FACULTY of NURSING
RESEARCH, SCHOLARSHIP
AND COMMUNITY ENGAGEMENT HIGHLIGHTS
2017
FACULTY of NURSING

RESEARCH, SCHOLARSHIP
AND COMMUNITY ENGAGEMENT HIGHLIGHTS
Greetings from the Office of the Dean

This past year was another busy one for research, scholarship and community engagement activities in the Faculty of Nursing at MacEwan University.

Our faculty and students have a passion for elevating nursing education and practice to the next level and this will become obvious as you read our stories. Through research on challenging topics, participation in interprofessional learning opportunities, the exploration of educational technology, and the development of new programming, we actualized our commitment to improve health care for Albertans in our rapidly evolving field.

As we continue to operationalize our Faculty of Nursing Strategic plan, we engaged in many exciting international and global health initiatives. Research, partnerships and learning opportunities connected us with peers across the globe, in locations such as Ukraine, Nepal and China. We are so grateful for the opportunity to create lifelong connections and expand our knowledge by viewing nursing through a global health lens.

We are thrilled to share with you all that we accomplished in 2017 and look forward to the opportunities and discoveries that await us in the year ahead.

Vince Salyers  EdD, RN, ANEF  
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ALUMNI SPOTLIGHT: *We All Believe in You*

From a very young age I knew I wanted to be a helper. I wasn’t entirely sure what that would look like – and at different points in my life it looked like different things – but I knew I wanted to make the world a better place to be.

At the age of 14, I was diagnosed with severe depression and anxiety. I remember that day so vividly. But what I remember most is that following the appointment my mother told me that I should never tell anyone about my diagnosis because “people just don’t understand this sort of thing,” and in 1994 she wasn’t wrong. People were not talking about mental illness openly and or doing so without judgment. But what she said really confused me and I remember replying, “Well that makes no sense. Why should I be ashamed of something that is completely beyond my control?” On that day and for years to come I challenged my mom’s advice and the stigma surrounding mental illness.

As a result, for over 20 years I have spoken candidly and honestly about my mental health struggles. I did school projects on mental illness and shared my story with classmates. I provided information sessions at my first place of employment about the signs and symptoms of anxiety disorders and depression. I knew that the only way to change the stigma behind mental illness was to put a face to it.

I am so grateful for my psychiatric nursing education. Although I decided to leave being employed as a psychiatric nurse several years ago I continue to be afforded numerous opportunities because of it. I often speak in educational institutions and workplaces about mental health and suicide prevention. I combine my story and formal training to do the work I always dreamed of, eliminating mental health stigma.

In 2015, I created a mental health advocacy organization called *We All Believe in You*. Within the organization, as an avid photographer, I work with individuals to tell their stories and put a face to mental illness.

Through my work with *We All Believe in You*, I have collaborated and contributed to projects with the Canadian Mental Health Association, CASA, United Way and have helped in the development and implementation of policies regarding mental health and suicide prevention in the Edmonton area.

Every psychiatric nurse with whom I have become acquainted became a psychiatric nurse because they wanted to make a difference in someone’s life. That is why we chose this career path – although some paths might be a little less traditional than others as evidence by my own. I fully believe that had it not been for my MacEwan education, I would not have the platform and voice given to me and I am so thankful for that. My education combined with my story has created a unique and unconventional career path for me, but I feel like I am effectively doing what I was called to do.

**CONTRIBUTED BY**

*Blake Loates, Dip. Psychiatric Nursing*
The Wellness Conference is a day that third-year psychiatric nursing students attend before entering their final preceptorship. The idea began as a vision from Dr. Mary Haase that psychiatric nursing education needs to focus on the experience of mental wellness, not only the experience of illness. The day is filled with members of the community who volunteer to share their lived experience of addiction and mental health and their journey with wellness. Two of these presenters are working to change their community’s view on who experiences mental illness.

Within the profession of psychiatric nursing there can be stigma regarding our own experience with mental illness. In the fall of 2015, Terry was a third year Psychiatric Nursing student at MacEwan University. He attended the annual Wellness Conference as part of his third year PNRS 352 course. During one of the guest presentations, the presenter had spoken about ending stigma surrounding mental illness and challenged anyone from the audience to share that they too live with a mental illness. Terry was the only individual to raise his hand and share his mental health diagnosis. Two years later, Terry was a guest at the 2017 Wellness Conference. He shared his lived experience with longstanding mental illness. Despite his illness, he could graduate from the University of Lethbridge and complete his Psychiatric Nursing diploma through MacEwan University. He ended his presentation by challenging anyone from the audience to admit they live with a mental illness. This time three hands went up.

In 2005, Blake graduated from MacEwan University’s Psychiatric Nursing program. She worked as a Registered Psychiatric Nurse in both inpatient and emergency psychiatry environments. As time progressed she left the field of Psychiatric Nursing and became one of Edmonton’s most prominent photographers. In 2015, Blake spoke at MacEwan’s Wellness Conference, sharing her lived experience of depression. Following her presentation at MacEwan, Blake combined her love for photography and mental health, creating the “We All Believe in You” initiative. As a result of her initiative, she received a prestigious 40 under 40 award from Avenue Magazine. Soon thereafter she was recognized by the Canadians for a Civil Society Organization as one of the Top 25 Contributors to human rights and justice in Alberta.

The Wellness Conference is a valuable experience to empower psychiatric nurses of tomorrow with empathy and compassion for themselves and people they encounter daily in their practice. Students express year after year how grateful they are for this experience and the day is filled with shared emotion between the speakers, students and faculty. Through the sharing of their wellness journeys and how these speakers have been able to enact change in their own lives and their communities, our goal is for students to see that mental illness is not a life sentence. The journey to wellness is possible and through their actions as nurses, they can walk alongside someone on that journey.

CONTRIBUTED BY
Randi Ziorio Dunlop MEd, BScPN, RPN
Peter Vermeulen BScPN, RPN, MPN (student)
In July 2017, assistant professor Elizabeth Burgess-Pinto and nurse educator Christine Shumka accompanied four students (Jessica Katerenchuk, Lisa Barrie, Christine Esawi, and Chelsea Boot) from the Department of Nursing Science to Ternopil, Ukraine, where we attended a summer school program. Ternopil International Student Summer School aims to create partnerships and learning opportunities between students in health-related fields from different countries. This was the twelfth year that Ternopil State Medical University (TSMU) hosted students from around the world, including participants from Ukraine, Poland, Egypt, Uzbekistan, Slovakia, Georgia, and Canada. Nursing student Jessica Katerenchuk described the program in the following way: “This International Summer School wasn’t solely a camp where we learned facts or attended lectures, but it was an assembly of friends coming together to learn from each other as individuals from different regions of the world. The intermingling of a diverse range of personalities created a patchwork of friendships so intricate, it truly created a family.”

During our visit, we had several opportunities to learn about Ukrainian heritage and culture. For example, we observed a colourful student showcase of traditional folk songs and dances; visited an ethnographic exhibition of embroidery, household items, and antiques; participated in a traditional art class of Petrykiv painting; had several informal discussions with Ukrainian students while kayaking on the Dniester River; took a day trip to Khotin Fortress; and of course, tasted delicious perogies and borscht.

The International Student Summer School Program included presentations from each student cohort about their country of origin, which provided opportunity to learn from and with each other about varying cultural norms, traditions, and health care practices. The MacEwan Nursing students delivered an excellent presentation that highlighted details about Canada, our healthcare system, MacEwan University, and the nursing profession. Elizabeth Burgess-Pinto and Christine Shumka facilitated a workshop entitled “Global Health Perspectives-Moving Beyond Disease Control.” Focusing on the topic of diversity, we combined lecture, group work, and interactive activities to engage the students and faculty in thinking and talking about this important subject. Further learning opportunities that enhanced our students’ experience included hospital tours, a tour of TSMU, and a simulation competition titled “Teamwork in Medical Emergencies.”

