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Building capacity for research and scholarship and mentorship of future nursing researchers and scholars are keys to a strong and vibrant profession that will contribute to better health outcomes for individuals, families, communities and society. In Canada, nurse leaders have long identified the importance of building research capacity within nursing to specifically address questions of importance to nursing that would improve nursing care and inform improvements in health systems. In the University of Victoria, School of Nursing, the Research and Scholarship Committee is enacting strategic directions that specifically focus on faculty research capacity building and mentorship. The current issue highlights new, and ongoing research and scholarship initiatives in nursing that contribute to UVIC as a research-intensive university with EDGE.

In the School of Nursing, our research EDGE is exemplified in the current issue profiling faculty, graduate and undergraduate student research in areas that are socially relevant impacting health and wellbeing across society. This issue offers a unique perspective on the engagement and active participation of students in research through the process of involvement in real projects with mentoring by experienced faculty.

As a school, we are committed to conducting research that will improve the health and well being of society that impacts policy, practice and education. In this issue, our research EDGE is faculty and students working together in collaboration with community partners on research that is timely, relevant and uniquely posed to inform policy and practice. As you look through this issue, you will find our faculty and students working on issues related to end of life, elder care, caregiver support, simulations, homelessness, and information technology. For example, as legislation related to MAID (Medical assistance in dying) is being implemented, students alongside faculty members are already working to identify how this is being implemented through the unique lens of nursing practice. As nurses we often know that policy has unintended consequences when implemented. This study will yield important information about the experiences of those accessing MAID and strategies to improve practice.

In this issue, we feature the Jamie Cassels Undergraduate Award (JCURA) winners and nominees. Through JCURA awards, students are learning research skills and learning to conduct research that answers important questions using a variety of methodologies. For example, student research is exposing media stereotypes about homeless populations and providing insight into more accurate representations that can reduce stigma and promote health. As part of a larger program of simulation research, undergraduate nursing students are contributing to knowledge that will improve nursing student experiences and learning. Faculty are mentoring the next generation of nurse researchers and igniting a passion for research in students.

In the School of Nursing, we are focused on research and scholarship during human health and illness experiences using a variety of approaches with an explicit practical aim of improving health and well-being. Knowledge translation is a critical feature of applied health research. In this issue, we feature work done in knowledge synthesis by the School of Nursing Joanna Briggs Institute and knowledge that will improve end of life care for those experiencing structural vulnerability through more appropriate models of palliative care. As well, we report on faculty and student expertise in translating knowledge related to health informatics and nursing education with reports of ITCH and WRCASN Conferences.

We are at the EDGE of innovation, inquiry and discovery!
CONFERENCE OVERVIEW: ITCH 2017

Translating Knowledge Across Nursing and Health Information Science

by Marcy Antonio, PhD (c), MPH, BSc (Bio) and Dr. Noreen Frisch, PhD, RN

The bi-annual international conference addressing Information Technology and Communications in Health (ITCH) was held in Victoria on February 16 -19th, 2017. This is the 14th ITCH conference, sponsored by the UVic School of Health Information Science (HINF) with this year’s theme focused on “building capacity for health informatics in the future”. There were multiple presentations from UVic’s School of Nursing (SON) and from those who are affiliated with the double-degree Master’s program that offers baccalaureate-prepared nurses opportunity to obtain graduate degrees in both Nursing and Health Information Science. Such presentations addressed the large issue of how information technologies can inform practice and research.

Dr. Noreen Frisch presented on the development of InspireNet, a virtual professional network designed to promote nursing and health services research. The dual masters degree program was represented by its students and graduates: Shauna Farmer, Kristie McDonald and Allen McLean. Similarly, Marcy Antonio, who is completing an interdisciplinary doctoral studies that brings together the two professions of nursing and health informatics, presented on patient-centred technologies. Below are some highlights of the presentations. If you would like to learn more about paper-based presentations, these open-source publications are referenced at the end of this document.

Dr. Frisch discussed some of the key findings in developing a virtual e-learning platform that served to connect health practitioners and researchers. At the end of the six year project, the membership well surpassed original expectations, with over 4000 members. The site offered web-based conferencing, webinars and social media that connected people with shared interests through electronic communities of practice (eCoPs). Although webinars were offered in real-time, most members preferred to access webinars asynchronously. Data from the InspireNet experience documents that an online virtual network can expand the reach of continuing professional education by bringing education to professionals in an ‘anywhere, anytime’ fashion. In the age of technology and virtual connections, continuing education has options never before realized and that address educational needs in times of ever present budget constraints.

