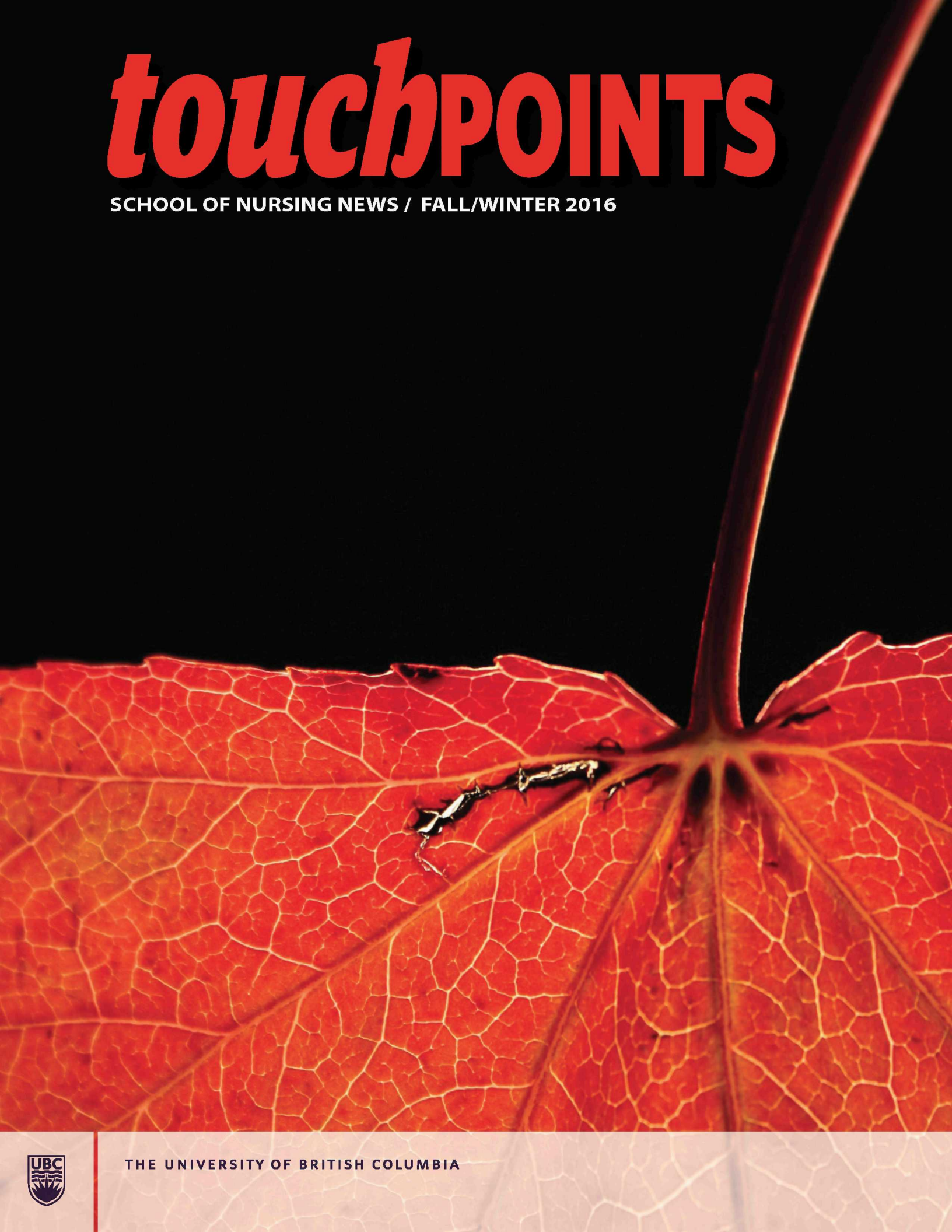
touchPOINTS

SCHOOL OF NURSING NEWS / FALL/WINTER 2016



THE UNIVERSITY OF BRITISH COLUMBIA

Photo: Don Erhardt

Director's Message

I recently had the pleasure of attending the 50-Year Reunion for the class of 1966 and the next weekend, the 25th reunion of our PhD program. Surrounded by graduates from the class of 1966, to our current PhD students, listening to their stories and feeling their energy, I began to think about how our programs have changed over the years, and what we can expect to see in the years to come.

Our brand new Master of Health Leadership Program – Clinical Education along with our MHLP-Seniors Care program, are examples of how we are meeting the needs of a growing trend: nursing leadership is recognized globally as absolutely necessary for the development of safe practice environments and quality care. An informatics revolution has occurred, taking practice, research, and education beyond a specific time and place. Rather than *processes*, the emphasis for nursing is now on *outcomes*, in recognition that good decision-making requires data. Centres of nursing excellence now cross institutional boundaries, and the research base of nursing has become more visible with doctoral programs, post-doctoral training, institutes of nursing research, and research societies. The nursing voice is sought in journals, standardization and benchmarking initiatives, competency development, and policy statements. Even the students themselves, who are diverse in age, gender, race and learning style, now more than ever reflect the populations they serve. As a result of these influences and more, members of our School and nursing community work together to discuss, develop, and apply emerging theories to our courses to refine our dynamic and flexible programs so they continue to accommodate the changing face of nursing.

This issue will confirm such changes. To get a sense of where we've been, read about the highly successful Annual Conference of the Canadian Association for History of Nursing at the historically rich venue of St Paul's on pages 4-5 and our PhD reunion on pages 14-15. Our new MHLP is featured on page 18, and we've highlighted some of our research initiatives on pages 8-9. Find an example of the nursing voice in policy-making in Dr Rodney's article on pages 6-7. To see what I mean about the diversity of our students, read pages 11-13. This issue holds much more, revealing not only our goals as outlined in our strategic plan, (en)VISION 2020, but also the amazing resources and community members who will help us achieve those goals.

Ultimately, our goal is to prepare the graduates of each of our programs to charge onto the global stage, fully prepared to meet any current challenge, and the ability to adapt to whatever the future may hold. In that future world we can only imagine, I trust that the School of Nursing will remain poised and prepared with the programs and expertise to help our present and future nurses meet those challenges.

Sincerely,

Suzanne H. Campbell

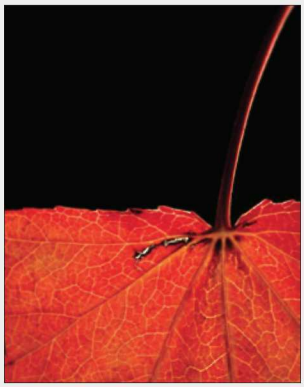
Suzanne Hetzel Campbell, PhD, RN, IBCLC
Director

"A major force in the history of the program has been the individuals who foresaw the effects of changing trends, who anticipated and envisioned the future and who responded to the challenges."