Our MacEwan Nursing students reflected on their experiences during the two-week summer school by creating a blog and also attended a debriefing session facilitated by Elizabeth and Christine upon return to Canada. The students discussed several themes regarding lessons learnt and knowledge translation, a few examples include:

• From Chelsea Boot: “I believe projects that we worked on together, such as the video collage shows that though we are not all the same nationality, or share all the same qualities; we are all global citizens. Through this past week, I have really noticed that we may have varying language, cultural norms and differences, but that we are more the same than anything. Being at TSMU International Summer School has really showed me that across cultures, each person wants to progress their country, build new friendships, and achieve a better quality of life and happiness.”

• From Lisa Barrie: “The hospital tour was one of the biggest highlights for me during this trip. Talking with the students I had an idea of what healthcare
was like in Ukraine, but it was even more interesting to see how the nursing profession is treated and perceived.”

- From Christine Esawi: “Because of the language barrier, this experience enhanced my communication skills immensely, which will improve my relational practice. I’m more cognizant of needing to take my time and think about how I’m communicating both verbally and nonverbally.”

The opportunity to attend the Ternopil International Summer School served as a springboard for planning the initial offering of HLST 400: Global Health Perspectives, study abroad tour to Ukraine. This elective will take place in May 2018, with 20 students attending from MacEwan University, and 15 expected students from TSMU. Based on debriefing and feedback from the students who attended the summer school in July 2017, faculty members from TSMU and MacEwan University are currently collaborating to create a meaningful learning experience for students enrolled in HLST 400 during the Spring semester. Key themes of this course will include: global health, global citizenship, equity and inclusion, The Sustainable Development Goals, as well as the influences of physical and social environments and policies on health and wellness. MacEwan students will have opportunities to connect and collaborate with students, faculty, and practitioners in Ukraine. It is expected that this trip will lay the foundation for future collaborations on teaching and research between MacEwan and TSMU faculty members and students. We would like to acknowledge The Ukrainian Resource and Development Centre (URDC) and the Ukrainian Foundation for College Education (UFCE), who have provided invaluable support for students and faculty who are collaborating on these projects; thank you for all your hard work.

CONTRIBUTED BY
Elizabeth Burgess-Pinto PhD, RN
Christine Shumka MN, BScN, RN
Urogynecological Wellness Practitioner Program: Partnerships to Advance Education and Care

Urogynecological issues affect around 30% of women with approximately 50% who do not seek treatment (Slade, 2017). This creates significant burdens on women, their families and their communities. These issues can be treated and often cured; yet, they are rarely discussed (The Canadian Continence Foundation, N.D.).

Caring for women with urogynecological issues takes place in all clinical settings; however, specialized focused care and treatment occurs in clinics like the Pelvic Floor Disorders Clinic at the Lois Hole Hospital for Women, Royal Alexandra Hospital. The care provided in this clinic encompasses a coordinated interdisciplinary team which includes physicians, nurses, physiotherapists and other health care practitioners. This team of practitioners significantly impacts the quality of life for the women. Providing comprehensive care for patients with urogynecological issues requires specialized education and experience that isn’t always covered in undergraduate programs.

The nursing management team and urogynecologists from the Lois Hole Hospital for Women approached the Centre for Professional Nursing Education (CPNE), MacEwan University to collaborate on developing a specialized education program. CPNE’s expertise in course development and flexible delivery options was recognized as critical to the success of the program.

Initially, program development was unfunded with clinical practitioners supporting this development in addition to their regular workload. As the development progressed, the importance of the program and collaboration with CPNE was recognized by the Royal Alexandra Hospital Foundation. As a result, Royal Alexandra Hospital Foundation approached the Robbins family with the project and secured funding for program development.

The Robbins family sponsorship is significant and acknowledges the value of partnerships between practice and education. This funding enabled the development of the program to be accelerated by contracting instructional designers, writers, editors, and course production staff.

To date, a literature review to inform the program’s core competencies has been completed and includes Canadian and international standards for practice. The literature was reviewed by the nurse practitioners and physicians of the Pelvic Floor Disorders Clinic at the Royal Alexandra Hospital who incorporated their current best practices to establish the overall competencies and outcomes for the program.

The program will cover content specific to the care of female patients with urogynecological issues including the history and foundations of care, detailed anatomy and physiology, pathophysiology, assessments and diagnostics, primary care of patients, clinical management, and innovations and advancements in practice. The final course is a field project where students will apply the theory to practice through a final project completed in a clinical setting. Common to all the courses is the recognition of the important role the practitioner has in the care and advocacy of the patient with urogynecological issues. Upon completion of this program, students will build a compendium of resources, skills and networks to competently care for women with urogynecological issues.

The first two courses, Foundations of Care, and Anatomy and Physiology, are currently being finalized. These courses have been written by clinical specialists: Dr. Slade, Dr. Flood and Dr. Schulz. The program benefits from being grounded in current leading practices along with their own research from the Journal of Obstetrical Gynaecology Canada written by Chan, M.C, Schulz, J.A., Flood, C.G., and Rosychuk, R.J. (2010).

Project timelines are tight with a completion target of January 2019. The hope is that nurses and other regulated health care providers from across Canada, including rural and urban centres, will take this program. Women in all clinical and community settings should be able to access resources and be supported for urogynecological issues. This successful partnership culminating in the program development of the urogynecological wellness practitioner will allow health practitioners the opportunity to impact the care and quality of life of a substantial number of women.


CONTRIBUTED BY
Shirley Galenza MEd, BScN, RN
Nicole Simpson BScN, RN
Nursing Internship in Pokhara, Nepal

Since entering the Bachelor of Science in Nursing program, we have both been inspired to take our nursing knowledge overseas. Last spring, we were accepted into a nursing internship in Pokhara, Nepal, to work at a local hospital for six weeks. We completed our internship through a program called Work the World, which allowed us to stay with other medical, nursing, physiotherapy and occupational therapy students, while going to the hospital every day to learn about Nepal’s health-care system. During our time at the hospital, we explored Labour and Delivery, NICU, Pediatric and Emergency departments, which gave us a comprehensive understanding of health care in Nepal. Additionally, we lived in a village for one week to work at a rural health post and experience the realities of rural health care.

It’s difficult to articulate all the lessons we’ve learned from working overseas in Nepal. From bringing our own gloves and masks to work, or seeing families cooking and sleeping at the bedside, to witnessing the effects of witchcraft and social status, we were able to begin to grasp how widely culture affects health. Over all, our internship has led us to think differently about health care. In one respect, it has given us new sensitivity for multicultural patients here at home, since we now know what it’s like to enter a health-care system being unable to speak the local language. Our experiences enabled us to recognize the need to value differences, ask preferences and recognize our own biases. We’ve come to value non-verbal communication and have become much more attuned to our patients’ non-verbal cues. Moreover, we were able to see diseases that are not commonly treated here in Canada, such as leprosy, mumps and rables.

Working abroad has provided us with a greater sense of awareness for the way we use resources in hospital – for example, the importance of resource conservation and stewarding the supplies at our fingertips. In Nepal, patients have to pay for each item used, from the gloves to the tests and medications. In one village we worked with, we had to pay for each item used, from the gloves to the tests and medications. In another, we had to pay for our own gloves and masks. Working in this way, we gained a respect for the Nepalese physicians and their ability to narrow down which interventions were most crucial, as many families were often unable to afford extensive treatment. On the other hand, we witnessed many ethical situations that were out of our control, many of which were influenced by the overall low socio-economic status, poor working conditions, poor sanitation, and lack of education in Nepal. Witnessing and debriefing these situations were invaluable experiences that have shaped our beliefs and practice as health-care providers. The connections we made with the hospital staff allowed us to gain a new respect and appreciation for the value their culture brings to healthcare, and the way that they utilize their limited resources.

One of the most important takeaways was developing a clearer understanding of the role of the RN and what differentiates our practice from that of others in the hospital. The skills piece itself is not what separates a good nurse from a great nurse. The critical thinking piece, however, is what makes a great nurse: recognizing the value of understanding the physical, emotional and social factors influencing a patient – seeing the whole picture. In Nepal, nursing is not seen as a respected profession. The nurses we worked alongside were often competent at completing skills or tasks, but they lacked the knowledge that we are so heavily trained in at home in Canada. Most of the nurses we met had a limited understanding of the physiology, pathophysiology, microbiology and pharmacology surrounding the patient’s condition, but instead were simply trained to do the skill. Critical thinking and the soft skills – or “art” of nursing – were lost. Consequently, it was hard to gain the respect of the hospital staff once we discovered we were not physicians as they had expected us to be. However, it led us to the greater understanding of the unique role of the registered nurse, in our ability to recognize the social determinants of health and ways to coordinate care that relate to the patient’s needs.