Shauna Farmer’s poster presentation examined the need for developing organizational capacity for an advanced practice nurse informaticist (APNI). Although the United States recognizes nursing informatics as a specialization, the Canadian nursing associations currently lack universal competencies for nursing informatics. The proposed APNI serves to bridge the gap between research and practice, and support integration of health practitioners’ clinical expertise with information communication technologies. The APNI is a Registered Nurse with a Master’s Degree in Nursing functioning at an advanced practice level.

Kristie McDonald presented on the process she undertook in creating a case study video for her Masters research. Kristie needed to present her research participants with a life-like case of a patient with multiple health issues so that her participants from various disciplines could review the case and write documentation of the assessment and other data as if it were a real patient and chart. Her video was created after an extensive search found no matches that were specific to Kristie’s research focus in examining the data elements common between and among multiple disciplines. Kristie hired actors through UVic, a production assistant and a videography. The script went through approximately six drafts, which included the use of props, physical movements and non-verbal cues. After a day of filming and subsequent edits the final eight minute video was posted on you-tube, so that others could benefit and access this case study: https://www.youtube.com/watch?v=G0zsqJYbI4s

We applaud Kristie for embarking in this challenging process as the first phase of her thesis work.

Allen McLean is a recent graduate from the double degree program, and has since continued on with his doctoral studies in Computer Science and Nursing at the University of Saskatchewan. Allen presented on the use of Ethica iEpi to design an app to support data collection for gestational diabetes. Ethica iEpi taps into the different features of Smartphones to collect
data on physical activity, location, phone orientation, images, and battery information. It can be used as a platform to create apps that has specific considerations for conducting a research study, including integrating consent forms, surveys and participant enrolment process.

Marcy Antonio had the opportunity to present a poster on her recent scoping review on patient portals, as well as a paper presentation a community-based health kiosk that is being funded through the Agency for Healthcare Research and Quality (AHRQ). This study is a collaboration of multiple universities, with Dr. Karen Courtney at the School of Health Information Science being one of the co-investigators. The specific focus for this presentation was examining how behavior change techniques can be used to inform the design of health information technologies.

The ITCH conference provides a great venue for connecting with other researchers and academics in the health and technology field. If you are interested in informatics, we would highly recommend this conference, as it is a great-size conference for networking and connecting with people who are keenly interested in supporting students’ research.

**Student and faculty presentations, ITCH 2017**


Kristie McDonald reviewing her process for creating a case study video.  
Shawna Foster presenting her poster on “The Advanced Practice Nurse Informaticist”
Faculty Research Study: Nurses’ Practice Experience with Medical Assistance in Dying (MAiD)

Island Health Seed Grant Award: $5,000.00

These awards provide initial funding to new and developing Island Health researchers. These seed grants are intended to engage health professionals in research, to support the acquisition of research experience, and to increase competitiveness for external funding opportunities.

The purpose of this study is to understand the range of nurses’ experience of either providing care for a patient who has chosen medical assistance in dying (MAiD), or declining to participate in MAiD. Findings will generate knowledge of how nurses are being impacted personally and professionally, their perceptions of nursing roles and responsibilities, and what gaps in knowledge and skills exist related to MAiD. This will address a knowledge gap of how medical assistance in dying is being enacted from nurses’ perspectives. A qualitative design using narrative inquiry (Riessman, 2008) and thematic analysis (Braun & Clark, 2009) will be used. Participants will include approximately 20-30 licensed nurses (RNs, NPs, LPNs, and RPNs) employed in Island Health who have cared for a patient pursuing MAiD at home or in an institutional care setting or nurses who have made a conscious decision to not participate. Data will be collected through audiotaped semi-structured interviews conducted in-person or by telephone to foster accessibility. Findings will add to the literature, provide direction for nurses and managers in this new clinical and legal reality, and support an application for a larger study of MAiD (nurses and interdisciplinary team) across BC Health Authorities.