Glennis Zilm and
Ethel Warbinek - *Legacy*

ON THE COVER

This "Season of mists and mellow fruitfulness" is as good a time as any to consider our history, our future, and the cycle of life.



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School of Nursing

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EXPLORING HISTORICAL PERSPECTIVES

on Nursing Education, Practice, and Entrepreneurship

The Annual Conference of the Canadian Association for the History of Nursing (CAHN/ACHN) took place on June 16, co-hosted by the UBC Consortium for Nursing History Inquiry and the BC History of Nursing Society. The conference had a strong international representation with five nurse educators from several universities in Spain, several registrants from the US, and two attendees from the UK's Centre for the History of Nursing and Midwifery. In total, there were 68 registrants, including 12 students and a post-doctoral fellow.

The Hannah Lecture, sponsored by Associated Medical Services, was delivered by Linda Bryder, a medical historian at the University of Auckland, New Zealand. She spoke about the ways that her focus on nurses has enabled her to employ a social historical lens to her research on tuberculosis, public health, and women's health. The conference also featured an opening panel on Aboriginal Health History which was held in acknowledgement of the publication of the Truth and Reconciliation Committee reports in December 2015. Panel speakers included Dr Bryder, Dr Laurie Meijer Drees and recent UBC School of Nursing MSN graduate April MacNaughton.

One of the new innovative features of the conference this year was a live interview! Dr Lynn Kirkwood interviewed Dr Alice Baumgart about her incredible experiences as a nurse leader. It was a fantastic conversation and we look forward to this as a regular feature in conferences to come.

The banquet was a great opportunity to connect and re-connect with friends and colleagues. The dinner featured an opera performance.

The closing panel on nursing in the context of war and peace was another highlight of the conference, featuring Andrea McKenzie, Susan Armstrong-Reid and Christine Hallett.

Contributed by Lydia Wytenbroek

"Brains, Guts and Gumption"

St. Paul's Hospital (Providence Health Care), proved the perfect venue for an event celebrating the history of nursing, as it is one of the oldest hospitals in BC. It was founded in 1894 by the Sisters of Providence as a 25-bed compassionate care hospital. Attendees were able to explore the hospital's rich history through a guided tour. This included a detailed timeline touching on historical events that have impacted the hospital, such as the population explosion during the Klondike gold rush–prompting expansion, and medical advances such as the hospital's first X-Ray machine, purchased in 1906. Of singular importance were the contributions of the nursing sisters throughout the years. A hallway in the acute care building is lined with nursing graduation photographs dating back to 1911, offering, among other things, a glimpse into the history of nursing uniforms. Notably, the original plans for St Paul's had been developed by Mother Joseph of the Sacred Heart: a Sister of Providence who had also been instrumental in building two other BC hospitals, and who has been honoured by the American Institute of Architecture as "the first architect of the Pacific Northwest" - an excellent example of the conference title: "Brains, Guts & Gumption", as well as a testament to the resourcefulness and leadership qualities of nurses in general.

Photos : Helen Vandenberg

Opposite Page: A view of St Paul's Hospital.

Above: Graduate students from the Nursing History Research Unit, University of Ottawa with CAHN President Lydia Wytenbroek (in red); A tour of St Paul's historic photograph display; Dr Fernandez wins a historic doll of Nurse Edith Cavell, crafted by UBC Honorary professor Sheila Ranking Zerr; Members of the CAHN executive committee, Susan Armstrong-Reid, Gloria Stephenson, Helen Vandenberg, Anne-Marie Arseneault, Lydia Wytenbroek; President Wytenbroek presents the Vicky Bach Prize for best student paper to Marie-Pier Pagé; Dr Lynn Kirkwood interviews Dr Alice Baumgart; Catherine Haney and Geertje Boschma, organizers of the event; attendees at the closing panel.

TOWARD POLICIES FOR WELL-SUPPORTED EXITS

Addressing legal and ethical concerns of Medical Assistance In Dying

One of the biggest contemporary challenges facing health care delivery in BC and across Canada right now is the rapidly evolving implementation of Medical Assistance in Dying (MAiD). The history of this evolution is dramatic. In February 2015, the Supreme Court of Canada declared in Carter v. Canada that the absolute criminal prohibition of physician-assisted death is unconstitutional, and specified certain circumstances in which it must be lawful for a person to choose MAiD, giving the federal government one year to enact a legislative response within its jurisdiction.[1] Thus, the Canadian Nurses Protective Society explains:

> On June 17 [2016] the federal government's Bill C-14, *An Act to amend the Criminal Code and to make related amendments to other Acts, (MAiD)* became law in Canada. As a result, two forms of MAiD are exempt from criminal prosecution:
>
> - the administration of a substance to a person, at their request, to cause their death
> - the prescription or provision of a substance to a person, at their request, so that they may self-administer the substance to cause their own death.[2]

Further, now the Canadian Bar Association is urging the federal government to expand its restrictive new law on assisted dying, "to extend the right to assisted dying to people suffering strictly from psychiatric illnesses and to mature minors and to allow people diagnosed with conditions that will eventually cause loss of competence to make advance requests for an assisted death while they're still able to give informed consent."[3] While the Canadian Bar Association's proposed expansion of the new law is not taking place at this point in time, the dialogue around MAiD is intensifying across Canada, and implementation of Bill C-14 has begun.

Addressing the Challenges

The rapidly changing legislative and societal landscape around MAiD means that all health care providers, including nurses, must be proactive in ensuring that the public is supported and protected. MAiD will only be a meaningful 'choice' if there are also robust supportive and palliative resources available to Canadians so that MAiD does not become a 'default'.[4] And health care providers ought to be provided with the resources they need so they can ethically and effectively participate in comprehensive end of life care, where MAiD is only one option. Such care must include the implementation of a durable palliative approach, where there is a 'baseline' of supportive care services provided to all who are suffering and/or dying as well as more specialized palliative care interventions for those whose symptoms are complex and/or intractable.[5] As is articulated in a recent Joint Position Statement (p.8) by the Canadian Nurses Association, the Canadian Hospice Palliative Care Association and the Canadian Hospice Palliative Care Nurses Group (2015), the palliative approach to care:

> uses palliative care principles (i.e., dignity, hope, comfort, quality of life, relief of suffering) with people facing chronic, life-limiting conditions at all stages, not just at the end of life. It reinforces personal autonomy, the right for persons to be actively involved in their own care and a greater sense of control for individuals and families. The palliative

approach "does not link the provision of care too closely with prognosis"; rather, it focuses (more broadly) on "conversations with [people] about their needs and wishes".[5]

Indeed, at the Annual General Meeting of the Association of Registered Nurses of British Columbia (ARNBC) in June of 2016, nurses in BC passed resolutions to:

1. support equitable access to palliative care approaches in the context of Medical Assistance in Dying (MAiD) through provincial educational and policy initiatives in British Columbia;[6] and
2. study the issues of MAiD in relation to people who struggle with mental health issues, mature minors, and those who have Advanced Directives in the context of nursing values and nursing practice.[7]

Given the widespread inequities we have across Canada in access to resources for health and health care,[8,9,10] action on these resolutions is crucial in British Columbia as well as across Canada.