Lastly, we would encourage future students to engage with interdisciplinary teams. Since we saw that the Nepalese nurses were so skills based, we began to spend more time with the residents, asking them to explain their assessments and rationale for why they prescribed what they did. We also had the opportunity to watch surgeries, visit the X-ray technician and go around to different units. We remind future students that they are there to learn, not necessarily to help, especially if they’re only abroad for a short period of time. Initially, we wanted to gain lots of practical, hands-on experience. However, we gained much more knowledge and experience when we took the position of a learner: asking, observing and exploring different areas of the hospital that we wouldn’t normally be able to at home. Working overseas was an invaluable experience for us, and we encourage any nursing student to seek out this incredible opportunity.

CONTRIBUTED BY
Alexis Lema  BScN (student)
Kara Toohey  BScN (student)
I Have a Burning Question—Now How Do I Find an Answer?

Experiences of a Novice Researcher

From my first exposure to the ideas of expanded roles of RNs and leadership in nursing, I’ve wondered what type of person chooses nursing as a career and what these people want from their career. Anecdotally, it seems RNs are not generally viewed as leaders in health care, nor do many RNs aspire to take on leadership roles. For my master’s of nursing thesis, I examined the question of how students at a local high school studying leadership viewed a career in nursing and whether they believed a career in nursing would give them opportunities to practice leadership. The results were discouraging—not one student in the leadership stream, or even one student in the control group, believed a career in nursing offered leadership opportunities. That was only one survey with one group of students and I wanted to know more.

After graduating from my master’s program, I secured a full-time position teaching at MacEwan. This was an exciting but busy time, and my research aspirations fell by the wayside. So much preparation and marking! However, I continued to muse about what students wanted out of their nursing career. I talked to lots of people about this and had great conversations, but no research.

That is until I connected with Leanne Topola.

She and I were asking the same questions—wondering about expanded scopes of practice for RNs, leadership of the health-care system and where exactly the RN profession was heading. We determined it all started with who was choosing nursing and how they perceived the role of the RN. A research question was born!

We determined we needed to ask these questions of students coming into our program BEFORE they were exposed to academic views of nursing—we needed a survey, but we had no idea how to create a reliable, credible survey. After a meeting with people in the faculty office we were connected to Shelley Boulianne, a survey expert in the Department of Sociology. Shelley worked closely with us to create a survey that actually asked the questions we wanted to ask. Next, we needed to determine how to distribute the survey to our students. Neither Leanne or I are IT experts and it seemed beyond us to do anything more than a paper and pen survey. However, we knew this new generation of students are very tech savvy and would respond well to an online survey—this also reduced the need to take valuable class time to complete a survey. Again, we were lucky to be steered in the direction of an expert in Kim Peacock. Kim patiently explained the usefulness of Google forms and walked us through the creation of an online survey suitable for students—one that did not cost us a fortune in copyright fees.

We sent our survey to three groups of first-year students with resounding success. However, the next step involved interpreting all that data. What does it all mean? What does it tell us? How can we make use of it going forward? Again, enter Shelley Boulianne and her sociology students—all experts in interpreting the very data we were scratching our heads over. We are now working with two students to interpret the data, and finding out fascinating information about what students think about a career in nursing.

Initial results are not encouraging, in that our students continue to have very stereotypical views of nursing practice and most do not want to take on expanded and/or leadership roles or even believe RNs should be doing these things. We have also sent the survey to our fourth-year students to see if these views change as they go through the program—let’s hope so! Going forward we want to compare the results of MacEwan students with students at other institutions in Alberta and across Canada to determine local views and whether students choose institutions for specific reasons. This information will help shape how we attract students to the nursing profession as well as to MacEwan. It will also influence curriculum and help shape how we educate students to help them recognize the expanding role of the RN.

We’re just beginning our research journey and we’re learning as we go. This is what we’ve learned so far:

- Discover something you’re interested in learning about—no two ideas are the same and no idea is a bad one
- Believe you can do it—anyone can
- Never be afraid to ask for help—it takes a village to create research
- Find a good teammate—it’s always more fun than going alone

We are excited to continue learning and growing as researchers and hope we’ll soon be experts on all things related to student recruitment and career aspirations. Hang on for the ride!

CONTRIBUTED BY
Kathleen Miller MN, BScN, RN
Inspiration from Students and Beyond — PTSD: Lurking at the End of Life

The constellation of distressing symptoms in persons with Post-Traumatic Stress Disorder (PTSD) are often misinterpreted or neglected in the care of older adults and those dying at end of life. This was reaffirmed and confronted in a pain assessment and management course in the Post-Basic Nursing Practice (Hospice Palliative Care and Gerontology) post-diploma certificate program.

This particular online class of Canadian registered nurses brought narratives of their work experiences to class discussions. During the discussions, the topic of PTSD arose from a student who shared her experience of pain during her own cancer struggle, and her unique management of PTSD due to this diagnosis.

According to the *Diagnostic and Statistical Manual of Mental Disorders*, life-threatening illness is considered a predisposal risk factor, meaning being diagnosed with a terminal illness can trigger PTSD. Complicating matters, it can sometimes be difficult to differentiate PTSD symptoms from other terminal symptoms. PTSD can exacerbate end-of-life symptoms, or end-of-life symptoms can catapult PTSD from the past.

As my students actively shared their professional experiences relating to these symptoms, I realized that the topic was rarely discussed in the context of end-of-life clients, and each of us recognized that we have unknowingly cared for individuals with PTSD. Our interests were piqued! The reciprocal learning interaction in this class channelled my curiosity into an in-depth analysis of PTSD literature at the end-of-life; one that I transformed from the virtual classroom to a Canadian conference.

I presented my findings at the Ottawa 2017 Canadian Gerontological Nursing Association Conference: Gerontological Nursing – Shaping healthcare for those who shaped Canada. The conference presentation provided a condensed synthesis of PTSD literature and its critical relevance to end-of-life populations. Prevalence in the Canadian population, identification of specific symptoms and predisposing factors, assessment considerations, and consequences for individuals with PTSD were examined. Established pharmacological management and effective non-pharmaceutical interventions were addressed. Emphasis in the application to nursing practice, both in the care of individuals and in the vicarious traumatization of nurses were analyzed. Articulation of evidence-informed practice engaged nurses to critically apprise their professional knowledge and experiences of persons in their care.

Ultimately, my hope has been to raise awareness of end-of-life PTSD and to inspire others to learn more, just as my students inspired me.


**CONTRIBUTED BY**

Gail Couch  MN, RN
Centre for Professional Nursing Education Partnership in China

With the continued globalization of both health care and health-care education, global educational partnerships have begun to emerge to promote the dissemination of information and encourage continued excellence and innovation in health-care education. An example of one of these partnerships is the relationship between Guanghua International Education Association (GIEA) and MacEwan University’s Centre for Professional Nursing Education (CPNE). This relationship began in 2014 when Dr. William Wei, associate dean of MacEwan’s School of Business, began assisting GIEA delegations to visit various nursing programs in Alberta.

GIEA is partially funded by the Chinese government and the organization’s office is in the centre of Beijing. Their prime objective is to promote scientific research and support knowledge dissemination and implementation of evidence-informed outcomes within China’s healthcare vocational curriculum. Through collaboration with international academic institutions, GIEA advocates engaging in educational research and innovation, promoting the development of evidence based education and enhancing scientific research competence amongst their members and educators to progress China’s healthcare vocational educational standards and curriculum.

GIEA is committed to moving China’s nursing education toward advanced international nursing education standards. The specific focus is on strengthening the practical abilities and skills of nursing students through the development of an enhanced curriculum, advanced teaching methodologies and enriched simulation-based learning experiences.