Principal Investigator
Rosanne Beuthin, RN, PhD
Practice Consultant, End of Life, Island Health

Co-Investigator
Anne Bruce, RN, PhD
Professor
School of Nursing
University of Victoria

Co-Investigator
Margaret Scaia, RN, PhD
Assistant Teaching Professor
School of Nursing
University of Victoria

(l-r) Dr. Anne Bruce, Dr. Rosanne Beuthin, Dr. Margaret Scaia
2016 Jamie Cassels Undergraduate Research Award (JCURA) Winners

Musical Connections: A Descriptive Study of Community-Based Choirs for Persons with Dementia and their Caregivers

Zachary Anderson
Completed BSN program 2017
Supervisor: Debra Sheets

This descriptive qualitative study explores the key characteristics, benefits, and lessons learned from community-based choirs for persons with dementia (PwD) and their caregivers (CGs). Although there is growing interest in choirs for PwD, there has been no synthesis of information on these choirs. Semi-structured interviews were conducted with six community-based choirs with PwD and their CGs. The interviews were audio-recorded and transcribed. Content analyses indicated that choirs had many similarities in membership (e.g., early to mid-stage dementia), establishing formal sections (e.g., soprano, alto, tenor, bass), administration (e.g., leadership, fees), and music programming (e.g., public performance, duration and length of sessions). Benefits of the choir include caregiver support & respite, opportunities for learning, and social inclusion. In conclusion, this descriptive study suggests that community-based choirs are an inexpensive and valuable program that improves quality of life for PwD and CGs.

Super InTent City: Media Portrayals of Homelessness

Morgan McCarthy
4th Year Nursing
Supervisor: Bernadette Pauly, RN, PhD

In Canada, as many as 300,000 people experience homelessness in a given year. There are more than 1400 people experiencing homelessness on a single night in Victoria, BC. People who are homeless experience poor health and premature death due to lack of the basic determinants of health such as housing, income, and social supports. Homelessness is the result of structural and systemic factors that intersect with individual situations and is associated with multiple sources of stigmas that can impact action. Media reflects and contributes to public opinions and influences policy responses to homelessness often reproducing stigma and stereotypes. The purpose of this project was to analyze print media representations portraying Super Intent City, a Victoria homeless encampment. We sought to answer the following questions: What are media representations of people experiencing homelessness? Who holds these representations and how do they change over time? What are the implications for public health and the role of public health in challenging stigma and influencing more accurate understandings of homelessness? Data were collected from September 1st, 2015 to September 30th, 2016 from 18 regional and national newspapers. The data were reduced to 289 primary newspaper articles and then analyzed Using discourse analysis. Four discourses were identified: 1) the need for healthy living spaces, 2) public safety issues, 3) criminalization and surveillance of poverty, and 4) community/belonging. Residents of Super Intent City were key voices in raising issues related to the structural and systemic factors that produce homelessness including the need for healthy living spaces, community well-being and belonging. Over the time of the encampment, stereotypes that criminalize homelessness obscured the voices of residents and the need for healthy living spaces, home and belonging as solutions. Portrayals of homelessness from people with lived experience are critical to counter stereotypes and identify real solutions to homelessness.
Developing Capacity for Knowledge Synthesis by Participating in a Joanna Briggs Institute (JBI) Scoping Review

Sarah Cleve
4th Year Nursing
Supervisor: Karen MacKinnon

How simulation is experienced and taken up by nursing students across the four years of a BSN curriculum is not well understood. We believe critically examining how nursing students understand and value simulation pedagogy at different stages in their pre-licensure education will provide nurse educators involved in curricular decisions essential information.

Simulation based teaching and learning has been widely investigated and implemented in health care education for over forty years (McGaghie et al., 2010). Known positive outcomes of simulation based teaching and learning in nursing education include (Aebersold & Tschannen, 2013): increased confidence, improved management of high acuity patients, and improved communication and reflection skills. Standards of best practice for simulation teaching and learning in nursing education have been developed by the International Nursing Association for Clinical Simulation and Learning (INACSL, 2015) based on a wide and growing body of evidence to support and advise the implementation of simulation in nursing education.

Our purpose was to understand the experiences of nursing students engaging with simulation learning events (SLE) in the context of their nursing education, including: how nursing students describe simulation teaching and learning within this context, and how it informs their nursing knowledge and practice.

Emerging themes from focus groups conducted with 3rd and 4th year BSN students included: it feels like a test, it’s limited, it helps build confidence, and it’s an opportunity for collaboration.

