OVER THE PAST THREE YEARS there have been a number of exciting and challenging developments in the School of Nursing. Brainstorming sessions that commenced in the fall of 2001 culminated in a two-day workshop in June 2002, held in the Laurentians, to develop strategic directions for the School. Thanks to the generosity of the Newton Foundation, we were able to have 49 participants, including all full-time faculty members, a number of part-time faculty members, nursing directors from institutions and community agencies in the McGill Network, students, and representatives from the Ordre des infirmiers et infirmières du Québec, CÉGEPs in the McGill CÉGEP Consortium and the McGill Development Office. The Dean of Medicine and Mr. and Mrs. Ingram from the Newton Foundation attended as well.

The vision of having McGill recognized as one of the top three academic nursing centres in the world has guided our subsequent actions. We are building on strengths, including our location in a research-intensive university located in a culturally diverse city bridging the French- and English-speaking worlds. We are working with the nursing faculty at the Université of Montréal to make Montreal an internationally recognized centre of academic excellence in nursing. It is an invigorating time to be at McGill and in Montreal.

In the fall of 2003, McGill’s new principal, Dr. Heather Munroe-Blum, had the university and each sub-unit embark on a five-year strategic planning process. As a result of the June 2002 workshop, the School of Nursing was fortunate in having a plan that needed only some fine tuning.

Educational Programs

The educational programs, including the PhD program, are thriving. The new five-year integrated DEC-baccalaureate program (three years at CÉGEP followed by two at McGill) has been approved and the first cohort of students will arrive in September 2004. Marcia Beaulieu, with assistance from Omaima Mansi and Madeleine Buck, has done a superb job of heading up that initiative.

As an outcome of a provincial task force addressing the preparation of nurses to work in emergency departments, Quebec universities were asked to provide a 15-credit (five-course) micro-program for nurses working or interested in working in emergency departments. Thanks to Dr. Beaulieu and a wonderful team of nurses from the emergency departments of the hospitals in the McGill Network who developed and implemented the program, the first cohort of students was admitted in January 2003. Two of the courses developed for this program are now included in the BN curriculum.

Susan E. French, Director, 2001–05
The BScN program, initially under the leadership of Kathy Sherrard and later Madeleine Buck, graduated its first class in the fall of 2002 from the revised curriculum that was introduced in 2000. Efforts by a recruitment officer have resulted in a substantial increase in enrolment in the past two years. Many prospective applicants use our Web site (www.nursing.mcgill.ca) to learn about programs, so we have upgraded the site to make it more attractive, informative and user-friendly.

At the request of the students, the name of the Generic Master’s program has been changed to Direct Entry Master’s. Persons with non-nursing undergraduate degrees are able to meet the requirements to enter the profession after completing a three-year program of study. This is the only program of its kind in Canada, and, due to improved advertising, enrolment greatly increased in 2003. With graduates such as Ann Lynch, MScA ’86, in leadership positions (Director of Nursing, McGill University Health Centre), the students are provided with wonderful role models.

The master’s program, for both DE and RN students, is under revision in response to changing health service needs. Hélène Ezer is guiding those changes. A benefit of being one of the last provinces to accept the Nurse Practitioner position is that we can build on lessons learned elsewhere as we develop the NP option at the graduate level.

Research Initiatives
The School has a small but highly productive group of researchers. Prominent researchers based at the School of Nursing include Celeste Johnston, a James McGill Professor (a prestigious internal award) since January 2002 who is recognized internationally for her research on pain in neonates. (A feature story on the front page of the National Post in late December 2003 describing Dr. Johnston’s innovative research was well deserved.) Dr. Johnston is co-chairing, with her counterpart at the Université de Montréal, a major research initiative on the evaluation of clinical nursing interventions. This initiative involves some 20 researchers from the two universities.

Anita Gagnon is fast becoming the foremost nurse researcher in Canada in the area of immigrant and refugee health. Carmen Loiselle is building a reputation in knowledge transfer and care of patients with cancer. Both of these investigators have externally funded career awards. Margaret Purden, Director of Nursing Research at the Sir Mortimer B. Davis–Jewish General Hospital, conducts research in the area of cardiovascular nursing. Judith Ritchie, Director of Nursing Research at the MUHC, and Janet Rennick and Frank Carnevale at the Montreal Children’s Hospital, are all making significant contributions to the advancement of nursing knowledge and its utilization to change nursing practice.

A cadre of young investigators are now being mentored and will be making their expertise known in the near future. The opportunity to have researchers and clinicians work together in clusters is a strength of our scientific endeavours. The School is also contributing to the development of new researchers; Celeste Johnston and Carmen Loiselle are principal investigators on substantial national research training grants, while Margaret Purden and I are co-investigators on two others. The McGill School of Nursing is a partner (with the Université of Montréal and Université Laval nursing faculties) in a research training centre funded by the Canadian Health Services Research Foundation (CHSRF) and the Fonds de Recherche en Santé du Québec (FRSQ). This centre focuses on the preparation of a critical mass of researchers to undertake research in the area of nursing services administration. One of its distinctive features is the involvement of decision-makers in health services, particularly nursing services. Doctoral fellowships of $50,000 per year for four years are provided, with the institution that sponsors the student funding half the fellowship and the CHSRF/FRSQ grant the other half. McGill has two doctoral students sponsored by the MUHC/CHSRF/FRSQ.