In addition to the partnership with the CPNE at MacEwan University, GIEA has partnered with academic institutions in Canada, the United States, England and Australia to promote the reform and development of nursing education in China. In 2015, two nursing faculty members from MacEwan University joined a faculty study tour to China. Following this successful tour, GIEA and MacEwan agreed that the university’s Faculty of Nursing was well situated to support GIEA’s aim of enhancing nursing educators’ knowledge and skill in teaching and learning. Thus, the CPNE developed the course “Designing Effective Instruction for Healthcare Providers,” specifically for participants from China.

In May 2017, MacEwan’s Faculty of Nursing and CPNE hosted a visiting delegation of deans and directors from various Chinese nursing academic institutions. The purpose of the visit was for the delegates to gain awareness of the Canadian healthcare system and educational opportunities for nurses, so that they could see the potential in the learning opportunity and be motivated to send educators from their institution to the two-week course that CPNE developed.

The CPNE had the pleasure of welcoming six nurse educators from various academic institutions and regions in China, who arrived to complete the face-to-face course in July 2017. The first week of the course focused on furthering participants’ knowledge surrounding the principles of teaching and learning, instructional design and teaching with technology. While there was some didactic learning, the focus was on exercises and activities that fostered an application of this new knowledge, and building practical skills so that participants felt confident they would be able to apply what they learned when they returned to their practice environment. These daily exercises and activities culminated in a capstone project where students worked in groups to develop a teaching plan to demonstrate their understanding of the content presented throughout the week.

The second week focused on simulation-based education theory and application. Some of the key concepts introduced were the International Nursing Association for Clinical Simulation (INACSL) standards of practice; the different levels and modalities of simulation; and designing, facilitating and debriefing a simulation. During this week, students were led through various hands-on activities that explored these concepts, participated in a high-fidelity simulation experience, and designed their own simulation exercise that they would be able to use in their educational institution. At the end of the course, all students received a certificate of achievement from MacEwan University.

To determine how successful the course was in reinforcing the theoretical underpinnings of teaching in both classrooms and simulation centres, and in expanding participants’ confidence and practical skills in using this new information in their future practice, a pre-course and post-course self-assessment was completed by all participants. While there are some limitations to the self-assessment, it was clear that participants not only enjoyed their experience but felt that the course improved their understanding of theory and increased their confidence to try new, theoretically-
sound methods of teaching and assessing students in China. Participants also found that the instructors were very knowledgeable and patient, which helped them to learn, and they enjoyed the various activities and found that they were a key factor in increasing their confidence and willingness to try new ways of teaching once they returned home. A six-month post-course self-assessment will also be sent to all participants to explore if they were able to implement what they learned during the course once they returned home. The results of these assessments will be analyzed and potentially used to contribute to the development of an international research project about the effectiveness of a similar course in an international setting.

The successful running of the first iteration of, “Designing Effective Instruction for Healthcare Providers,” demonstrated that an international partnership between GIEA and the CPNE, Faculty of Nursing at MacEwan University can have a positive impact on knowledge dissemination related to teaching and learning in healthcare curriculum in China. It is hoped that a continued partnership between the two organizations will continue to support Chinese nursing educators in developing enhanced curriculums, integrating advanced teaching methodologies and enriching their simulation-based learning experiences.

**Contributed by**
Shirley Galenza  MEd, BScN, RN
Jessica Wyllie  MSc, BScN, RN
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**Interdisciplinary Teaching Project – The Global Refugee Crisis**

In Winter 2017, faculty members Elizabeth Burgess-Pinto, Ann Little, and Jody Nelson were team members on an innovative teaching project that involved the collaborative integration of both discipline-specific and interdisciplinary approaches to the current global refugee crises. The project was partially funded by the Faculty of Nursing Innovation Fund.

Ninety-three students participated in the project, each doing so through one of five different courses taught by a faculty team member. The courses spanned a number of disciplines, including anthropology, English, nursing and social work, and each one contained a chapter or module on the current refugee crisis from each discipline’s perspective. Students from all five courses came together for three collective forums led by faculty and guest speakers from the community. Thus, students had an opportunity to approach the subject holistically, see a larger picture, learn about themselves, appreciate different perspectives and learn to understand the complexities of the contemporary immigration issue.

The three forums focused on the following topics: Immigration in Canada, Navigating the Self and Other, and Global Citizenship. After each educational forum, the students participated in online discussions that focused on different facets and complexity of the refugee crisis. They discussed the political, environmental, social, health, economic and cultural factors that contribute to the disastrous displacement of so many people and how all these factors are intertwined and influence each other in the curriculum of the involved disciplines and future professional practice of the students. A student conference at the end of term showcased the work of individual students and some of this work is profiled on the library website. Students who attended two of the three forums and participated in the online discussions received a certificate of participation from the Provost.

Response from students was positive as shown in the following quotes:

“Although the Global Refugee Crisis is very upsetting, I enjoyed the learning experience. The panel discussions were relevant and personal which made a huge impact on me personally…I am hoping to educate others through my experience as a learner…”

“The project gave us the ability to critically evaluate an important social issue.”

“I enjoyed that we were able to think about a topic with our classes and write our papers related to it. It was great to all think about one topic across disciplines.”

Faculty who participated found that a cooperative learning community evolved focused on collaborative planning, instruction, and evaluation of learning experiences and outcomes. The project has been expanded for 2018 with instructors from ten faculties participating. The focus is “Journey to Reconciliation” guided by the kihêw waciston Indigenous Centre.

**Contributed by**
Elizabeth Burgess-Pinto  PhD, RN
Ann Little  MN, BScN, RN
ALUMNI SPOTLIGHT

SPOTLIGHT: Hannah Barrington

While my nursing career has taken me through all areas of tertiary care centres (Emergency, Surgery, Post-partum/Gynecology, Pediatrics), I am currently working in the private sector as Community Ambassador for Care at Home by Exquisicare, a home-care provider that specializes in senior care. Although Alberta Health Services works very hard to provide the necessary nursing care for seniors, there are often unmet needs related to companionship, socialization, and supervision. These areas are often the responsibility of family and friends, but lack of support can lead to caregiver burnout, which is what appropriate home care can prevent.

In a volunteer capacity, I spend a number of hours working on initiatives that empower girls and women, through involvement with the Junior League of Edmonton (JLE), a charity that is dedicated to women’s civic leadership, and has a 90-year history in our city. As a member of Ladies on the Green, I help organize a golf tournament “where the golf is optional” that in its four years has raised over $200,000 for the Zebra Child Protection Centre. I recently joined the Lois Hole Hospital Women’s Society Steering Committee; our goal is to grow a network of supporters to influence, inspire, and impact the area of women’s health at the centre of excellence that is the Lois Hole Hospital for Women.

RNs are uniquely prepared for the “real world” after their degrees because of all of the practical experience spent during placements in facilities and in the community, during their schooling. While policy and practice outside of school does not always align with what we had only just been told is “best practice”, there are fewer surprises than in many other professions.

My university experience gave me opportunities to strengthen my problem solving skills, an exposure to different populations with varied coping strategies and histories, and an assurance that the helping profession of nursing was one that suited my personality (bossy) and disposition (generally pretty cheerful).

Front-line nursing is built on relationships. Between nurse and patient, and between nurse and interdisciplinary team. A patient’s trust and comfort level while healing largely depends on the relationships that dominate his/her hospital stay. What I think my instructors tried to teach me, but what didn’t fully sink in until I was a patient, is that small things matter. What is a regular day at work for us is a major life event for our patients, and a stressful one, at that. Care and attention to all interactions, assessment skills, and sensitivity to the needs of others – all skills honed in school – impacted my ability to develop relationships outside of the patient/nurse model. Most of the decisions people make revolve around relationships. “Do I feel comfortable around this person? Is she friendly? Is she trustworthy? Do I feel heard?” Fostering positive responses to these questions is an important part of my nursing education that has served me well.