Future work includes focus groups with 1st and 2nd year students and further investigation into the experiences of BSN students with simulation learning at each stage of the BSN program.

References
2017 JCURA Nominations

The following students have received JCURA awards for the coming academic year and will be working on the research projects below starting September 2017.

Caregiver Awareness to Support Elders (CARE) Project
Student: Alison White

Family support is essential for frail older adults to remain in their homes and in the community. Family caregivers are the backbone of home care and provide 90% of support needed by older adults. Caregiving is a role that families willingly take on but their support needs often go unnoticed until there is a crisis. Caregivers often become isolated as caregiving needs increase over time and support networks dwindle. Yet caregivers often go unnoticed within our healthcare system. The purpose of this research project is to implement an intervention to raise caregiver awareness and develop caregiver champions in primary healthcare settings and community organizations who can identify caregivers and refer them for support and services. By identifying caregivers earlier, support can be provided to avert crises and allow them to continue caring for their family member.

Students will be involved in:
- Developing an ethics application
- Implementing educational training with caregiver champions
- Assisting with data collection on caregivers
- Working with researchers to analyze data
- Developing presentations for knowledge dissemination

Faculty/researchers:
Debra Sheets, Ph.D., MSN, RN, FAAN; Melie De Champlain, RN, MN, Director, Community Integration, Island Health-Cowichan; Barb McLean, Executive Director, Family Caregivers of BC; Marilyn Malone, MD, Geriatrician, Island Health

Nurses’ Experiences with Medical Assistance in Dying (MAiD)
Student: Cedar McMechan

The purpose of this study is to understand the range of nurses’ experience of either providing care for a patient who has chosen medical assistance in dying (MAiD), or declining to participate in MAiD. Findings will generate knowledge of how nurses are being impacted personally and professionally, their perceptions of nursing roles and responsibilities, and what gaps in knowledge and skills exist related to MAiD. A qualitative design using narrative inquiry (Riessman, 2008) and thematic analysis (Braun & Clark, 2009) will be used. Participants will include approximately 20-30 licensed nurses (RNs, NPs, LPNs, and RPNs) employed in Island Health who have cared for a patient pursuing MAiD at home or in an institutional care setting or nurses who have made a conscious decision to not participate. Findings will add to the literature, provide direction for nurses and managers in this new clinical and legal reality, and support an application for a larger study of MAiD (interdisciplinary team and family perspective) across BC Health Authorities.

Students may be involved in:
- Assisting with a scoping review of nursing students’ perspectives on assisted dying
- Developing an ethics application for focus groups with nursing students.
- Conducting focus groups with first year and fourth year students exploring perspectives on assisted dying.
- Working with researchers to analyze data using thematic analysis

Faculty/researchers:
Anne Bruce RN, PhD; Rosanne Beuthin RN, PhD, Island Health; Margaret Scaia RN, PhD.
Student Research Study: Evaluating a PDSA Trial
by Heather Willey, 4th year BSN student

In my community nursing leadership placement, I was involved in a major project known as the Eldercare Project of Cowichan (EPIC). As a step in the process of healthcare improvement in the Cowichan Valley Regional District, a type of trial called a PDSA (Plan-Do-Study-Act) was conducted in the emergency department of one of the hospitals. I created a comprehensive report evaluating the successes and shortcomings of the PDSA, based on the reports of participants.

I interviewed those involved in the trial, which included patients, family physicians, pharmacists, and the emergency department nurses and physicians. Different interview/data collection methods included face-to-face interviews, phone interviews, and online surveys. I, along with the assistance of an Island Health employee who collected the quantitative data, created a comprehensive report highlighting the major experiences and perspectives of the participants in the trial. Together, we presented our findings to the EPIC steering committee members. We outlined successes and shortfalls of the PDSA, and made recommendations for future trials in the emergency department. Rate of patient admissions, quality of patient care, and changes to workload of the emergency department staff were important factors to evaluate for this PDSA. This report was able to provide direction for quality improvement to healthcare in the Cowichan Valley Regional District.