McGill Nursing Network
The close collaboration between the School and the McGill Nursing Network enables us to provide quality educational programs, despite a chronic shortage of resources, and to conduct ground-breaking research. The contributions of nursing service, in facilities ranging from high-tech hospitals (MUHC hospitals as well as the SMBD–Jewish General and
Nursing

St. Mary’s) to a psychiatric hospital (the Douglas), to long-term-care settings and community agencies, have been truly remarkable. The Nursing Network is well along in its development as an outstanding centre of academic nursing in which education, research and service are integrated. Currently, some 240 nurses who are employed full time in the service sector hold part-time (non-salaried) appointments at the School or elsewhere at the university, and all are contributing to our educational and/or research activities. The McGill Nursing Network is vital to the future of the School.

Clinical Placements
The expansion of the educational programs is putting greater strain on the clinical facilities to provide placements for the students. Since 2002, Bev Rowat has been doing a fantastic job of finding appropriate placements. She works closely with the clinical placement officer for three of the English-language CÉGEPs that have nursing programs. The School recognizes the tremendous demands being placed on the nursing departments in all the facilities used for clinical education. Efforts are underway in the province to have the education ministry recognize the need for special funding for clinical nursing education. The School is working with the University Planning Office and two other professional schools in the medical faculty – Physical and Occupational Therapy and Communication Sciences and Disorders – to prepare a proposal for new quarters. The university is waiting for a response from the Quebec education ministry to its proposal. Another major development is the interdisciplinary clinical skills laboratory described by Madeleine Buck on page 12 of this newsletter.

Faculty Publications

Canadian Essentials of Nursing Research, by C. Loiselle, J. Profetto-McGrath, D. Polit and C. T. Beck (2003), is selling well. A textbook on the dimension of collaboration in the McGill Model of Nursing, by Laurie Gottlieb, Nancy Feeley and Cindy Dalton, is scheduled for publication in 2004. The Newton Foundation provided funding for the preparation of this book. It also funded the move to have CJNR (Canadian Journal of Nursing Research) published electronically.

Student Associations

The student associations have been extremely active. In January 2004 the Nursing Undergraduate Society hosted the annual meeting of the Canadian Nursing Students’ Association. The conference was well organized and a huge success.

Space Issues

The needs of the School now exceed existing space. In the fall of 2003 we identified our existing and long-term space needs and worked with the University Planning Office and two other professional schools in the medical faculty – Physical and Occupational Therapy and Communication Sciences and Disorders – to prepare a proposal for new quarters. The university is waiting for a response from the

Faculty workshop, Sainte-Adèle, June 2002; Madeleine Buck and Laurie Barkun are featured in photo

Susan E. French
Director, School of Nursing, 2001–05
Since its establishment in 1998, the Bachelor of Nursing program has attracted a small but steady stream of students. Some are attracted by the opportunity to do their final clinical stage abroad. Two students have completed a community stage in Peru and three in Belize, all under the guidance of Professor Omaima Mansi. Melanie Archambault and Cheryl Arlegui presented their experiences in Peru at International Night and we are looking forward to hearing about the Belize experience from Christine Jachner, Amina Bouayad and Joumana Fawaz at the International Committee’s Brown Bag lunch. Their informal e-mails captured a sense of their personal enrichment as well as their enjoyment of the experience and their camaraderie.

Most BN students are completing the program part-time since many need to support themselves and manage other responsibilities while studying. The scholarships and bursaries that are available have been very much appreciated by the recipients. To date, annual Ordre des infirmiers et infirmières du Québec post-RN bursaries, valued at $3,000 to $5,000, have been granted to Nathalie Basile, Christine Jachner, Carol Ann Lee and Stéphanie Leroux. Alumnae awards ranging from $500 to $1,000 have been granted to others, including Melanie Archambault, Cheryl Arlegui and Grace Javier (Alumnae Association of the Montreal General Hospital), Nathalie Basile and Nancy Lussier (Women’s General, Reddy Memorial and A. W. Lindsay awards) and Christine Jachner (School of Nursing alumnae awards). Recently, Evangelia “Angie” Spiratos was granted a $2,000 Maimonides Foundation Nursing Scholarship.

In September 2004 McGill will welcome the first cohort of students into the new Integrated Nursing Program. This five-year competency-based program marks a new direction in nursing education in Quebec that is more in line with the rest of the
country. Along with the province’s other universities, McGill formed a consortium with a particular group of colleges (in our case, Dawson, John Abbott, Vanier and Heritage colleges) to integrate the university and college curricula and reduce the time needed to obtain a bachelor’s degree from six years to five. Students complete the first three years of the new program in college and the final two at McGill. Entry of these students will substantially expand the BN program. Graduates will have greater career and geographic mobility, the competencies to work in the community or in hospitals, and the foundation for graduate studies.

Finally, two years ago the School and its hospital partners in the McGill Network (the MUHC, the Sir Mortimer B. Davis–Jewish General Hospital, St. Mary’s Hospital and the Lakeshore General Hospital) designed a 15-credit micro-program in Emergency nursing to meet the educational needs of nurses who want to develop their knowledge and skills in that field. This initiative was the result of recommendations following a provincial forum on Emergency. Course development and delivery have been the result of a wonderful spirit of collaboration, flexibility and commitment on the part of all the partners. The course teachers include McGill faculty members and recognized leaders in the domain of Emergency. The first cohort completed the requirements in April 2004. They have been persistent, patient and enthusiastic.

Marcia Beaulieu
Assistant Director, BN Program

Bachelor of Science (Nursing) Program

The Bachelor of Science (Nursing) program has undergone both minor and major revisions since it was established in 1957. The class of 2002 was the first to graduate following our most recent major revision. Therefore, we would like to update readers on some of the many changes that have been implemented in our current curriculum.