But the lasting impact of my degree was its contribution to my ability to think critically. If there is one skill that I think affects efficacy in every aspect of one’s life, it’s the ability to assess a situation, evaluate options and form a rational decision. Of course we all have innate biases, and are unduly affected by all sorts of influences, and there are times when emotions win the day (and should!) but the ability to examine our own decisions is the only way we can be confident in our judgment as individuals, and as nurses. I do my best to employ this approach to decision-making in every area of my work and volunteer life, and I credit my BScN for the years of critical thinking practice.

CONTRIBUTED BY
Hannah Barrington BScN, RN
Throughout the Spring/Summer and Fall 2017 terms, Bo Olaiya and Sarah Tougas joined a Faculty of Nursing Research team studying blended learning in undergraduate nursing curriculum, led by Keri-Ann Berga, Elisha Vadnais, Jody Nelson, Agnes Mitchell, Sharon Johnston and Rui Hu. Involving students in research is beneficial for both students and faculty. Through support of the university, and faculty mentors, our research team had the opportunity to work alongside two outstanding MacEwan University students. This collaborative work certainly added to the team’s research process and has also allowed us to be student-centred in our approach to engage students further in research in the undergraduate setting, while also aligning with the Faculty of Nursing Strategic Plan.

Bo Olaiya, a third-year computer science and statistics student at MacEwan, was involved in the study as a research assistant completing data analysis. Bo was also integral to the dissemination of the study at the International Society for Scholarship of Teaching and Learning (ISSOTL) conference in Calgary in October 2017. Bo’s paid research assistant position was funded through the Scholarship of Teaching and Learning Fellowship, through MacEwan University’s CAFÉ and MacEwan Research Services, and he was supervised by Dr. Rui Hu (Department of Mathematics and Statistics). Bo says his work as part of the team “gave me the opportunity to see what working in an interdisciplinary team is like and I also gained valuable insight into the applications of statistical methodology; as opposed to strictly theory.” Bo also shared that this experience helped to “find a creative way to address research questions using sound statistical analysis.” The project certainly benefited from Bo’s hard work and expertise in statistics, as well as from the mentoring offered by Dr. Rui Hu and other team members throughout the process. Bo will continue to work on data analysis during phase two and three of the study in Fall 2017 and Winter 2018.

Sarah Tougas, a fourth-year BScN student at MacEwan University worked with the team to build on the team’s existing literature review and successfully completed a focused literature review on blended learning in undergraduate nursing programs. Sarah’s research assistant position was funded through MacEwan Faculty of Nursing Bright Ideas Innovation Fund. Sarah aspires to build on her work through future Undergraduate Student Research Initiative funding. Sarah shared that her experience “was very interesting to complete the literature review and to analyze the existing research. This opportunity was significant for me because I aim to become more involved with research. As nurses, it is part of our responsibility to engage in research initiatives and as a nursing student, it was especially meaningful for me to be involved in research that aims to improve nursing education.” Sarah’s work was included in the research team’s poster presentation at the International Society for Scholarship of Teaching and Learning. The team also looks forward to supporting Sarah in expanding on her work, including dissemination opportunities at upcoming nursing conferences.

CONTRIBUTED BY
Sarah Tougas  BScN (student)
Bo Olaiya  BSc (student)
Keri-Ann Berga  MScN, BScN, RN, IBCLC, Perinatal Nurse Certified
It is widely acknowledged that student learning is positively influenced by active engagement and involvement in the learning process. Computer-assisted learning (CAL) can provide an environment in which learners can be self-directed and experience a personalized, self-paced-based opportunity, which through its interactivity facilitates learner engagement (John, 2013). CAL can also be effectively utilized as a supplement to classroom learning experiences, which facilitates cognitive acquisition and application of concepts. Combined with its known effects of enhancing knowledge retention, CAL can facilitate the student’s overall longer term success in acquiring the knowledge and applying it in future practice with a focus on knowledge integration, critical thinking and patient safety.

With this information in mind, our research team developed one module of an e-learning project as a strategy to provide support and to supplement student learning in a nursing course about families with young children. Development of this module required a partnership between Liz White-McDonald and Keri-Ann Berga as the nursing content experts, and Chunyan Zhang, our multimedia technological innovation expert. The CAL module was designed to help students master topics that have typically been challenging for them to understand and retain, by interacting with the content in a variety of ways. It is made available to all students enrolled in the course through Blackboard (an e-learning web application) as adjunct to required readings, classroom and lab instruction. Based on their learning needs, students can use the CAL module as a study tool and can revisit the concepts reviewed within it throughout the semester, when and where it is convenient for them.

In order to assess the value of the CAL module to student learning we have developed a scholarship of teaching and learning research project which began in September 2017 and extends to the end of December 2018. We have adapted the Instructional Materials Motivation Survey (IMMS) (Keller, 2009) and integrated it into an online survey which students complete midway through their course, if they agree to participate. The IMMS is used to assess the motivational characteristics of instructional materials using the Attention, Relevance, Confidence, and Satisfactory (ARCS) model of motivation. To date we have one set of responses from the Fall 2017 semester and will continue to recruit students in the Winter 2018 and fall 2018 course offerings.

CAL is considered to be an innovative pedagogical approach which expands on content understanding (John, 2013). Combined with its effects of enhancing knowledge retention, it can facilitate the student’s overall longer term success in acquiring the knowledge and applying it in future practice. This research will allow for further exploration of the supplemental CAL strategy to support student knowledge acquisition, retention, and application within an undergraduate nursing course. Insights gained might also be used by nursing educators considering integration of CAL within their courses.


**CONTRIBUTED BY**

Elizabeth (Liz) White-MacDonald MN, BScN, RN  
Keri-Ann Berga MScN, BScN, RN, IBCLC, Perinatal Nurse Certified  
Chunyan Zhang MA, MS
4. Does being part of a cohort impact graduates’ ability to integrate socially and professionally into the operating room?

An important distinction for this evaluation is that the focus is on the perceptions of graduates and management. It is not within the scope of this evaluation to determine cause, effect, or measured impact on indicators, such as patient safety; information gathered in this evaluation may be used in the future to develop research studies that could look at these aspects.

Initial data collection began in August 2017 and will continue through December 2018, as cohorts continue to graduate. Separate, anonymous questionnaires were used for each group and sent out via Google Forms. The response rate as of March 2018 is 56% for graduates and 78% for managers. Areas of strength that have been identified so far include readiness to enter practice (94% of graduates and 86% of managers feel that graduates are prepared) and the ability to integrate ORNAC standards into the practice setting (100% of graduates and 86% of managers feel that graduates are able to integrate the standards). An outstanding result is that 100% of graduates and managers feel that graduates of the program provide safe patient care.

One area identified as an opportunity for growth is around the perceptions of support and the meaning of being part of a cohort. As a whole, managers (93%) feel that the cohorts are an effective way of supporting LPNs who are new to the practice setting; however, only 66% of graduates felt that being part of a cohort was helpful in making the transition to becoming a member of the operating room team. Participants in the evaluation have been very willing to share their experiences with the program while providing supportive and constructive feedback about the program. Some of their suggestions will be implemented with the next cohort to try and improve the supportive factors; ongoing data collection will help us determine if these interventions are successful.

The evaluation has been an exciting project within the CPNE and provides a platform for strengthening both the program and the relationship with our clinical partner. Once the initial evaluation is complete, the data will be used to inform a comprehensive evaluation of both LPN and RN streams. The results will be disseminated to add depth to the discussion around orientation programs to improve recruitment and retention.

CONTRIBUTED BY
Jessica Wyllie MSc, BScN, RN
3-D Virtual Human Cadaver:
Anatomage in the Faculty of Nursing

MacEwan University community members commuting through the Robbins Health Learning Centre may have seen me pushing a wide black table with a glass top through the hallways. This table is the latest addition to the Clinical Simulation Centre in the Faculty of Nursing. It looks like a coffin, but rather than carrying an actual human cadaver, it houses a 3-D virtual human cadaver. This table is a cutting-edge teaching technology called Anatomage.

The table consists of life-sized, 3-D colour images of the human body that when projected on a big classroom screen display stunning virtual human body images. These images often send nursing students into disbelief, gluing their eyes to the screen! Most recently, this table caused a sensation both with the MacEwan community and the public during Open House tours in November 2017.