It was wonderful to have the opportunity to be involved in quality improvement in the healthcare setting. I worked within an interdisciplinary team and was able to gain understanding of the many obstacles that prevent change. I was able to make connections with what I was learning in class lectures, and apply this to my community placement. As a future RN, this experience was of great value, as nurses act as advocates for quality improvement in many areas, from acute care, to the community level, to global health improvements.
Exploring the End-of-Life Experiences of Structurally Vulnerable People in Victoria

Kelli Stajduhar, RN, PhD, Ashley Mollison, MA, and Bernie Pauly, RN, PhD

People experiencing structural vulnerability such as poverty, homelessness, racialization, and criminalization and stigmatization of illicit drug use and/or mental health issues, suffer from more aging-related conditions than those living in homes who are decades older, and have disproportionately higher rates of chronic illness, poor health status, and die, on average, 20-25 years earlier than the general population. While studies of people experiencing structural vulnerabilities have made visible the challenges that people face in accessing health services, what is less evident - perhaps even slightly invisible from the public eye, and from even the eyes of the health care community - is what happens with such vulnerable people who are at the end of their lives.

Over the past 3 years our research team has engaged in an ethnographic study examining access to end-of-life care for populations impacted by structural vulnerability. We longitudinally followed 25 people over two and a half years to track their access issues and experiences, conducted almost 300 hours of participant observation with vulnerable people and their service providers, interviewed their primary support people, and conducted key informant interviews in the community. We partnered with the Palliative Outreach Resource Team (PORT) and Victoria Hospice for study guidance and knowledge translation. PORT is a group of healthcare providers and community partners in Victoria who are networking to improve access to and the quality of hospice palliative care for people who are nearing end-of-life and who live on the street or are housed unstably.

We are currently in process with our study partners of crafting recommendations and developing a model of palliative care for people experiencing structural vulnerability. Emergent findings include:

- EOL care needs of structurally vulnerable people cannot be met without addressing the Social Determinants of Health (SDOH). Addressing deficits in housing; food security; income; transportation; and other SDOH was essential to facilitating access to quality palliative care.
- When people are connected with a physician who has a palliative orientation and understanding of SDOH they experience improved access and quality of life at EOL. When people received a “legitimate” (palliative) designation and were connected with service providers who had a palliative orientation, services came around them quickly and efficiently. In many cases, palliative care was the best care that people had experienced in their lives.
- A lack of appropriate, affordable, and adequate housing, combined with risk management policies, meant that people could not 'age in place' and were moved, most often into acute care, as their medical needs increased or as they approached EOL. Some participants were housed in SROs, supportive housing facilities, or shelters that were deemed unsafe for home support and/or home care nurses to attend creating a barrier to receiving EOL care.
- Significant barriers to access & quality of care meant that structurally vulnerable people were diagnosed late in when treatment options were no longer available and the benefits of a palliative approach were not fully realized.
- Lack of trust in health care relationships and with the health care system and avoidance of care was particularly relevant for those who had experienced stigma & discrimination as a result of substance use, mental health, and ‘behaviour’ issues, poverty & homelessness, racialization, and trauma associated with colonial and criminal institutions.
- Structurally vulnerable people have to engage with and navigate multiple systems in order to gain access to care (e.g., social assistance, shelter & housing, food banks). There was largely inadequate communication, coordination, and continuity between systems (e.g., housing, income, health care, palliative care). This is an effect of the silo-ing of systems as a result of funding and administration that channels funding for distinct services. Lack of continuity and consistency in palliative care service providers created barriers to care for this community, in which relationships of trust are paramount.
- Despite service providers in housing, shelter, and social services facing high rates of death in the population they serve, there was often a feeling of unpreparedness when it came to having conversations about death, understanding a person’s diagnosis & trajectory, understanding how the palliative care system works, or processing their own feelings of loss and grief.

Our next steps are to work with our community partners to develop a model of palliative care for structurally vulnerable people in Victoria. A key part will be the development of practice support tools for service providers (e.g., housing, outreach, and inner city health workers) on how to identify people in need of a palliative approach, common disease trajectories, and referral methods.

For more information about this study and Dr. Kelli Stajduhar’s other studies on palliative and end of life care, visit www.uvic.ca/peol
Sally A. Kimpson, RN, BSN (UVic ‘89), MA, PhD is currently undertaking a Postdoctoral Fellowship with the Centre for Research on Work Disability Policy at Simon Fraser University, in order to pursue her abiding interest in disabled women’s lives, as these are subject to income support policy. Drawing from the (contested) intersection of feminism, poststructuralism and critical disability studies Dr. Kimpson’s Interdisciplinary doctoral research—Uncertain Subjects: Disabled Women on BC Income Support—conducted at the University of Victoria (Nursing and Education), used narrative approaches to focus explicitly on how government power is enacted, and its effects in the lives of chronically ill women living on B.C. disability income support. This research reveals how disabled women survive, care for themselves, and respond to government policy—everyday, embodied practices of the self that constitute them as uncertain subjects—and disrupts taken for-granted understandings of those who are disabled, female and poor. Living poorly, these disabled women experience compromised well-being and “dis-citizenship,” all inconvenient facts reflecting a marked disjuncture between how government programs are publicly represented and their strategic effects.