UBC Nursing Leadership

The UBC School of Nursing has contributed—and is well-positioned to continue to contribute—to the important work laid out in the ARNBC resolutions. For example, four of the lead researchers working on articulating and implementing a palliative approach to care through a research/practice consortium known as iPanel are graduates of our UBC doctoral program in nursing--Dr. Barbara Pesut (a faculty member from UBC Okanagan), Dr. Sheryl Reimer-Kirkham and Dr. Rick Sawatzky (faculty members from Trinity Western University), and Dr. Kelli Stajduhar (a faculty member from the University of Victoria). Further, our UBC Nursing faculty member Dr. Sally Thorne is on the iPanel Advisory Board. And the authors of the two ARNBC resolutions noted above include myself (a UBC Nursing faculty member and graduate of our UBC doctoral program in Nursing) and Ms. Lynn Musto (a UBC School of Nursing doctoral candidate and a faculty member from Trinity Western University) as well as Dr. Reimer-Kirkham.

Members of our UBC School of Nursing faculty have programs of research that can continue to inform research and policy work related to MAiD. Our faculty has expertise in areas such as the care of older adults, end of life care and palliative support, health care ethics, and the support of populations who have been marginalized. For example, faculty members Dr. Jennifer Baumbusch (also a UBC PhD graduate), Dr. Jennifer Kryworuchko, and Dr. Alison Phinney have robust programs of research focusing on end of life care and the care of older adults. Together with the rich array of undergraduate and graduate students we are blessed with at the UBC School of Nursing, we can continue to work towards more accessible palliative approaches to care, more specialized palliative care interventions as needed, and a thoughtful and well-supported access to MAiD when necessary.

Contributed by Dr Patricia (Paddy) Rodney,
Associate Professor

For references please contact the School of Nursing or click here. DR RODNEY has given a RESEARCH ROUNDS presentation on this subject accessible on our VIMEO site. For more, please visit: https://vimeo.com/164491692

MEN'S HEALTH

Providing Outlets for Positive Masculinity to Two High-Risk Populations

Timothy Laidlaw and Dr. John Oliffe greet The Honourable Rona Ambrose, Leader of the Opposition, on Parliament Hill

COMING HOME: VETERANS UNPACK THE INVISIBLE WOUNDS OF WAR

On September 20th, Timothy Laidlaw, veteran of the war in Afghanistan, along with our faculty member Dr John Oliffe, met with Rona Ambrose, M.P., to discuss men's mental health issues, with a focus on men in the military. As part of the visit, The Honourable Geoff Regan, P.C., M.P. , Speaker of the House of Commons, with Joyce Murray, M.P., co-hosted a special invitation-only performance of ***Contact! Unload***, a 15-minute theatre performance featuring Canadian veterans telling their stories of transitioning back to civilian life.

According to the Speaker's invitation:

> This compelling and honest theatre piece was recently shown at Canada House in the UK for Princes Harry and Andrew, and it has been performed 12 times. This Men's Health initiative is co-developed and performed by graduates of the Veteran's Transition Program—one of the most successful programs for returning veterans in the country.

The performance was followed by a Q&A session between the veterans and MPs and then an open discussion was held on how legislators might increase the rate of access to veteran support services.

For more on this initiative, please visit:
http://menshealthresearch.ubc.ca/

Submitted by: Joanna Ho, for Men's Health Research

WORK 2 GIVE

Aboriginal men in Canada are significantly over-represented within the criminal justice system. Incarcerated men often have significant idle time on their hands, and this inactivity contributes to an institutional subculture associated with substance use, violence, gambling, debt, self-harm, and depression. The paramilitary and hypermasculine structures of prison life exacerbate pre-existing mental health problems; incarceration itself is hazardous to men's overall health and rehabilitation.

Through an initiative called Work 2 Give, Aboriginal inmates make items needed by some Tsilhqot'in communities in BC. Supported by the Movember Foundation Innovation Fund, this research project, headed by Helen Brown, focuses on how Work 2 Give impacts the inmates themselves and their rehabilitative processes, as well as the First Nations children and families receiving the needed food, clothing, furniture, and cultural items.

Handmade sock monkeys await delivery to indigenous families.

Submitted by Helen Brown, Associate Professor

Photo: Martin Dee

PARKINSON'S, DEPRESSION, AND DATA

CPCSSN assists in study of prescribed medication

A Parkinson's disease diagnosis can be a devastating blow to any patient; however, never before has Canadian patient data been analysed to determine the treatment patterns for a concurrent diagnosis of depression.

UBC graduate Kimberly Singian, RN, MSN, with co-authors, Dr. Morgan Price, Dr. Victoria Bungay, and Dr. Sabrina Wong, analysed the associations between Parkinson's disease, depression, and related medications. The study was made possible with the use of the Canadian Primary Care Sentinel Surveillance Network (CPCSSN), which extracts data from a variety of electronic medical records (EMRs) in use across Canada, with input from more than a thousand family physicians and nurse practitioners, and creates a repository of clinical EMR data from over a million patients. It is then possible to pull together data from patients across Canada who have similar diagnoses.

Thanks to CPCSSN, Singian's study, *Using Canadian Primary Care Sentinel Surveillance Network data to examine depression in patients with a diagnosis of Parkinson disease: a retrospective cohort study* is the first in Canada to look at the pharmacologic management of depression in patients who have Parkinson's disease in primary care. "Parkinson's disease is not just a motor disease," says Singian. "It is also accompanied by non-motor features that can negatively affect quality of life," including depression.

It is no wonder, then, that current evidence shows depression occurring in up to half of cases and in this study, almost 40% of Parkinson's patients have a concurrent diagnosis of depression. The study further reveals that depression in these patients is treated primarily with selective serotonin reuptake inhibitors (SSRIs) type antidepressants, such as Zoloft, Paxil, or Prozac.

Singian's research team found that Canadian Parkinson's guidelines for depression management may need to be revisited because the guidelines suggest that the first line of treatment for depression in those with Parkinson's is amytryptiline, whereas in practice, the prescribing of SSRIs is predominant. This study also indicates that more evidence and decision-support tools should be offered to examine the efficacy of antidepressants and to assist clinicians in evaluating the frequent SSRI prescriptions in this patient population.