Our nursing students can travel through this virtual cadaver, unfolding every single anatomical structure along the way. The uniqueness of this table lies in the fact that these life-sized images are taken from actual human cadavers and transformed into 3-D images that can be rotated 360 degrees, increased or decreased in size and cut into multiple sections. A number of the body’s organs and tissues can be added or removed to reveal internal structures. For anatomy courses without access to cadaver dissection, such as ours in the Faculty of Nursing, Anatomage serves as a realistic alternative, using innovative technology to raise the standards of nursing students’ education to the next level.

The table allows our students not only to visualize most body tissues, muscles, and organs but also to separate them from the cadaver. They can rotate, virtually slice (layer by layer) into segments, and custom label them to reveal its anatomical details. Whether you are planning to teach gross or regional anatomy, show a 3-D image of the brain, display a chest X-ray, show a CT-scan/MRI of the heart or brain, or simply wonder what a section of your intestine or liver looks like, the table allows you to do it all.

The life-sized 3-D rendering displayed on the table enhances case reviews with a complete nursing team. Whether pathophysiologists want to show a brain aneurysm, a dislocated joint or certain endocrine disorders to students, or embryologists want to show various stages of embryonic development, it is an easy and highly effective communication tool. This allows new methods of collaboration between anatomists, nurse educators and clinicians in the Faculty of Nursing. The table also serves as a social hub for health-care professionals and nursing students, allowing them to develop socially interactive learning skills that were not possible before this technology. In addition, it can be used for particular procedures such as IV and central lines, catheter insertion, intercostal drains or simply educational consultation.

As evidence of the efficacy of the device as an effective teaching tool, I conducted a study that compared the final grades in my anatomy classes between students that were exposed to Anatomage to those who were not, and the data showed a significant improvement. Furthermore, a student survey conducted on the features of Anatomage also indicated their overall satisfaction. Taken together, the table appears to not only have enhanced their overall knowledge of the human body, but also provided them with a true perception of it. Plans are now underway to make this teaching tool available outside of anatomy classes to offer students more practice time with the table. Finally, the table can be used as a unique tool to merge anatomy learning from pedagogy to andragogy, leading us to believe the popular notion that seeing is believing.

CONTRIBUTED BY
Yuwaraj (Raj) Narnaware PhD, MSc, BSc
Classroom Innovation Related to Indigenous Knowledge and Culture

A key focus for both MacEwan University and the Faculty of Nursing is integration of the Truth and Reconciliation Calls to Action into the classroom and university operations. I share this goal, and in order to support it, I developed a class based on emancipatory pedagogy, narrative storytelling and arts-based pedagogy, allowing fourth-year Bachelor of Science in Nursing students to engage with Indigenous knowledge, culture and health in the context of nursing practice and nursing being.

Emancipatory pedagogy is rooted in the idea that education should play a role in creating a just and democratic society. It involves a way of thinking about, negotiating and transforming the relationships in classroom teaching, the production of knowledge, the institutional structures of the school, and the social and material relations of the wider community. Knowledge is viewed as living and acquired by students as they actively engage with the curriculum and their experiences.

Sharing narratives serves as an approach to thinking about teaching and learning that evolves from the lived experiences of key participants. It presents an opportunity for true dialogue aimed at developing a shared understanding of each other’s stories and intercultural knowledge that can lead to meaningful change and development within a safe, supportive learning environment. Additionally, arts-informed pedagogy is a means to facilitate learning using multiple intelligences which can also stimulate greater student engagement and learning.

The goal was for students to engage in critical reflection prior to and after the class to examine their own values, beliefs and perspectives related to Indigenous peoples. Coupled with the sharing of experiences within an environment considered to be open, safe and respectful, transformational learning could occur. Students were encouraged to consider how new concepts fit within their personal points of view and what revisions need to occur to arrive at new knowledge, self-awareness and knowing in relation to nursing practice.

I invited Alsena White, Knowledge Keeper (Elder) from Saddle Lake Cree Nation, and another nehiyaw (Cree) guest, Lana Whiskeyjack, to co-facilitate a three-hour class with my fourth-year BScN students. Alsena served as a guide and advisor, as she shared her wisdom and facilitated understanding of Indigenous Cree knowledge. Lana has recently completed her PhD in Indigenous Studies with a focus on intergenerational resilience, integrating multiple art forms in her dissertation. Her background and research focus on beauty and resilience as part of healing.

Alsena and Lana shared their narratives and views of knowledge, spirituality, health, effects of colonization, and healing through personal storytelling. As part of this session, Lana, who is an artist, engaged the students in completing a piece of bead art, which was used to connect with her narratives, and share beauty through art during the telling of traumatic stories.

In order to facilitate organizing this class, I was awarded funding through the Faculty Development Teaching and Innovation fund which allowed me to invite Alsena and fund the art supplies. I created an online survey to obtain feedback from the students in relation to this class. Overall, student feedback was positive in relation to meeting the class objectives, as evidenced by two quotes that represent many of the statements students provided: “It made me want to spread awareness”, and “it made me want to learn more and try to understand further how I can incorporate this into my practice.” Students were encouraged to continue with their reflexive practices while engaging in relational inquiry as a means to address reconciliation and the Truth and Reconciliation Calls to Action.

CONTRIBUTED BY
Elizabeth (Liz) White-MacDonald  MN, BScN, RN
Like most research projects, it began with an idea. An idea inspired by a little boy named Jared who was fatally wounded in an incident of domestic violence when he tried to stop his father from stabbing his girlfriend and her daughter.

My research program focuses on children exposed to domestic violence. As a registered nurse and a researcher, I began to think about how we could prevent injuries in children who live in homes where domestic violence exists. Research shows that children are not passive bystanders during incidents of violence. They yell and ask for the violence to stop, and often physically intervene in their attempt to stop the fighting. Many children get hurt trying to do so. When abused women leave to seek safety, they often return to their abuser several times before leaving permanently. Meanwhile, children are at risk of getting injured when the violence continues. When women do leave abusive relationships, instead of the violence ending as one would expect, the violence sometimes escalates. I began to wonder how to get information to children to teach them some strategies to increase their safety. The idea of writing a children’s book came to fruition.

I wanted the book to be based on the information I gleaned from my program of research, as well as my knowledge of the work of other researchers who study children exposed to domestic violence. The project is really a knowledge translation project – getting information into the hands of people who could use it – in this case, children who live in environments where domestic violence exists. The information had to be sensitive, developmentally appropriate and appealing to young children who are most at risk for injuries. I wanted to teach children some strategies to increase their safety during violent incidents. At the same time, I wanted to avoid giving children false hope that the violence would stop.

There was an opportunity to apply for funding to remunerate a student in the Professional Writing Program at MacEwan to help me in this project. Amanda Ens, a student in her fourth year of the program, joined the project as part of her senior workplace experience. Amanda used her creative writing skills to translate scientific evidence into a story that would appeal to young children. After much effort, we completed the manuscript and began to search for an illustrator. Illustrations are very important to captivate and hold children’s attention. After several attempts to secure funding for this non-traditional but innovative project, we were successful. Another student came on board to work on this project. Duncan Mackay has a true passion for drawing and a strong work ethic. His ability to understand what Amanda and I were trying to get across to children enabled him to create the missing piece for this book. We met with him many times over the course of a year as he completed the numerous illustrations for the book. His illustrations really bring the story and characters to life.

Our book is titled Tommy’s House Has a Secret: A Story for Children about Domestic Violence. The book conveys some important messages to help children understand that they are not at fault for the violence between their parents/caregivers, and to teach children some strategies to protect themselves during a violent incident such as getting out of the way and hiding in a safe place, phoning 911, and telling someone about the violence. At the end of the book, there is a place for children to express some of their feelings and write down some of the strategies they learned to increase their safety in an emergency.

Teachers, therapists, nurses, social workers, child care workers, shelter workers and other professionals will be able to use this book as a resource to assist vulnerable children, to help children who have disclosed abuse, to encourage children who are afraid to disclose abuse, and to teach other children about domestic violence. Parents
can read this book to their children to help them cope with this stressor in their family.