During her Postdoctoral Fellowship Dr. Kimpson intends to continue to research the effects of income support policy in disabled women’s lives by focusing on (female) nurses in BC who are work disabled because of non-occupational, episodic conditions. Unionized work-disabled nurses in BC are expected to participate in a jointly-developed Approved Rehabilitation Plan, including an Enhanced Disability Management Program (EDMP), a relatively recent approach to managing work disability, which involves multiple stakeholders, and signals potential conflicts between Return-to-Work provisions embedded in intersecting contributory disability pension plans. Dr. Kimpson anticipates her intended research to make a significant contribution to knowledge about disabled nurses’ challenges related to co-ordination and navigability of programs, both known barriers to accessing supports. She will also consult on a new CRWDP project designed to comparatively map both Alberta provincial disability benefit policy and BC Benefit policy, including interpreting qualitative data from beneficiaries of these programs.

Dr. Kimpson is also an Adjunct Assistant Professor in the UVic School of Nursing, currently serving on the Research & Scholarship Committee.
CONFEREECE OVERVIEW | WNRCASN Conference
The Edge of Tomorrow: Perspectives, Pedagogy, and Possibilities for Nursing Education
by Margaret Scaia, Assistant Teaching Professor, RN, BScN, MN, PhD

February 15-17: Hotel Grand Pacific Victoria, BC
Sponsored by Camosun College, the University of Victoria and Western, North-western Region Canadian Association of Schools of Nursing

Welcoming remarks were made by Sandra Davidson, Assistant Professor & Associate Dean for Undergraduate Program, Faculty of Nursing – University of Alberta. Dr. Davidson is also WNRCASN President for 2016-2018. Welcoming remarks were also given by Darlaine Jantzen, Chair of Camosun College School of Nursing, and Karen MacKinnon, Associate Professor, UVic School of Nursing, and Deans Cynthia Smith of Camosun College and Dean Tricia Marck from the HSD faculty. A Territorial Acknowledgement of the Land was presented.

Conference Entertainment
We were welcomed in song by the Eye Sqa’iwe’en Singers from Camosun College Centre for Indigenous Education and Community Connections. Heather Burns and friends is a free-lance musician from Victoria and provided a vocal and instrumental welcome.

Keynote Speakers

Dr. Charlotte Loppie, School of Public Health and Social Policy, was the opening key note: What Does it Mean to “Indigenize” the Nursing Curriculum? Dr. Loppie is Lead of the Aboriginal Health Research Network Secretariat, and Editor of the International Journal of Indigenous Health.

Dr. Lynne Young, Professor, School of Nursing, University of Victoria was the second key note speaker: What is Nursing? Reflections on Foundations, Fallacies, and the Future.

Dr. Dianne Tapp, University of Calgary, was the final key note speaker: “Provocation for the Edge of Tomorrow: Toward Canadian Nursing Education in 2030.”

WNRCASN Nursing Education Research Award went to Dr. Monique Sedgwick and Dr. Sharon Yanicki from the University of Lethbridge for their project titled: Undergraduate Student Nurses’ Moral Sensitivity During Simulation.

WNRCASN Education Innovation Award was presented to Dr. Helen Vandenberg, University of Saskatchewan and Lydia Wytenbroek of York University for their project titled: Innovating the History of Nursing in Canadian Undergraduate Nursing Education.

WNRCASN Graduate Student Award went to Laura Vogelsand and her supervisor Dr. Tracie Risling from the University of Saskatchewan for their project titled: The Influence of Mobile Technology on Clinical Reasoning for Nursing Students.

Forty-five presentations were given by nurse educators from western Canada, as well as 16 Poster presentations, and six undergraduate student posters.