The first year of the three-year program was developed to ensure a solid base in “health,” the central component of the McGill Model of Nursing. The theme of first year is “healthy individuals and families across the life span.” During the fall, winter and summer sessions, students gain a solid grasp of biological, family, social and psychological processes and indicators of health across the life span. As well, they gain an understanding of the important role that nurses play in supporting health in all age groups.

Nursing theory courses such as Development Across the Life Span, Health and Physical Assessment and Families and Health Behaviour are given in tandem with allied courses in Biology, Physiology and Social Psychology. They also provide students with foundational knowledge in all aspects of health. The McGill Model of Nursing course was developed specifically to educate students in the history and application of this nursing philosophy. The course Therapeutic Relationships introduces students to therapeutic and collaborative relationships and processes. For example, students are paired with people in the community during this fall semester course so that they can develop their skills from the beginning of their studies. This feature has received much positive feedback from students. Two first-year clinical courses, Nursing in Elderly Families and Nursing in Young Families, give students an opportunity to integrate knowledge as well as develop their interpersonal and clinical assessment/reasoning skills.

As of next year, Biology 200 and 201 (familiar courses to many of you!) will be replaced with Biology for Illness and Therapy. This new course will be developed with input from the Nursing, Biology and Pharmacology departments. While the course Research in Nursing has been given in third year, as of September 2004 it will be offered as part of the first-year program. This change has been made to ensure that students learn to critique and incorporate evidence into their nursing approach from the beginning.

With a solid “health” base and an emerging “nursing” base, the theme in second year is “stress and coping in illness.” The nursing theory courses Acute Stress and Coping, Illness Management 1 and 2, Chronic Illness and Palliative Care and Symptom Management, offered in conjunction with the allied Science courses Human Disease, Microbiology, Drug Action and Drugs and Disease, provide the basis for clinical studies in the courses Nursing in Illness 1, 2 and 3. These clinical courses provide students with many learning opportunities within the McGill Network of teaching hospitals. It is in second year that students have their first experiences in areas such as surgery, medicine, pediatrics, psychiatry and critical care.

The theme in third year is “social resources and primary care.” The courses Primary Health Care and Resources in Special Populations, as well as the clinical courses Community Nursing 1 and 2, help students develop theoretical and clinical knowledge and
Master’s Program

The growth of knowledge and the development of new treatment alternatives have resulted in increasing demand for university graduates in the McGill Network of hospitals to assume advanced practice roles as Clinical Nurse Specialists. Recent developments in Quebec have also led to the introduction of a new and expanded role for advanced practice nurses as Nurse Practitioners in selected specialty areas.

In order to meet these demands and to offer new study options to graduates who are considering master’s studies, the faculty has just completed a review of its programs and course offerings. This revision is intended to expand educational options within the program, offering students the possibility of specializing in a clinical area or tailoring their program of study to meet their personal career goals. It envisions four areas of specialization that reflect demand as well as available expertise in the McGill nursing network – family health, cancer care, neuroscience nursing and critical care. It also includes the possibility of tailoring a program for students with interests in other non-clinical areas.

The revisions are now under university review.

The program will now offer two streams of study – a clinical stream that prepares students for either a Clinical Nurse Specialist or a Nurse Practitioner role, and an adjunct stream in which students can tailor their program of study in such areas as administration or international health. The program content has been restructured as a platform of required courses in nursing followed by a set of complementary graduate-level courses in nursing or in other departments. The required courses are based on an approach to nursing that includes the central elements of the McGill Model of Nursing – health, family, learning, strengths and collaborative practice. They will also provide students with the research skills necessary to build nursing knowledge and to develop an evidence-based approach to practice. The complementary courses include advanced-level nursing courses dealing with disease presentation and diagnosis, as well as disease and illness management for patients and their families. Students will also be able to choose their complementary courses from other departments as they develop their program of study through the adjunct stream.

The program finishes with what is likely its most popular course. The five-week Clinical Internship is an intense course that provides clinical concentration in an area of particular interest to the student. The attractive component of this course is that students can opt for an international placement. To date, students have gone to such places as Australia, France, Senegal, Venezuela and Belize. Some have opted for a Canadian placement such as Vancouver, Toronto, Val d’Or, Nunavut or Nunavik. There has been much positive feedback from graduates. They feel the course helps students to “pull it all together” and “develop our confidence as beginning practitioners.”

We are enjoying an increase in enrolment, with approximately 60 students in each year of the program. This increase also means more challenges in meeting the clinical placement requirements and wishes of our students. If your clinical setting – local or abroad – is in a position to provide learning opportunities for students, please give us a call.

The Curriculum Council, with faculty, student and agency representation, meets regularly to monitor and modify the curriculum in accordance with feedback from graduates and employers. We hope that this “work in progress” continues to provide the base for a long and enjoyable nursing career.

Madeleine Buck
Assistant Director, BScN Program
Students interested in a research or academic career can develop a project in their first year and move into PhD 2 studies upon completion of their first year in master’s studies.

The implementation of these changes will involve faculty members at the School of Nursing as well as those within the clinical areas. The School shall be calling upon expertise from a variety of sources as it integrates new approaches to teaching and learning in the new program. This promises to be an exciting time of change and development.

We invite readers to visit our Web site, www.nursing.mcgill.ca, to learn more about the exciting new changes to our programs.

Hélène Ezer
Assistant Director, Master’s Program

PhD Program

The PhD program is developing well following two initiatives over the past two years. We currently have 20 students in the program, two of whom are close to completion. In the past year, five have successfully completed their comprehensive examinations.