Comparing real-time prescribing data in Canada with the most up-to-date healthcare knowledge is key to ensuring the best in patient care.

To read the study in the Canadian Medical Association Journal, visit http://cmajopen.ca/content/4/3/E417.long

Photo: Lindsey Donovan Photography

Photo: Lindsey Donovan Photography

BRENDA POULTON

Nursing Alumnus Wins Fraser Health ABOVE AND BEYOND Award

Each year, Fraser Health recognizes employees, physicians and volunteers who go above and beyond to improve patient care and services in local communities with their annual Above & Beyond Awards. This year, Fraser Health celebrated 19 incredible individuals and teams making a difference in health care.

Among the winners was Royal Columbian Hospital Nurse Practitioner Brenda Poulton, who serves as an Adjunct Professor in UBC's School of Nursing. She was honoured with a Lifetime Achievement Award.

Brenda has made it her mission to ensure patients can be as pain free as possible. She manages the post-operative pain needs of surgical and trauma patients at Royal Columbian Hospital, where she has spent more than 30 years in nursing. She was one of Fraser Health's pioneering nurse practitioners.

During her career, she has been instrumental in shaping Fraser Health's approaches to managing acute pain. On a daily basis she manages a large load of complicated patients and follows each of them throughout their surgical journey, serving as an expert resource for families and employees on best practices.

Together with an anesthesiologist, she helped establish a Diagnostic and Interventional Pain Clinic at the hospital. She has also served as the Fraser Health nursing lead for the province's Enhanced Recovery after Surgery (ERAS) Colorectal Collaborative. Colleagues praise her as a "true ambassador of the nursing profession" and an "inspirational nurse leader" who is dynamic, energetic, and unwavering in her advocacy for patients. Her dedication to education and mentorship means she is rarely seen without a novice nurse or student by her side. She extends her mentorship by volunteering her time teaching pain management sessions to nurses studying for their Canadian Nurses Association certification.

In addition to her roles within the hospital, she sits on multiple local, provincial, and national committees as a pain expert and has presented at international conferences. She is a founding member of Pain BC, and served as a director for six years. She has also served as a member of the Canadian Pain Society, and led an interdisciplinary team which developed a pain course offered at the University of British Columbia. Brenda is the recipient of a Queen's Diamond Jubilee Medal in 2013, a Canadian Pain Society Nursing Excellence Award in 2014, and a Pain BC Provider Recognition Award in 2015.

Fraser Health's Above & Beyond Awards were presented on September 21 at a ceremony at Surrey City Hall.

To read more inspiring stories and watch videos on these and other health care heroes in Fraser Health communities, visit: http://news.fraserhealth.ca/News/September-2016/2016-Above-and-Beyond-Award-recipients.aspx.

Contributed by: Elaine O'Connor, Fraser Health

WE HAVE AMAZING ALUMNI STORIES
https://nursing.ubc.ca/alumni/amazing-alumni-stories

TALINE ROUND

BSN Candidate 2017

I graduated with a degree in Kinesiology from Simon Fraser University and worked a variety of jobs until I found myself in a full-time career working in Occupational Rehabilitation. I really enjoyed helping clients rehabilitate injuries, as well as being a part of the team that assisted with a client's return to work and activities of daily living.

As much as I enjoyed my work, I had an innate desire to do more. I watched clients struggle with anxiety, depression, chronic pain and post-traumatic stress disorder after suffering severe injuries. Although I was skilled in rehabilitation, I could be better-equipped to help people in a more holistic way. I also wanted to take on a leadership/mentorship position in the future. I had moved as far as I wanted to go in this line of work.

"I soon realized that I was working with a vulnerable population, and that I needed to take care of myself physically, mentally, and emotionally."

After some research, mentorship, and soul-searching, I applied for the BSN program at UBC. After a day shadowing a Clinical Nurse Specialist working in palliative care, I decided nursing would suit my personality and would equip me with the skills to fulfill my desire to help people. I hope to match the grace, compassion, and strong leadership skills that I observed that day. I was elated to find out in 2015 that I had been accepted into the UBC School of Nursing.

My road towards the completion of my degree has not been without its difficulties. My very first rotation on an acute medicine floor really opened my eyes to the challenges of nursing. It was tough being in a place where I needed do so much, but couldn't help enough due to my lack of knowledge, skills, and abilities. There were times when I really battled with anxiety. Despite my struggles, I was well-supported. I was so fortunate to have an excellent clinical instructor, and the faculty have been so encouraging and supportive. I soon realized that I was working with a vulnerable population, and that I needed to take care of myself physically, mentally, and emotionally outside of clinical time so that I could maximize my learning opportunities and provide the best care. I make my mental health and wellness a priority now. I am in a better headspace and am much more confident in my abilities. Although I am still new to nursing, I have learned I have so much to give.

Over time my passion for nursing has grown. This career path is really made for me. I am much better equipped to provide care safely, confidently and compassionately. I now see nursing as a beautiful and selfless way to serve others. Although I am uncertain of what my future may hold, I have discovered a passion to pursue a career in Mental Health. I also love working with children, and I believe Pediatric Nursing will have a place in my future.

As a UBC Nursing Student Research Award recipient, I have been working over the summer on research projects with Dr. Maura MacPhee, Associate Director of the Undergraduate Program. I have also been recently accepted for an Employed Student Nursing position in Medical Oncology, and I plan to volunteer in a mental health-related field in the fall. I am so grateful for all of the wonderful opportunities that have been made available to me as a student nurse. I look forward to having a career that is dynamic, engaging, and full of opportunity.

LINDSEY (MEIDINGER) STRANG

MN-NP 2016

As a student taking a few general science courses at the University of Victoria, I realized that nursing is the perfect way to use the knowledge I was acquiring and apply it to benefit others. I obtained my BSN in 2007 and worked in general medicine for a year before moving to Vancouver to take emergency training at BCIT.

As a UVic student I took my final consolidated practicum in Guatemala. For five weeks our team set up adult, paediatric, and women's health clinics in rural and remote areas. The nurse practitioner who accompanied us ran the women's clinics and I was in awe of her knowledge and autonomy. I aspired to work in that capacity one day.