The book has been distributed to all shelters and transition houses for women seeking safe refuge in Alberta as well as the Edmonton Zebra Child Protection Centre and the Stollery Child and Adolescent Protection Centre. We have also provided the book to several libraries, primary schools, and physician offices in Edmonton and the surrounding area. We are continuing to work on strategies to distribute the book more widely so that vulnerable children will have access to it.

Chi Nu is a nursing organization at MacEwan University that is a chapter member of Sigma Theta Tau International Nursing Honour Society (STTI). The members of Chi Nu come from diverse backgrounds within the nursing profession, including undergraduate students, faculty, graduate students, researchers, nurse leaders and alumni. Initially created as MacEwan University Nursing Honour Society (MUNHS) in October 2011, this organization evolved to be part of the prestigious STTI on May 1, 2015. Chi Nu is the 515th chapter established at the Honor Society of Nursing, STTI, and there are currently 92 active members.

Chi Nu held an induction ceremony on March 22, 2017. For students, the criterion for eligibility into Chi Nu was being in the top 35 per cent of their respective cohort based on cumulative GPA when entering Nursing 375 in their third year of the BScN program for Winter 2017. The institutional report from the registrar’s office showed that 42 students had a GPA ranging from 3.35-3.88, meeting our eligibility criterion. Of those 42 students invited, 17 accepted the invitation to join Chi Nu. In addition, there were three clinical leaders who joined Chi Nu and three dual and transfer members. In summary, a total of 23 individuals were inducted.

The induction ceremony was held in the Paul Byrne Hall at MacEwan University. Invited dignitaries included Dr. Vincent Salyers, dean of the Faculty of Nursing, Pat Moore-Juzwishin, chair of the BScN program, Dr. Brian Parker, chair of Psychiatric Nursing, Shirley Galenza, director of the Centre for Professional Nursing Education and Colette Foisy-Doll, director of the Clinical Simulation Centre. Our president, Shelly Gillespie gave opening remarks, after Elder Elsie Paul brought greetings and an opening prayer on behalf of Treaty Six.

Vince Salyers brought greetings on behalf of the Faculty of Nursing. Our guest speaker, a long-time Sigma Theta Tau member, Dr. Joanne Olson, professor, Faculty of Nursing, at the University of Alberta gave an inspiring presentation to our inductees. Dr. Colleen Maykut, our past president ended the ceremony with closing remarks. Dr. Judee Onyskiw conducted the induction of new and transfer members. Forty-nine people, including current Chi Nu members, the new inductees, family and other invited guests attended the ceremony.

CONTRIBUTED BY
Judee E. Onyskiw PhD, MN, BScN, RN
Amanda Ens BA

CONTRIBUTED BY
Christine Shumka MN, BScN, RN
Simulation-based learning has burgeoned on a global front over the past ten years, having started in North America, and then extending to all parts of the world. Simulation-based education (SBE) is an "educational technique that replaces or amplifies real experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner" (Gaba, 2004, p. i2.). SBE is also viewed as an "educational strategy in which a particular set of conditions are created or replicated to resemble authentic situations that are possible in real life " (INACSL Standards Committee, Glossary, 2016, p. S44). As integration and expansion of simulation continues, it is important for experienced simulationists to teach newcomers about seminal studies in simulation (Hayden, Smiley, Alexander, Kardong-Edgren, & Jeffries, 2014), emerging standards of best practice (ASPiH, 2016; INACSL, 2016; INACSL, 2017; Lewis et al., 2017), guidelines for prelicensure nursing programs (Alexander, et al., 2015) and accreditation programs (SSH, 2016).

Over the past 20 years, MacEwan’s Clinical Simulation Centre (CSC) has reached out to our world neighbours to build valuable simulation-related initiatives and enriching experiences for faculty and students. One example is a longstanding collaboration between MacEwan’s Faculty of Nursing (at one time housed within the Faculty of Health and Community Studies) and Ternopil State Medical University’s (TSMU) Institute of Nursing. Together, faculty from the respective institutions collaborated to offer reciprocal nursing conferences, study tours in Canada and Ukraine, collaborative local and government organization-based projects, the delivery of a 23-module-based Nurse Credentialing Program in Ukraine, and the development of educational brochures on hypertension to name a few. The first faculty visit from TSMU, Ukraine to the CSC at MacEwan was spearheaded by Mona Haimour (DNS faculty) in fall 2014. During the visit, two nursing instructors from TSMU, Dr. Nataliya Petrenko, and Dr. Tamara Rybalka visited MacEwan for a three-week study tour with the Department of Nursing Science. They participated actively alongside MacEwan nursing faculty and students in nursing labs and also completed the EASEE Novice, a professional development workshop series required for all faculty teaching in simulation within the Faculty of Nursing. Faculty from both countries were enthused by the richness of intercultural exchanges and vowed to continue working together from a distance. By 2014, TSMU was still very new to simulation and desired in situ expert consultation and mentorship. Plans began for a site visit to TSMU.

One way to foster foundational excellence in new health-care programs is through international partnerships. To that end, in the fall of 2016, MacEwan’s Clinical Simulation Centre director, Colette Foisy-Doll, collaborated with Yuri Konkin, director of the Ukrainian Research and Development Centre, and Liz Burgess-Pinto of the Department of Nursing Science to begin planning shared capacity building initiatives for faculty and students from both countries. In May of 2017, Colette traveled to TSMU and was greeted by a very enthusiastic team of simulationists in various stages of development as simulation educators. Both sites provided funding for the trip. It was a joy to experience Ukraine and to learn about TSMU’s organizational culture and climate in context, as well as, the country’s differing political, educational and healthcare structures and regulation practices. Furthermore, throughout the visit, it was fascinating to witness dominant expressions of Ukrainian culture through glorious works of art, architecture, and
wonderful music, drink and food. Later, in July of 2016, four MacEwan nursing students visited TSMU’s International Summer School for an interprofessional learning experience that was co-sponsored by Ukrainian Foundation for College Education (UFCE) and TSMU.

When working as a collaborator in a host country with unfamiliar systems and customs, it is essential that visitors take the time to understand the socio-economic, political milieu to function safely, appropriately, ethically, respectfully and responsibly within intercultural exchanges. In fact, taking the time learn about the host country is vital to positive outcomes in collaborative development and shared capacity building, primarily because of the complex nature of SBE.

Through the use of an interpreter providing translation from English to Ukrainian, the TSMU simulation team engaged in one full week of interactive workshops that culminated in all participants attending the university’s 60th anniversary celebrations. The festivities included a five-hour ceremony featuring visitors from around the world and numerous performances by professional singers, dancers, and chorists, followed by a gala event out in the country. Dr. David Atkinson, then the president of MacEwan University, delivered a rousing lecture to TSMU students and faculty on the university of the future; additionally, he was conferred an honorary PhD by TSMU at the official anniversary ceremony. It was a fantastic day filled with pageantry!

In the fall of 2017, Dr. Nataliya Haliyash, pediatrician and nurse, and full-time faculty from TSMU, arrived for a three-week study tour focusing on simulation. During this time, she was engaged in the following capacity-building activities to better prepare her to lead the integration and implementation of simulation-based learning and interprofessional education at TSMU:

• Completed the MacEwan EASEE Complete two-day workshop series
• Orientation to integrated AV/IT simulation technology (Bline)
• DNS Classroom Attendance: Leadership, Health Populations, Nursing Research (presentation to students)
• MacEwan - many nursing simulations at MacEwan
• NAIT – childcare scenarios and overview of paramedic program
• Norquest – med/surg scenarios
• Royal Alexandra Hospital – pediatric medical simulations
• University of Alberta Surgical Simulation Residency program simulation activities
• Tours of MacEwan University, simulation facilities at NAIT, NorQuest College, the Health Sciences Education and Research Commons, and the nursing lab at the University of Alberta.
• Visited with Alex the Artificial Intelligence Simulator, and many other simulators!
• Attended the Academic Women’s Network event – Welcoming MacEwan President Deb Saucier who shared her vision for academic women at MacEwan,
• Lunch and meeting with the Ukrainian Foundation for College Education (UFCE) Board,
• Uniquely Canadian cultural experiences included a trip to the Canadian Rockies with Khrystyna Snihura, a visiting ESL Instructor from Lviv, and several MacEwan faculty, to Elk Island Park.