Our students have done well in competing for external funding. Award recipients and their granting organizations are as follows: Marilyn Aita, Canadian Institutes of Health Research/Canadian Nurses Foundation/Toronto Hospital for Sick Children Foundation and Ordre des Infirmiers et Infirmières du Québec (in addition, Aita turned down an award from the Montreal Children’s Research Institute); Janet Bryanton, Ruby Blois Fellowship in Maternal/Child Health; Lisa Keeping, Heart and Stroke Foundation; Margot Latimer, Pain in Child Health Training Program (CIHR); Dianne McCormack, McGill Majors; Maryse Pelletier, Kidney Foundation; Marie-Claire Richer, Fonds de la Recherche en Santé du Québec; Sonia Semenic, National Health Research Development Program; and Erna Snelgrove-Clarke, Nova Scotia Health Research Fund.

Two new students, Sylvie Lambert and Sylvie Dubois, received recruitment fellowships from the McGill Faculty of Medicine, and Sylvie Lambert has since received a CIHR Fellowship. Congratulations to all.

One initiative, Formation et expertise en recherche en administration des services infirmiers (FERASI), is specifically for students who wish to pursue a research career in nursing services. This program is particularly attractive because it includes a competitive fellowship of $50,000 a year for four years, with funding coming from the Canadian Health Services Research Foundation and its partners – two of which are the MUHC and the Douglas Hospital. Strangely, in the past year there were no applications for the FERASI program from within McGill agencies, and if this trend continues McGill will lose its places entirely. The position that would have gone to McGill went to a student from the Université de Montréal. Anyone with a master’s degree in nursing or a related field who is interested in doing a PhD in nursing services research should contact the School of Nursing.

The flexible format initiative allows students, particularly those from Atlantic Canada, to take summer courses and to collect data closer to home. While there are drawbacks to studying for a PhD from a distance, for some students it is the only option, and usually creative ways are found to meet their needs. Three courses were offered last summer, one (Theory Development) at McGill and two (Research Design and Research Measurement) at Dalhousie University in Halifax. Four students took all three courses and two students took two.

In June 2004 I ended my term as PhD Program Director. Margaret Purden will be taking over in this role and we are sure to see great program developments under her directorship.

C. Celeste Johnston
PhD Program Director, 1996–2004
International Activities Committee 2001–02

The mandate of this committee is to encourage international linkage as a means of enhancing the academic programs of the School of Nursing. In 2001–02 the members were Christina Clausen, Susan French, Anita Gagnon (Chair), Catherine Gagnon, Anne Gilchrist and Jodi Tuck, and the Committee reviewed potential formal links and student placements in Bermuda, Chili, Haiti, Jordan, India and China.

One of the Committee’s student representatives, Jodi Tuck, was a key organizer of a successful conference, “Health in Populations in Conflict,” held in March 2002 and sponsored by the Osler Medical Aid Foundation.

Another stimulating event in 2002 was “Health Knows No Boundaries,” when School of Nursing students and faculty were invited to an international evening of food and presentations on Friday, March 22, in the Wendy Patrick Room. The speakers and topics were as follows: Catherine Anne Miller, “The Process of Finding International Placements”; Andrea Van Hulst, “Working in Peru: Teaching and Experiences With Children”; Christina Clausen, “Community Health and Development in Mexico: A Student’s Perspective”; Pikka Lam, “Working as a Nursing Student in a Clinic in Kenya”; Erik DeAgostinos, “Nursing Abroad After Graduation: Switzerland, Australia and the US”; and Jodi Tuck, “How to Get Involved With International Health at McGill.”

A question-and-answer session followed and there were tables stocked with pamphlets and other information. Hats off to Catherine, Christina and Jodi for organizing an enjoyable and informative evening.

The School of Nursing continues in its efforts to forge international linkages. Currently, we are exploring exchange opportunities in China and Japan. For more information on these developments, refer to the Director’s letter on page 1.

Anita Gagnon
Chair, International Activities Committee

Research 2003–04

In collaboration with the nursing faculty at the Université de Montréal, the McGill School of Nursing received funding in April 2003 from the Fonds de Recherche en Santé du Québec (FRSQ), the Newton Foundation and the Ministère de la Santé et des Services sociaux du Québec to develop a proposal for four years of infrastructure support for research on nursing interventions with clinical outcomes. The proposal was submitted on December 1, 2003, and the site visit took place on January 26, 2004.

If we are successful, more than $2.14 million will be provided to both universities, over four years, to support this type of research. It will include graduate student bursaries and funding for pilot projects, travel and conferences, statistical consultation, the services of an information specialist (librarian) and secretarial support. We believe that the synergy created by bringing the academic nursing units of the two universities together will lead to innovative and effective nursing interventions.

Our overarching conceptualization is “transitions in health.” The three major axes for the transitions we have selected are (1) problematic developmental transitions that affect health, (2) health crises, and (3) transitions across health-care delivery systems. Each of these axes will take into account populations (vulnerable populations, specific diagnostic groups and natural caregivers) and modalities (innovative technologies, direct nurse-patient interactions and group approaches).

The McGill group of nursing researchers (Antonia Arnaert, Robin Cohen, Hélène Ezer, Anita Gagnon, Celeste Johnston, Carmen Loiselle, Margaret Purden, Janet Rennick and Judith Ritchie) have begun meeting with the Université de Montréal nursing researchers to plan specific projects.