"Nurse Practitioners bring a nursing lens to the primary care role, and we have the autonomy and knowledge to provide holistic and comprehensive care to patients. "

So after seven years as an Emergency RN at Vancouver General Hospital, and including a year of maternity leave while studying, I finally achieved my goal. This year I graduated from the School of Nursing at UBC as a Nurse Practitioner. I love challenging myself academically, and the nurse practitioner program seemed like a perfect fit for me. I especially enjoy classroom work; I couldn't have imagined doing this program by distance education. The UBC program really helped prepare me for a hands-on practical career by providing lab time and fabulous, approachable instructors to help demonstrate what it means to be an NP. Our primary care classes were my favourite classes. This is where we learned the nitty gritty of being a primary care practitioner and what it means to provide evidence-based care. It was a big switch from being an RN to becoming an NP, and this is the course that prepared us for this transition.

As daunting as my final culminating project was to take on, in the end I really enjoyed writing it. It really helped consolidate what it means to do a thorough research review in order to provide evidence-based practice. My project entitled: Poly*cystic Ovary Syndrome in Adults: A literature review and clinical practice guideline for the primary care nurse practitioner* won the award for Outstanding Culminating Project.

When I'm not pursuing my career, my studies, and my family life, I enjoy CrossFit and hiking. My passion for health promotion and disease prevention is very much integrated into my life. My husband and I try to stay as fit as we can so we can keep up with our two-and-a-half year old daughter and hopefully live long, healthy lives. I always try to incorporate discussions about prevention with my patients because I know how empowering this can be in maintaining an overall healthy lifestyle.

My dream job is to work in a women's health primary care clinic, but I also have a passion for emergency nursing and I believe a nurse practitioner role can make a big impact on reducing wait times and increasing patient satisfaction within the emergency department.

In the coming years, I would love to see the NP profession become more widespread than it is now. I have such a passion for the NP role and how it can have a positive impact on both our health care system and patient care. I would love to see NPs working in a variety of areas, in both hospitals and the community, and am so excited to see so many nursing colleagues entering the program.

ZACHARY DALY

BSN Candidate 2017

It took me a little while to come to nursing, and now that I have, I am incredibly happy with the choice. I first did an undergraduate degree in Agriculture, with a minor in Mathematics. After this I worked for some time in the agricultural sector, both as a farmhand in Ontario and British Columbia, as well as by working on research related to the pollination services provided by wild and domestic bees.

I wanted to continue my schooling, and so enrolled at UBC to undertake a Masters of Science in Integrated Studies in Land and Food Systems. I specialized in nutrition in the international context, and my research took me to Northern Zambia. There I studied anaemia in order to better understand the regional etiology, and so hopefully inform future nutrition interventions to tackle the issue.

As part of my field work, I realized that I wanted to have the knowledge and skills to assist those in need more directly; I felt this specifically after encountering some very ill individuals during my fieldwork. After much deliberation, I decided that nursing was the way to go, and after looking at various programs, decided that the one that most aligned with my personal values was the UBC School of Nursing. With this in mind, I finished my thesis, took the necessary pre-reqs, and applied. I was thrilled to be accepted! In the interim I taught nutrition as a sessional in the Faculty of Land and Food Systems, as well as overseas.

"As part of my field work [abroad], I realized that I wanted to have the knowledge and skills to assist those in need more directly; I felt this specifically after encountering some very ill individuals."

I went into nursing without a clear idea of where I wanted to take my career. Only after joining the nursing program at UBC did I truly understand that there are so many different specialities. I decided to keep my mind open and see where the degree would take me. While I have loved all of my rotations, in the end Mental Health has been my absolute favourite, and I have decided that this where I want to work, possibly with a focus on addictions. While I am keen to take my nursing overseas one day, I hope to use the skills I have learned here at UBC to make a difference locally as well. At some point I may return to school to get my PhD in nursing.

During my time at UBC I have also been involved with extra-curricular activities. I have volunteered with the AMS Sexual Assault Support Centre for the last three years doing outreach, and am currently serving as the Treasurer of the Nursing Undergraduate Society. I feel like my time at the UBC School of Nursing has been very well spent, and through it I have met many wonderful people. I can not wait to go forward with this career!

Photos of our students at Graduation, Orientation, and community events are in our FLICKR photo collection: https://www.flickr.com/photos/ubcschoolofnursing/

NURSING PHD REUNION

A Vision for the Future of Doctorally Prepared Nurses

Guest Speaker David Byres, SoN Alumnus and member of Providence Health Care's Leadership Team, addresses guests at the evening cocktail reception.

What were you doing in 1991? The School of Nursing was launching its PhD program, and a handful of students were taking their next step in advancing their nursing careers. Some of these first graduates recently joined with faculty, more alumni from the program, and current PhD students to celebrate the past and give focussed attention to the future of doctorally-prepared nurses. Guests gathered at the Robert H Lee Alumni Centre on September 17, 2016 for each of two events. The first began in the afternoon with a presentation on the history of the PhD program by graduate Paddy Rodney. Alison Phinney followed up with a review of the current PhD program, and then a panel of current students considered their "Vision for the Future of Doctorally-Prepared Nurses in Canada."

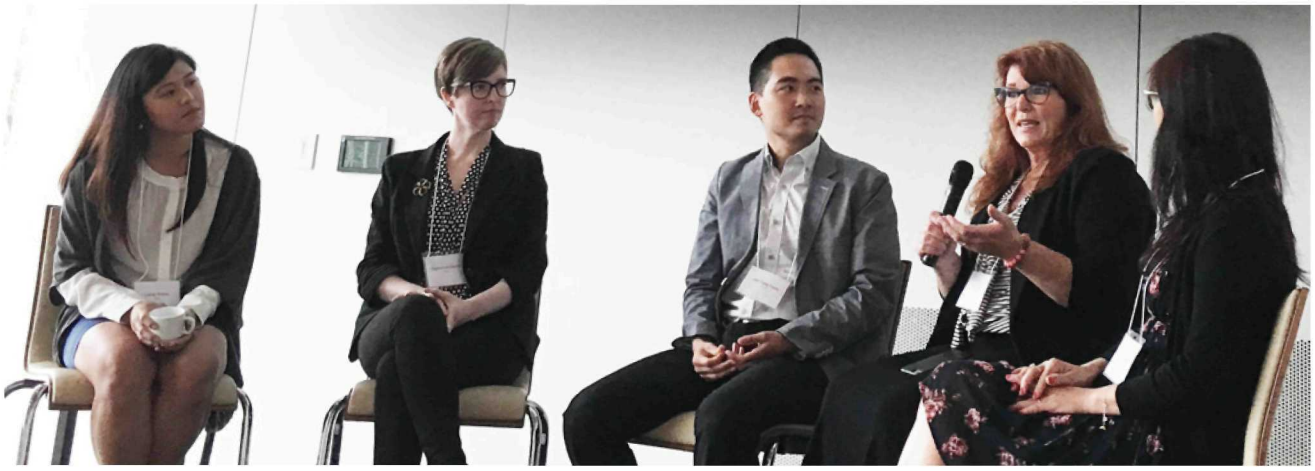
Those who would return for the evening session took a break to wander around campus, join companions for dinner, or catch up with colleagues. A few explored "The Nest" – the Student Union Building that opened in 2015.