Co-Chairs
Darlaine Jantzen and Karen MacKinnon

Committee Members
Lorraine Erickson, Karen Foxall, Joan Humphries, Shelley Lietaer, Mary Lougheed, Diane MacLeod, Lorelei Newton, Jill Nichol, Naomi Poeschek, Rosalie Starzomski, Marlene Welsh
The practice of ‘patient simulation’ in health care and nursing education has gone beyond the practicalities of how to create a simulation center and has progressed to evaluation of teaching practices and scholarship. If we turn to the literature, we discover that many users of simulation technology are critically evaluating teaching and learning theory(s) merging that body of knowledge with the practices of delivering simulated practice education.

Teaching clinical skill in preparation for today’s health care system is not an easy task. We believe this can be improved by the purposeful use of and evaluation of simulation technology. We cannot put students in a room with a high-fidelity mannequin and expect competency unless the experience is structured and deliberate. Research in teaching and learning practices ought to occur if we are to take advantage of these simulation experiences.

On behalf of my colleagues and I, we thank you for allowing us to provide an overview of some of the ongoing research activities in simulation education for pre-licensure nursing and interprofessional patient care teams.


The purpose of this study is to develop and evaluate an interprofessional education program introducing tools that inform and support safe patient handover in clinical practice. Participants are introduced to safe patient handover through e-line modules, participate in patient simulation scenarios as members of interprofessional student teams, and are evaluated by self-report and observation standardized tools.


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Congratulations to Diane Butcher, PhD (c)

Diane Butcher, 4th year PhD Candidate, is the lead author and reviewer on the following JBI systematic review. The review’s publication marks the first fully completed systematic review from the UVic Centre for Evidence-informed Nursing & Healthcare (CEiNHC): An Evidence Synthesis Centre of the Joanna Briggs Institute.


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**SUCCESSES | AWARDS**

**Dr. Lenora Marcellus** is a 2017 recipient of the ARNBC Excellence in Advancing Nursing Knowledge and Research Award! Lenora has worked on a variety of research and KT projects whose findings provide immediate application for difficult areas of nursing care, specifically around women and mother who have a history of substance use and babies with FASD.

**Dr. Kelli Stajduhar** is the 2017 recipient of the Confederation of University Faculty Association of BC, Ehor Boyanowsky Academic of the Year Award. Kelli is being honored for her 25 year span of work which strives to advance quality end of life care for all members of our population.

**Dr. Rosalie Starzomski** received the 2017 UBC School of Nursing Alumni Award of Distinction on May 4. Rosalie is being recognized for her outstanding and sustainable contributions as a researcher, educator, administrator, ethicist and policy consultant.

UVic Health Services, led by Dr. Judy Burgess, an adjunct faculty member in the School of Nursing, and Island Health partnering psychiatrists, have been honored with a 2017 CFPC/CPA Collaborative Mental Health Care Award. The team has worked diligently over the last 6 years to create a strong interprofessional team in our mental health / mental illness services for students.

"(l-r) Dr. Lenora Marcellus, Holly Gale (Outstanding Student Intern Recognition Award), Dawn Nedzelski (Island Health)" "Dr. Kelli Stajduhar" "(l-r) Cathy Ebbehoj (UBC), Dr. Rosalie Starzomski, Suzanne Campbell (UBC), Paddy Rodney (UBC). Photo credit: Kellan Higgins, UBC"

**OTHER SUCCESSES**

Nursing sessional instructor and School of Public Adminstration, PhD candidate, Diana Campbell, has been nominated for participation in the CIHR Research Poster Competition on June 7, 2017, as part of the Canadian Student Health Research Forum (CSHRF) in Winnipeg at the University of Manitoba. This is an opportunity for Canada's top research trainees in the health sciences to become networked and have their work showcased and recognized for excellence.

Congratulations to sessional instructor Natalie Fransden on her recent appointment as an Assistant Teaching Professor in the School of Public Health and Social Policy.
PhD Student Kelsey Rounds has received the first Chair in Transgender Studies, Doctoral Degree Research Scholarship! Initiated this year, the Transgender Studies Doctoral Degree Research Scholarship awards one or more $5,000 scholarships will be awarded to current or entering academically outstanding UVic doctoral degree students pursuing trans-related research in any field, including creative or performative activity. Priority will be given to students who self-identify as trans or non-binary, and further preference will be given to students who demonstrate financial need. More information can be found at http://www.uvic.ca/research/transchair/what-we-do/scholarship/index.php