There are now four Canadian Institutes of Health Research (CIHR) Strategic Training Grants whose Principal Investigators are at the McGill School of Nursing: cardiovascular care (Margaret Purden), palliative care (Robin Cohen), psychosocial oncology (Carmen Loiselle) (all new this year) and pain in child health (Celeste Johnston). In the spring of 2003 the FRSQ announced the awarding of a senior career award to Anita Gagnon and a junior career award to Carmen Loiselle. In the summer of 2003 both Celeste Johnston as principal investigator and Carmen Loiselle as co-investigator were awarded new CIHR operating grants.

C. Celeste Johnston
Associate Director, Research
Learning Resources

The development of learning resources for students continues to be a focus in the School of Nursing. Thanks to the generosity of the Newton Foundation, over $50,000 worth of learning materials have been added to our learning laboratory this past year. Of special interest is the CathSim Intravenous Training System. With this computer-based virtual system for learning to insert intravenous catheters, students will be able to “feel” the stretching of the skin and resistance to the needlestick that one experiences in a real situation. If insertion is successful, one feels the “pop” of the vein. If it is not successful—well, something has been learned! Other new materials funded by the Newton Foundation include several health-assessment kits, infant and adult mannequins, a pregnancy model, infant weight scales, wall-mounted blood pressure machines, heart and spinal cord models, injection pads, commodes and intravenous poles. The McGill Associates have also been generous, funding our skeleton, Myelo Wilson (as named by students Rena Bhasin and Grace Javier), a surgical mannequin and wound-care models.

We were very fortunate to have Christina Clausen and other master’s students as our Learning Laboratory Demonstrators. They played a key role in helping students to learn technical skills in a supportive and controlled environment. Christina’s creativity in designing case studies has helped students to develop not only the psychomotor dexterity needed to perform tasks but an appreciation of the thinking that is required in performing them.

We are pleased that a state-of-the art learning laboratory will be a focus of the upcoming McGill Capital Campaign. A shared space with our partners in the Faculty of Medicine will offer so much to all of our students. Ideas include creating simulated hospital, clinic and home environments so as to address the changing geography of health care.

Madeleine Buck
Chair, Learning Resources Committee

CJNR

(Canadian Journal of Nursing Research)

CJNR continues to occupy a significant place in the School of Nursing. It also plays an important role as Canada’s oldest peer-reviewed nursing research journal and one of the longest-surviving academic journals to have an uninterrupted publishing history at the same university. The majority of journals are published by large, for-profit publishing houses. There has been considerable debate and concern within the academic community about who controls and who profits from the work of academics. In response, there is a growing movement to bring academic journals back to the university.

We run a tight ship, keeping costs to a minimum while producing a high-quality journal. In fact, many marvel at our ability to survive, let alone thrive. We are indebted to the School of Nursing for its continued support and to members of the academic community who give so generously of their time and expertise. We have also been fortunate to receive continued support in the form of a grant from the Social Sciences and Humanities Research Council through Aid to Learned Journals. In renewing our grant with full funding, the SSHRC has recognized that we are a solid, well-seasoned, mature journal. (We are grateful that these remarks were directed at the Journal itself and not the editors!)

The year 2003 marked Laurie Gottlieb’s 10th anniversary as Editor, which coincided with the inauguration of the electronic version of CJNR. The idea of bringing out on e-version of the Journal had been considered five years earlier but after doing some investigating at that time we decided to wait. The technology was new and there were too many questions that needed to be resolved by the academic community before we could take this initiative. But even though we decided to wait, we prepared for the inevitable.

When Richard and Satoko Ingram, through their foundation, the Newton Foundation, made a generous donation to launch an e-version of the Journal, we were ready. We contracted with Ingenta, a leader in electronic publishing, to publish the electronic version. We changed our production schedule and published four issues within six months in order to bring our publishing schedule more in line with that of other journals. We also gave the Journal an updated look by redesigning the cover and layout, and decided that it would be known as CJNR (instead of Canadian Journal of Nursing Research) to attract a broader readership.

During this time we also received a

Sean Clarke, Associate Editor; Laurie Gottlieb, Editor; Morgan Child, Assistant Managing Editor; and Joanna Toti, Managing Editor
grant from the Tomlinson Foundation administered by McGill University to digitize all 35 volumes of the Journal.

CJNR publishes four issues a year, each featuring a focus topic as well as non-focus articles. We are now coming to the end of our second five-year cycle of focus topics. Each focus issue has a guest editor, an expert in the field, with whom we work very closely. During the past three years the focus topics have been as follows:

Coping/Adaptation (Guest Editor, Judith Ritchie, MUHC-McGill University); Ethics and Values (Franco Carnevale, MUHC-McGill University); Decision-Making (Franco Carnevale); Completed Student Research Projects (Laurie Gottlieb and Anita Gagnon); Addiction and Dependence (Pamela Ratner, University of British Columbia); Culture and Gender (Judy Mill, University of Alberta, and Nancy Edwards, University of Ottawa); Nursing Care Effectiveness (Sandra LeFort, Memorial University); Gerontology (Carol McWilliam, University of Western Ontario); and Health Promotion (Marilyn Ford-Gilboe, University of Western Ontario). These topics offer a flavour of the breadth and type of research in which nurses are engaged. The nursing community benefits greatly from the expertise and time so generously given by these scholars.

During this past year there have been a number of internal changes. Anita Gagnon decided that she could no longer devote the amount of time required of the Associate Editor, given her many other responsibilities. CJNR has benefited from Anita’s tremendous talents, insights and scholarship. She worked tirelessly to bring CJNR to a higher standard of scholarship. She was involved in all aspects of the Journal, and took responsibility for overhauling the reviewer process, which is critical for maintaining research standards and integrity.