The evening cocktail reception was equally well-attended and featured Dean Marc Parlange, Director Suzanne Campbell, and alumnus Sandra Lauck. The guest speaker, David Byres, continued the theme of the day with his views on "The Role of Doctorally-Prepared Nurses".

Dr Sally Thorne wraps up the afternoon session.

To read the Reunion Planning Guide visit: https://apsc.ubc.ca/alumni/reunions

Photos: Suzanne Campbell



Faculty members Drs Wendy Hall, Alison Phinney, and Paddy Rodney take their turns at the podium; current PhD students discuss the theme of the day L-R: Carla Hilario, Catherine Haney, Jae-Yung Kwon, Tracy Truant and Lillian Hung; guests enjoy the afternoon panel discussion.

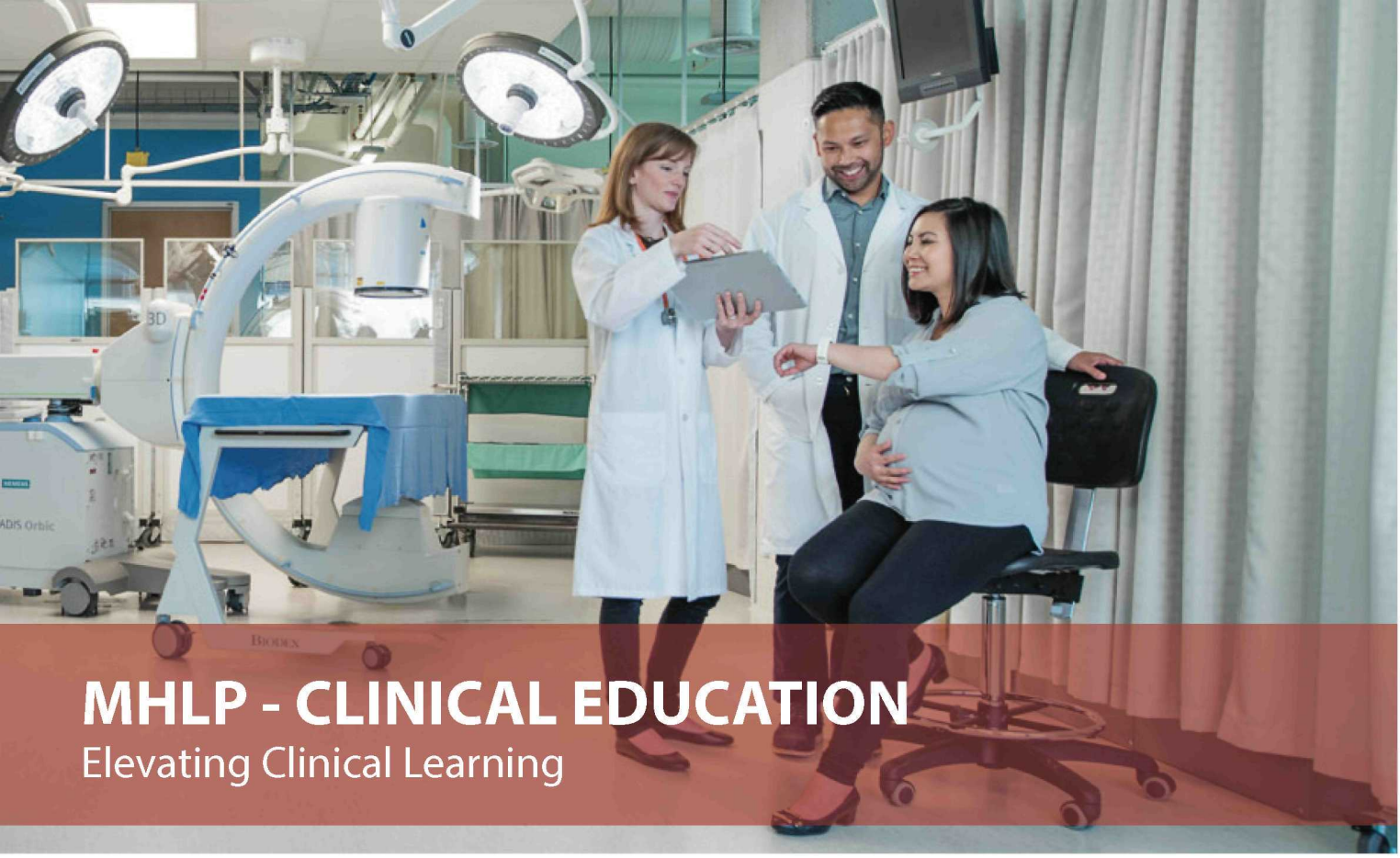
NURSING PARTNERSHIP & AWARDS GALA
2016

Each year the School of Nursing is pleased to host our annual gala event to honour our alumni and community partners. Alumni, faculty, students and staff such as those in the array of photos below, catch up with one another, share a few laughs, drinks and hors d'oeuvres, and take time to recognize the important work of our award recipients.

If you would like to nominate someone for the 2017 Nursing Alumni awards, please email cathy.ebbehoj@nursing.ubc.ca

Photos: vsaranphoto.com

Here, the 2016 Nursing and Partnership Award Recipients take a moment from the festivities to pose for a photograph with their hosts. From Left to right: Dr David Ostrow, accepting the Community Partnership Award on behalf of the Mr. and Mrs. P. A. Woodward's Foundation; Suzanne Taylor, Adjunct Professor, accepting the Award of Distinction for Gemma Woods; Pauline Voon, recipient of the Young Alumni Award; Patricia Woods, who received the Award of Recognition; Suzanne Campbell, Director; Vivian Lucas, recipient of the Donor Partnership Award; Colleen Varcoe, School of Nursing Alumni Engagement; Dean Marc Parlange, Faculty of Applied Science.



MHLP - CLINICAL EDUCATION

Elevating Clinical Learning

The changing landscape of health care, the introduction of new technologies and the identification of novel approaches to the provision of clinical care has created the need for highly proficient clinical educators. These leaders must be able to analyze practice trends, identify learning needs, and develop an educational strategy to address needs within a wide array of clinical practice contexts. UBC's new Master of Health Leadership and Policy in Clinical Education is designed for clinical educators to develop the skills required by top employers.

