of care but were devoid of specific information about world religions, Kirstine wrote a resource book entitled "The Religious Aspects of Nursing Care." Drawing on information from Canadian census reports on the diversity of religions practiced in Canada, and soliciting the help of colleagues and experts for editing and advice, Kirstine has created a guide that attunes nurses to practices they may never have encountered so that they can provide culturally safe care. "It's not enough to identify a patient's religion," says Kirstine. "Nurses need to ask questions about practices and listen."

Kirstine is well aware that matters pertaining to religion raise sensitive issues within health care, and there are important controversies as to how to teach nurses about religious practices. "My intention was to ease the role of nurses in caring for patients when they may not know of the religious practices their patients follow," she says. There are times when it is extremely helpful to understand how fasting periods could influence medication administration, how modesty preferences affect preparation for surgery, or how family rituals surrounding impending death affect patient care timing. Undaunted by entering a potentially contentious debate on such matters, Kirstine continues to update the information contained in the book, which is now in its fourth printing.

Beyond making this specialized form of knowledge available to students and faculty,

Kirstine Griffith, posing with her resource book, enjoys using the profits of her book sales to help fund scholarships for students.

Kirstine donates all of the profits from the proceeds of each volume sold to various nursing scholarships, including a nursing scholarship fund at the UBC School of Nursing. "We really value the support of alumni like Kirstine," says Dr. Sally Thorne, Director, "who are finding areas of need and filling them with thoughtful solutions. Not only has Kirstine created an excellent resource for practicing nurses, she has also found a creative way in which to help the future generation of nurses through her financial generosity."

Tax Advantages for Gifts of Publicly Traded Securities

Do you own securities, such as corporate shares, that have performed well over many years? If so, you might wish to consider the potential tax advantages of donating them to the UBC School of Nursing.

The May 2, 2006 Federal Budget has created even greater incentives for making direct donations of securities to Canadian charitable organizations, including UBC. In the budget, the government announced the complete elimination of capital gains tax for direct gifts of publicly traded securities.

By contrast, if an individual sells securities and donates the sale proceeds to a Canadian charity, 50% of the realized capital gain on the sale of the securities would be taxable.

As an example, by directly transferring $50,000 worth of securities to UBC, you save $8,740 in taxes (based on a $40,000 capital gain) when compared to selling the securities first and then donating the proceeds. Additionally, your after tax cost for the gift is just $28,150 because of the significant tax credit you receive for your charitable gift.

When you donate the securities by direct transfer, you receive an immediate donation receipt for the fair market value of your securities as of the date they are received by the University. Shares received by UBC are immediately sold and the cash proceeds are used according to your wishes.

CELESTE TAYLOR
Major Gifts Officer
(604) 822-9959 (call for a confidential conversation).

"By gifting securities to UBC, donors endow bursaries for low-income students, purchase greatly needed equipment, fund important research, or commemorate a lifetime of work in a particular field of study," says Celeste Taylor, Major Gifts Officer. "It is my privilege to match their wishes with the School's many needs."

This is not intended to be legal or tax advice and UBC strongly encourages donors to speak to their professional tax advisor before making a significant gift of publicly traded securities.

TouchPOINTS

Touchpoints is published by the School of Nursing, Faculty of Applied Science, The University of British Columbia.

Editor: Sally Thorne
Associate Editor/Writer: Julie Lees
Editorial Advice: Dr. Marilyn Willman
Design/Production: Tandem Design Associates Ltd
Printing: Rhino Print Solutions

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PUBLICATIONS MAIL AGREEMENT NO. 40681575
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