We were also saddened by the departure of Helen Chen, our librarian and information-transfer specialist. She was instrumental in developing the CJNR Web site and bringing the Journal online. Helen has moved to the MUHC as its nursing research librarian.

In keeping with our need for a more international presence, we have appointed three eminently qualified nurse scholars to serve as editors at large: Sean Clarke, University of Pennsylvania (United States); Sioban Nelson, University of Melbourne (Australia and Asia); and Kate Seers, Royal College of Nursing Institute (United Kingdom and Europe).

In August we had our first meeting, here at McGill, and spent two stimulating and fruitful days charting CJNR’s new direction. Our new team will be taking the Journal in exciting directions during the next five years. Stay tuned.

Laurie N. Gottlieb Editor
Joanna Toti Managing Editor
Joan Gilchrist Nursing Explorations

2001

The focus of the 2001 Nursing Explorations conference was “Nurses’ Work Environment and Patient Outcomes.” The dynamic keynote speaker was Sean Clarke, a graduate of the McGill School of Nursing master’s and PhD programs who is currently at the University of Pennsylvania. Dr. Clarke presented compelling work from an international study on the effect of nurses’ work environment on patient outcomes, including mortality.

Margot Latimer, a PhD student from the IWK Health Sciences Centre in Halifax, discussed a study comparing parent satisfaction in two pediatric units with very different work environments. Laurette Dubé from the McGill Faculty of Management, who also holds a health sciences career award, spoke about the impact that nurses can have on the psychological state of patients waiting in the emergency department. Ann Marie Adams, an architect who also holds a career award in the health sciences, gave a visually enhanced presentation on architectural changes in hospitals and their effect on interactions between nurses and patients. The final speaker, Patricia Petryshen, Vice-President, Nursing, at St. Michael’s Hospital in Toronto, spoke on the role that senior management can play in enhancing nurses’ work environment. The day concluded with questions and answers, with Dr. Dubé being replaced by Marilyn Kaplow, a physiotherapist with an MBA who is Director of Quality Assurance at the McGill University Health Centre. The panel was chaired by Wendy Nicklin, Vice-President, Nursing, at the Ottawa Hospital and at that time Director of the Canadian Council on Health Agency Accreditation. Over 175 nurses attended the event and feedback was positive.

2002

The 2002 conference was chaired by Celeste Johnston and its theme was “Creating Conditions for Excellence.” The keynote speaker, Judith Shamian, spoke on the topic of “The Future of Nursing Leadership.” This presentation was followed by a panel discussion on the topic of “Leaders: Born or Developed?” Panelists included the keynote speaker and faculty and student representatives: Judith Ritchie, Denise Malo and Marie-Claire Richer. In the afternoon, Laurie Gottlieb spoke on “Exemplary Units of Professionalism.” Other presentations included “Navigating Through the Storm” by Sophie Baillargeon, “Not by the Book” by Barbara Izzard, “Quality Education – the Key to Quality Care” by Janet MacDonald and “Nursing Under Construction: Renovating Our Nursing Units to Improve Patient Care” by Geraldine Matthews. The day closed with a presentation by Denise Malo, “Developing Environments That Promote Excellence.”

2003

Issues related to nurses working collaboratively with patients and their families was the theme of the 2003 Nursing Explorations, held on October 17.

The day began with a dynamic presentation by Lorraine Wright, Professor Emeritus at the University of Calgary, who is known internationally for her work on the development of family nursing. Dr. Wright outlined the types of beliefs that can hamper nurses’ ability to collaborate with families. Then, Donald Taylor, Professor of Psychology at McGill, presented a thought-provoking examination of how patient stereotyping of nurses and vice versa can hinder the development of nurse-patient partnerships.

The afternoon program began with a fascinating panel discussion organized and moderated by Professor Catherine Gros. Three women, Hillary Griffiths, Maria Luisa Hagemeister and Gwen Vineberg, shared their experiences as patients in collaborative relationships with nurses. A group of nurses recognized for their expertise in collaboration then shared their thoughts about the experiences of the three women. These were Jane Chambers-Evans, Joann Creager, Heather Hart, Diane Lowden and Gillian Taylor (all from the MUHC), Lucia Fabijan (Sir Mortimer B. Davis–Jewish General Hospital) and Lia Sanzone (CLSC Métro). The panel discussion suggested that the collaborative patient-nurse relationships had been possible because the nurses respected, accepted and trusted the women and, most importantly, listened to them. The final speaker of the day was Frank Carnevale, Head Nurse at the MUHC and Associate Professor at the McGill School of Nursing. Dr. Carnevale observed that when nurses and patients share power, conflict and tension naturally arise but that such conflict can be resolved effectively.

The conference was a tremendous success due to the hard work and creativity of the organizing committee: Carol Common, Laurie Gottlieb (Co-chair) and Lucy Wardell (MUHC), Cindy Dalton (SMBD–Jewish General Hospital), and students Marilyn Aita, Sylvie Lambert, Raleen Murphy and Marie-Claire Richer.

The School of Nursing will not be holding a Nursing Explorations conference in 2004 or 2005. In 2005, attention will be focused on planning for the Canadian Association of Schools of Nursing national conference, to be co-hosted by McGill and the Université de Montréal in November.