Nataliya had first-time experiences with Canadian cuisine including her first cheese and chocolate fondue, a Thanksgiving dinner at the Hotel MacDonald, a bison lunch, Chinese food, Brazilian BBQ, eggs Benedict, and Bears Paw Chocolates! She expressed her delight with the wide array of delectable food choices.
Special acknowledgements are extended in particular, to Dr. Vince Salyers (Dean of the Faculty of Nursing), Yuri Konkin (Director, Ukrainian Research, and Development Centre), Liz Burgess-Pinto, Christine Shumka, Carol Wild, Ann Little, the faculty teaching in N479 and N 489, the CSC team, as well as, our simulation community of practice partners; Joe MacPherson, Norbert Werner, and Kerri Oshust at NAIT, Dr. Melissa Chan, Dr. Bin Zheng, How Lee, Brenda MacIntyre, and Sharla King at the University of Alberta, Lynn Neis at Norquest, and the CSC team at MacEwan for facilitating such excellent learning experiences for Nataliya. Thank you also, to Mona Haimour and those that worked with her for the work they engaged in with URDC to create our initial connections with TSMU and coordinate the first TSMU faculty visit to MacEwan in 2014. Since that time, we have had vibrant international faculty and student exchanges that have enriched learning and lives.

Before her departure, Nataliya led some of MacEwan’s faculty through a debriefing session about her experiences in Canada. She observed Canadians as, “very polite, hospitable and open, and law-abiding.” She noted that Canada is a “society for people, that aims to meet the needs of its people collectively,” and was struck to witness much teamwork and shared problem solving everywhere she went. She also commented on the differences between Canadian and Ukrainian higher education and was touched by our student- and faculty-oriented focus on lifelong learning. Moreover, Nataliya was most impressed by the extent to which experiential learning is embedded into health-care curricula in all the programs she visited. She was inspired by the efficiency of our educational systems and operations and vast resources for learning, like MacEwan’s Centre for the Advancement of Faculty Excellence (CAFÉ) for faculty development. According to Nataliya, her biggest takeaways from the visit related to simulation were regarding the student-oriented approach aimed at stimulation of critical thinking development, the importance of debriefing learning experiences using structured approaches, the value of low-fidelity simulations, knowledge of how to integrate high-fidelity simulations into curriculum, the possibilities of implementation of team-oriented interdisciplinary education, and the need for research: Simulation Cultural Organizational Readiness for Simulation (SCORS) assessment at TSMU.

Since her return to Ukraine, Nataliya is spearheading a new research project based on a tool developed by MacEwan faculty and external researchers. The SCORS is a valid and reliable instrument used to measure the extent to which organizations are ready for simulation integration (Evaluating Healthcare Simulation, 2018). The spring of 2018 will feature the first offering of HLST 400 (Global Health) Course Elective – with the field placement component in Ternopil, Ukraine, teaching and learning and research and knowledge dissemination opportunities, and other ongoing community of practice collaboratives related to simulation and Sim-IPE. It was our pleasure and privilege to host a return visit to Canada for TSMU faculty while having the opportunity to get to know each other better Together, we are better!


CONTRIBUTED BY

Colette Foisy-Doll  MSN, BScN, RN, CHSE
FACULTY ACHIEVEMENTS
Awards, Honors and Recognitions

CNA 150 *Nurses for Canada* distinction was received by two of our faculty, honoring excellence in nursing over the past 150 years in Canadian Nursing

- Sharon Chadwick
- Colette Foisy-Doll

Congratulations also go out to the following MacEwan University faculty members and our dean, who were honored this year.

**Colette Foisy-Doll**

2017 SIM Citizenship Award

**Janelle Ostby**

*Master of Nursing in Aging, Faculty of Nursing, University of Alberta*

**Vince Salyers**

*Salyers, V. et al. (2017, Aug). Distinguished Team Award, Ethiopia Senior Midwifery Tutor Training Program, Mount Royal University, Calgary, AB.*

*Salyers, V. (2017). Searchable Directory of Canadian Researchers in Online, Blended and Distance Education. Profile available at: https://teachonline.ca/tools-trends/searchable-directory-canadian-researchers*

*Salyers, V. (2017). Government Appointment as Public Member, Council of Alberta Dental Assistants (3 year appointment).*

Research Funding

**Paul Kerr**

$1928, Innovation Fund Completion. Experimental Biology conference attendance, Chicago, May 2017

**Meagan LaRiviere**

$2000, for tuition towards dissertation (Centre for Advancement of Faculty Excellence Fund)

**Raj Narnaware**

$1421.57, Human Anatomy and Physiology Society 31st annual Conference, (Centre for Advancement of Faculty Excellence Fund)

$2587, Innovation Fund Completion. Experimental Biology conference attendance, Chicago, May 2017

**Judee E. Onyskiw**

$1322.33, Supplemental Professional Development Fund, Conference Presenter, National Conference on Health and Domestic Violence, San Francisco, California.
Publications


Publications


Peer-Reviewed Artistic Works


Presentations

Burgess-Pinto, E., & Shumka, C. (2017, July). Global Health Perspectives—Moving Beyond Disease Control. Presentation at International Summer School (TERISS) at Ternopil State Medical University, Ternopil, Ukraine.


El Hussein, M., Salyers, V., & Osuji, J. (2017, October). Evaluating the effectiveness of visual narrative illustrations (VNIs) used to teaching undergraduate nursing students pathophysiology. Poster presentation at the International Society for the Scholarship of Teaching & Learning (ISSOTL) Conference. Calgary, AB.

Foisy-Doll, C. (2017, May). Faculty development sessions on simulation education (one week). Invited speaker. Ternopil State Medical University, Ternopil, Ukraine.
- SCORS: Organizational Culture Readiness for Simulation
- Pedagogical Foundations: What is Simulation-Based Learning?
- Best Practices in Simulation Design and Curricular Integration
- The Art of Pre- and Debriefing
- Simulation-Enhanced Interprofessional Education
- Looking to the Future


Presentations

Heinemann, J., & Maykut, C. (2017). How does wholehearted nursing challenge the way that we engage with nursing pedagogy, accountability, as well as shame culture? Poster presentation at The 38th International Association for Human Caring Conference: Rediscovering Love and Compassion in Caring Practice and Caring Science. Edmonton, AB.


Kerr, P.M. (May 2017). The importance of being a resistance artery. Faculty of Nursing Scholarship Day. MacEwan University. Edmonton, AB Canada.

Kerr, P.M., Wei, R., Lunn, S.E., Gust, S.L., Classen, B., Murphy, T.V., Sandow, S.L., & Plane, F. (June 2017). The functional contribution of myoendothelial feedback to arterial tone is determined by the nature of the vasoconstriction. Poster presentation at Cardiac Science Research Day, University of Alberta.


Our research and scholarly activities are driven by the following strategic priorities.

**Transformative Learning**
Transformative learning deepens understanding of the self, revises or reaffirms belief systems and changes behavior. We will work to ensure that transformative learning occurs by delivering academic excellence with innovation, as demonstrated by:

- Excellence in evidence-informed teaching and curricula
- Leading in simulation-based learning and continuing education for nurses and other health care providers
- Expanding inter-professional education and international learning opportunities for faculty and students

**Leading-Edge Research and Scholarship**
We will foster an environment that encourages innovation by:

- Cultivating a culture of research and scholarship
- Extending local, national and international research and scholarship alliances
- Strengthening knowledge exchange and mobilization

**Inspired Leadership and Partnerships**
We look to partner with academic and industry leaders who are shaping the future and who will elevate our shared work by:

- Expanding leadership focus for students and faculty
- Extending partnerships locally, nationally and globally
- Leading in student employment readiness

**Spirit of Well-Being**
We will support the well-being of faculty, staff and students by:

- Celebrating diversity
- Promoting healthy work and learning environments
- Supporting professional and career development

View our Strategic Plan at MacEwan.ca/Nursing