The UBC Master of Health Leadership and Policy in Clinical Education offers participants a unique and comprehensive blend of technical and professional development concentrated on learning how to analyze trends, and to design, deliver, and evaluate clinical education. The one-year program equips participants with the knowledge and expertise to direct inter-professional clinical teams and effectively manage the business of health care — people, systems and resources — in a clinical context.

Offered by the UBC School of Nursing, this inter-professional graduate-level degree will develop the skilled clinicians' perspectives and abilities to understand and analyze the educational implications of key trends. Participants will be equipped to articulate educational and business strategies that will enable health care organizations to meet practice and accreditation standards across diverse clinical disciplines.

A combination of clinical education expertise and a series of platform courses taught by faculty in the Sauder School of Business provides a foundation in project management, data analysis, communication and leadership skills. To advance their career, graduates will now have the tools to excel in creating caring, collaborative clinical environments — places where patients trust and have confidence in their care providers to achieve optimal health outcomes.

MHLP | **Master of Health Leadership and Policy**

PENDING APPROVAL BY THE MINISTRY OF HIGHER EDUCATION

LOOK FOR US IN 2017

VISIT MHLP.UBC.CA or EMAIL MHLP.APSC@UBC.CA TO LEARN MORE

Kudos

Annette Browne, Professor, is the recipient of the 2015 **John McNeill Excellence in Health Research Mentorship Award**
https://nursing.ubc.ca/news-events/news/30-nov-2015/ubc-nursing-professor-recognized-mentoring

Victoria Bungay, Associate Professor, received a **SSHRC-funded Canada Research Chair in Gender, Equity and Community Engagement**
http://news.ubc.ca/2016/02/09/ubc-receives-27-million-from-federal-government-to-support-researchers/

Wendy Hall, Professor, has received the 2016 **Canadian Association of Schools of Nursing Award for Excellence in Nursing Education**.
https://nursing.ubc.ca/news-events/news/21-sep-2016/wendy-hall-wins-casn-nursing-education-excellence-award

Emily Jenkins, Assistant Professor, has been awarded the **Outstanding Dissertation Award** for her doctoral thesis, *Contributing to the development of community-based knowledge translation through the creation, implementation and evaluation of a youth mental health promotion initiative*. Her supervisors were Dr Joy Johnson and Dr Vicky Bungay.
https://open.library.ubc.ca/cIRcle/collections/ubctheses/24/items/1.0166530

Sandra Lauck Clinical Assistant Professor and alumnus, received the 2015 **Nursing Leadership Award** from the **Canadian College of Health Leaders**
http://www.cchl-ccls.ca/site/awards_nursingleadership

Elizabeth Saewyc, Professor, to be inducted as a 2016 Fellow of the **American Academy of Nursing**
https://nursing.ubc.ca/news-events/news/24-jun-2016/elizabeth-saewyc-faan-2016

St Paul's Hospital Joins SoN in Landmark Partnership to Promote Cardiovascular Health

Mr. Mo Shariff, St. Paul's patient; Dr. Suzanne Campbell; Mr. David Byres, Executive Vice President for Clinical Integration and Renewal, Providence Health Care; Ms. Jennifer Gibson, PhD student and nurse educator at Cardiac Intensive Care Unit at St. Paul's; and Dr. Martha MacKay, Clinical Assistant Professor at UBC and Clinical Nurse Specialist in Cardiology at St. Paul's Hospital's Heart Centre

On February 25, 2016, UBC Nursing and St. Paul's Hospital announced the formation of a landmark partnership to improve cardiovascular nursing care at the hospital and across Canada. The new UBC and St. Paul's Hospital Professorship in Cardiovascular Nursing is undertaking leading research to inform best practices around cardiovascular nursing, and translate these evidence-based practices to nursing education at both the undergraduate and graduate levels at UBC.

The Professorship was born out of clinical research that clearly demonstrates the causal effect between nursing care and improved patient adherence to treatment and health outcomes. Clinical nurse specialists, in particular, who are trained in cardiovascular care, elevate quality of care and work with families towards holistically better health and in so doing, reduce health care costs for our communities.

The School of Nursing and St. Paul's are together raising $1,000,000 to support the work of the Professorship, and are aiming to have the funds raised in 2016 so that the Professorship holder can start work in 2017.

If you are interested in learning more about the Professorship, please visit http://www.support.ubc.ca/cardiovascular-nursing or contact Darya Sawycky at 604-827-0081 or darya.sawycky@ubc.ca.

Read our Strategic Plan **(en)VISION 2020**: https://nursing.ubc.ca/news-events/news/02-sep-2016/strategic-plan-online

CANADA RESEARCH CHAIR

Bringing BIG DATA to Qualitative Research

Marginalization is a process of exclusion that has devastating effects for individuals and communities. As the first recipient of a Canada Research Chair (CRC) in the UBC School of Nursing, Dr. Vicky Bungay is illuminating the complex multidimensional factors perpetuating marginalization among communities excluded along lines of gender and sexuality, including sex workers.

"The Canada Research Chair allows me to build and become more focused in the direction of the research that I do, but also in the methods that I use and the advancement of the approaches we use particularly in qualitative research," she explains.

From 2015 to 2020, the salary support and related Canada Foundation for Innovation infrastructure funding will help her to construct a research informatics lab to incorporate large data sets typically not feasible in qualitative analyses. This could include using multiple sources of data as well as longitudinal material to tap into the incredible nuance and power of qualitative designs that can be overlooked because they are difficult to analyze on a large scale.

For example, Dr. B=-ungay hopes to incorporate historical analyses of the evolution of policy alongside the impact on peoples' wellbeing, to examine whether shifts in policy have actually contributed to improvements or interacted in unexpected ways with other factors.

Ultimately, Dr. Bungay's SSHRC-funded Chair in Gender, Equity and Community Engagement will build on her research program to generate knowledge to enhance more effective and just social policies and programs to promote the well-being of those who are marginalized.

The School of Nursing Hybrid Model of Undergraduate Curriculum Delivery: a Seamless Approach for Preparing Our Future Nurses

We are currently revising curriculum for our accelerated (20 month) undergraduate program with a goal of having new course descriptions and learning objectives in place before the end of 2016. In tandem, we are developing a flexible curriculum delivery model to better meet student learning needs. The purpose of this TLEF project is to develop, implement and evaluate a seamless curriculum delivery model for our undergraduate program. Our proposed model will have four linked components: online learning, in-class active learning (e.g., case-based), skills lab simulations and community-based experiential learning. Flexible curriculum delivery will enable us to keep pace with health care trends and better prepare future nurses. Other project objectives are: faculty development (to ensure sustainability of the flexible delivery model post-funding); and enhanced community engagement through purposeful academic-health authority collaborations.