Celeste Johnson
Chair, 2001 and 2002
Laurie Gottlieb and Nancy Feeley
Co-chairs, 2003
McGill University Skills Centre

Consider the following scenarios:

A second-year BScN student acknowledges that she has difficulty communicating with young children, let alone conducting a complete physical assessment. She is scheduled to start her clinical work at the Montreal Children’s Hospital and is really worried. She calls the McGill University Skills Centre to reserve an interview room with physical assessment equipment. She asks the Simulated Patient Coordinator to recruit two children for her. She videotapes her physical assessment of the five-year-old and her interview with the eight-year-old. She later critiques herself and gets feedback from her teacher and classmates. She starts her clinical work with confidence and skill.

***

The coordinator of the Nursing in Young Families course would like her students to meet families who are learning to incorporate a new member into their unit. She calls the Patient Coordinator, who recruits four families from an obstetrical unit. These families agree to meet with the students and share their experiences. The students conduct a physical assessment of the mothers and neonates, observe two mothers as they feed their babies and discuss the nutritional intake of both mother and child, and hear about how the various members of the family are dealing with the arrival of a new baby. The families leave with remuneration for their contribution and the teacher feels that the course objectives have been met.

***

A BN student who has been working in a hospital setting on a cardiac surgery unit would like to develop his health promotion skills in this population and to test a group intervention strategy that he is working on in his Community Nursing course. He organizes a small group and brings them to the conference room of the McGill University Skills Centre. He tests different group learning approaches. The session proceeds quite well but his classmates in the adjacent viewing room note that he does not pick up on some important group dynamics issues. He uses their feedback to develop his next session.

***

A master’s student and a nurse in the Emergency Room micro-program are focusing on critical care nursing issues and use the Human Patient Simulator to simulate complex medical/surgical emergencies. Another master’s student goes to the Centre to interview a “family having difficulty dealing with chronic illness issues,” following a request made to the Simulated Patient Coordinator. The student will submit a recording of the interview for a grade.

***

“The present basement lab will be replaced by a state-of-the-art 1,430-square-metre centre (bigger than an arena, and air-conditioned!”

When the McGill University Skills Centre opens in September 2005, these scenarios, and many more, will be part of a dream come true for faculty and students in the School of Nursing. The present Wilson Hall basement lab (about the size of an open-concept living/dining room, with no temperature regulation) will be replaced by a state-of-the-art 1,430-square-metre centre (bigger than an arena, and air-conditioned!) that will be housed in the former Conference Centre at Complexe du Parc (La Cité).

This project is a joint effort within the Faculty of Medicine and includes Medicine, Nursing, and Physical and Occupational Therapy. What was originally conceived of as a surgical skills centre evolved to address a broader mission that will include basic clinical skills (i.e., communication, physical examination, invasive procedures) and be of benefit to more educational programs within the Faculty of Medicine. The Centre has received funding for infrastructure costs. Arnold Steinberg, a member of the Faculty of Medicine Advisory Board, is seeking additional funding for the project.

The rationale for the Centre is that educational programs in the health professions must take into account the many different “ways of learning” that students bring to the university. The project is also based on the premise that the university must incorporate and contribute to “best practice” teaching and learning approaches, as well as acknowledge that “practising” invasive techniques on patients when human simulators exist pose ethical dilemmas. In addition, a wide range of medical informatics and learning technologies have become available to support nurses as they advance their skills in such areas as invasive techniques, physical assessment and clinical intervention.

The Centre will have wet and dry labs (two labs accommodating up to 36 students at a time) for surgical skills training and for training in a range of invasive techniques; a Clinical Education Resource Centre comprising 10 clinical rooms of 35 square metres each, with one-way mirrors, audiovisual and Internet access, corridors for teacher viewing and a viewing room for students/classmates; three human patient simulation areas with independent control rooms and debriefing rooms, all set up for team training; and conference rooms with teleconferencing/telemedicine potential. Especially interesting is the Simulated Patient Program, which will enable students to practise and develop skills with actors who have been trained to portray patients with particular health problems.

We look forward to the grand opening.

Madeleine Buck
Member, McGill University Skills Centre Steering Committee
Kudos to Students

Christina Clausen and Rebecca Earle for each winning a Marskell Group Nursing Excellence Award in her graduating year. Christina was a recipient in 2002 and Rebecca was a co-recipient in 2003.

Rosemary Herbert (PhD student) for winning a CTRI student award.

Virginia Lee (PhD student) for winning the Best Student Paper award for part of her dissertation at the Canadian Association for Psycho-oncology annual meeting, held in Toronto.

Anita Mehta (PhD student) for being awarded a Studentship by the National Cancer Institute of Canada.


Kudos to Faculty

Lily Chin-Peuckert, a nurse in the Urology Department at the MUHC – MCH site and a recent Eureka Fellow, for winning the prize for best clinical research at a meeting of the American Academy of Pediatrics, Urology Section, held in New Orleans (November 2003). Her paper has been accepted for publication in the Journal of Urology.

Celeste Johnston for winning the Prix Florence for Research and a Mayday Fellowship for Pain and Society (2004).

Diane Lowden for being nominated by the School of Nursing to the Faculty of Medicine Honours List for Education Excellence (2003–04).

Lynne McVey for having her nursing achievements recognized at the 69th Annual Meeting of the Sir Mortimer B. Davis–Jewish General Hospital (October 29, 2003).


Nursing: Leadership, Innovation, Excellence

Department of Nursing, Sir Mortimer B. Davis–Jewish General Hospital

As the care requirements of hospitalized patients grow more complex, the need for well-educated, qualified, highly skilled, motivated and dedicated nursing staff becomes ever more critical.

The Department of Nursing at the Sir Mortimer B. Davis–Jewish General Hospital continues to meet this challenge by offering nurses an environment in which they are considered full partners in health care. Nurses’ voice in health-care decision-making is considered essential in producing positive health outcomes.