Milestones 2016

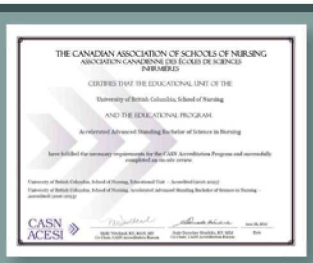
SPRING/SUMMER TOUCHPOINTS PUBLISHED

VICTORIA BUNGAY, CANADA RESEARCH CHAIR IN GENDER, EQUITY AND COMMUNITY ENGAGEMENT - FEB 9

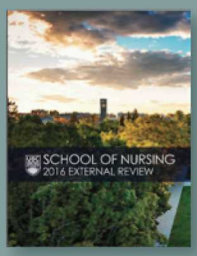
CARDIO PROFESSORSHIP WITH ST PAUL'S HOSPITAL - FEB 25

EXTERNAL REVIEW

GRADUATE RESEARCH SYMPOSIUM - MAY 4



CASN ACCREDITATION OF BSN PROGRAM AND UBC SCHOOL OF NURSING 2016 - 2023



ALUMNI AND PARTNERSHIP AWARDS GALA - MAY 5

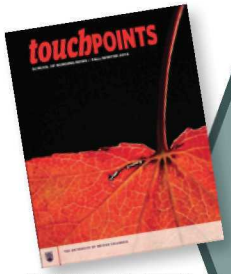
STUDENTS IN THE COMMUNITY

HOMELESS CONNECT - MAY 19

GRADUATION - MAY 31

(EN)VISION 2020

STRATEGIC PLAN



FALL/WINTER TOUCHPOINTS PUBLISHED

FLEXIBLE CURRICULUM DELIVERY MODEL PREPARATION

ORIENTATION DAYS - AUG 31

Farewell to Tarnia and Farah

Dr Tarnia Taverner

As our previous issue was heading to press, we said goodbye to two amazing colleagues who have moved on with their careers.

A tea was held for Dr. Tarnia Taverner in December as a send off to her new duties as the Director of Clinical Operations at Delta Hospital (Fraser Health Authority). Tarnia had been with us since 2009 as an Assistant Professor and an active educator in the graduate and undergraduate programs. She was also course leader for the adult/older adult professional nursing course, and an all-round fashion icon.

Ms. Farah Jetha

Ms. Farah Jetha entered into a long-term relationship with the School of Nursing in 1997 when she applied for the BSN nursing program. She obtained her MSN in 2013 and remained a dedicated and energetic Lecturer right up to her departure. In January she took her career to the next level at BCIT's School of Health Sciences as an Instructor in Perinatal Nursing, becoming yet another UBC School of Nursing grad who will continue to make an indelible mark on the world.

EVENTS

Visit the School of Nursing event listings online for the most up-to-date listings of all our events. Join us for NURSING ROUNDS and RESEARCH TOOLBOX sessions as well as special events and student Candidacy Oral Exams.

Many of these events are also available to attend remotely via live webcasting. Or if you miss one, find past talks archived on our Vimeo site.

EVENTS https://nursing.ubc.ca/news-events/events
VIMEO https://vimeo.com/user31710668

SAVE THE DATE

May 4, 2017

Nursing Partnership & Awards Gala

AFTERNOON SYMPOSIUM

Transformative Practices in Long-Term Care

Panelists: Dr John Keady, Dr Alison Phinney, Jo-Ann Tait, Isobel Mackenzie

Moderator: Sarah Leavitt

Time: 3:00 - 5:00 pm

MARION WOODWARD LECTURE

Dementia: New Paths to Understanding

Speaker: Dr. John Keady

Time: 7:00 to 8:00 pm

Date: October 27, 2016

Place: UBC Robson Square - Lecture Theatre
800 Robson Street, Vancouver

Register: www.nursing.ubc.ca/news-events/MWL2016
For assistance call 604.822.1409

From One Generation to the Next

Nursing Class of 1958 Emergency Award

Although backgrounds differed—some hailed from the farm, others from the inner city—the Class of 1958 faced the same long nights in the Vancouver General Hospital. At that time, UBC nursing students spent the entire 27-month practicum in those antiseptic wards. At night, they were even prevented from leaving, locked up inside that quiet, labyrinthine building because administration sought to "protect young women." Yet these women wielded grown-up responsibilities—bedside care and treatment—for which many felt almost unprepared.

Today the UBC Bachelor of Nursing Science program looks quite different. But in the 1950s, students received a monthly stipend cheque of $8 to $10; even when translated into modern currency, the stipend might cover toothpaste and floss. "We were poor," says Arlene Aish, a member of the 1958 class. "But we were poor together."

All of these challenges brought the Class of 1958 closer together, forging a lasting bond that, half a century later, motivated several classmates to launch an endowment for nursing students. Considering the cohesive nature of that class—many are still friends today—the class opted for a group fund, rather than an individual one. Unlike your average scholarship or bursary, the emergency award helps students who encounter unforeseen financial trouble.

Since establishing this endowed fund five years ago, the donation has (at the discretion of the Nursing Director) come to the aid of eight undergraduates, covering tuition, textbooks, groceries, even rent. In several cases, the recipient's education would have halted without the support.

"Several of us in the class (of 1958) became university professors," says Arlene. "So we witnessed firsthand the need for emergency bursaries." The first in her family to attend university, Arlene taught at Queen's University for much of her career. She recalls walking through the cafeteria line one day and seeing her student choose water rather than buy a drink, as she had no money.

Sometimes students without means find themselves stranded between the usual funding channels. Arlene has seen both graduates and undergraduates who, suffering a family breakdown, can't afford books, tuition or even food. In one case, a student's relationship with a stepdad had grown toxic. The new parent refused support, and the dependent didn't qualify for a bursary, as the family's income exceeded the criteria.

Given the ceaseless demand for emergency financial aid, the Class of 1958, rather than limiting their impact to one generation, extends their support to both current and future generations. To mark their 50th reunion, the class opted for an endowment fund. While UBC protects the capital donation, 3.5 per cent of the group's endowed fund is awarded annually to a student—a gift that never ends.

Class of 1958 celebrating their 50th reunion at Harrison Hotsprings

Arlene strongly advocates group fundraising. "Everyone gives a little bit," she says, "although there's no pressure. Group giving can make for a more meaningful contribution."

When asked if she had any advice for other groups or classes considering a similar fund, Arlene laughs. "Just don't wait 50 years," she says.

Donate to the Class of 1958 or other awards in the School of Nursing—or create your own UBC legacy—by contacting Darya Sawycky, Associate Director, Development & Alumni Relations. Darya can be reached at 604-827-0081 or darya.sawycky@ubc.ca.

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