The exceptional quality of care provided by nurses at all levels and in all areas of the hospital was recognized this past year by the Quebec Order of Nurses (Ordre des infirmiers et infirmières du Québec – OIQ), which conducted a Professional Inspection of the Department of Nursing in March 2003.

In their report, the OIQ surveyors noted that patients and their families expressed a high level of satisfaction with the quality of nursing care in the hospital. The OIQ was particularly impressed with the following aspects of nursing practice and leadership:

- organization and utilization of nursing resources
- clinical and administrative support provided to staff nurses
- quality and availability of pertinent, up-to-date documentation
- commitment to continuous quality improvement, where problems are identified and solutions implemented and evaluated, resulting in improved care
- individualized care tailored to the specific needs of each patient and family
- active participation of patients and their families in care plans
• identification of patients at risk (e.g., for falls, suicide, aggression)
• excellent infection prevention and control plan
• prevention and treatment of wounds
• comprehensive policy governing the limited use of restraints

The Department of Nursing has built and nurtured an exciting and supportive academic environment in which nurses are offered not just a job but a challenging career. Depending on their interests, nurses can tailor their careers to combine clinical practice with teaching, research or administration.

As a result of this approach, despite a worldwide nursing shortage that is becoming more acute each year, the Jewish General Hospital has an excellent record on recruitment and retention.

We believe that the education of nurses – from novice to expert – is a priority. As a “faculty without walls,” the Department of Nursing provides educational opportunities directly where nurses work, offering innovative programs that increase skills and knowledge. We have developed an innovative Level 1 critical care course that is part of the basic orientation for new nurses and a Level 2 course for nurses in high-care areas and intensive care. In recognizing the high calibre of training provided by this course, the Regional Council agreed to provide funding to further develop the program’s content. Other educational initiatives this past year include the development, in conjunction with the School of Nursing, of a university credit course in emergency nursing. This year has seen increased involvement with master’s and doctoral students from the School of Nursing. In addition, nine nurses achieved the Canadian Nurses’ Association Specialty Certification in gerontology, oncology, psychiatry/mental health and critical care nursing.

This focus on continuing education is our cornerstone strategy for nursing recruitment and retention. Last year, over 300 students acquired clinical and laboratory experience at the Jewish General Hospital. Students are nurtured throughout their training, and the most promising among them are offered positions at the hospital.

Nurses at the Jewish General Hospital know that when they voice their concerns they will be heard. Their opinions and recommendations are respected, as they are equal partners in the provision of quality care. In cooperation with the Department of Professional Services, the Department of Nursing has worked diligently to establish a Partnered Management structure between nurses and physicians with the specialized input of allied health professionals. This innovative administrative model is based on the recognition that when physicians and nurses communicate well and share in decision-making, the outcome is much more positive for patients and their families. Many of the hospital’s Continuous Quality Improvement teams are co-chaired by a nurse and a physician, with the participation of staff from a variety of disciplines.

Like our McGill partner, the MUHC, the Jewish General Hospital’s Department of Nursing has earned a reputation for excellence in patient care, nursing education, nursing research and administration.

“The Jewish General Hospital’s Department of Nursing has earned a reputation for excellence in patient care, nursing education, nursing research and administration.”

The Centre for Nursing Research is committed to generating timely and relevant knowledge that will contribute to the advancement of nursing practice. It also serves as a clinical laboratory for a large number of graduate students and is an invaluable resource for staff nurses.

Currently, three nurse scientists, Drs. Nancy Feeley, Carmen Loiselle and Margaret Purden, are involved in 15 research projects, conducted in collaboration with researchers from across Canada. These projects include studies in oncology, cardiovascular nursing, adjustment to illness and nursing interventions to enhance the quality of life of premature infants and children with chronic illness.

I am pleased to report that the Jewish General Hospital Department of Nursing is successfully weathering the considerable storms that surround us daily, namely the increased acuity and complexity of patient care, the recruitment and retention challenge, and the chilly economic winds that limit the budgets we need to provide the quality and quantity of care that patients deserve. The synergy that we enjoy with the School of Nursing is the magic ingredient, the envy of nursing departments across Canada and beyond.

Mona Kravitz
Associate Executive Director (Nursing), Sir Mortimer B. Davis–Jewish General Hospital; Associate Professor, School of Nursing, McGill University
McGill Network Affiliates
Director of Nursing Committee

Who are we?
Nurse Leaders from various organizations – the McGill School of Nursing, the Association des hôpitaux du Québec and all health-care institutions linked to the McGill School of Nursing.

What is our goal?
Our goal is, through unified strategies, to support a practice environment in which patient-care decisions are driven by critical thinking and evidence-based practice according to the McGill Model of Nursing.

How do we do this?
Through regular meetings, the group shares issues from their respective institutions in order to develop strategies, which are related to but not limited to the following:

- advanced practice nursing
- nursing research and its application in improving performance and clinical practice
- nursing governance – that is, Law 25, Program Management
- Nursing Council functions
- policy-making at the local and provincial level, including a variety of associations and the Ordre des infirmiers et infirmières du Québec
- legal and educational issues related to nursing – for example, Bill 90
- human resource planning, retention and recruitment
- care coordination
- the role of nursing within an interdisciplinary model

With the collaboration of other nursing decision-makers, this leadership group diffuses the strategies to others at the local and provincial levels in order to strengthen the role of nursing.

What have we accomplished?
- an environment conducive to open and honest communication
- solidarity regarding maintaining a nursing professional practice model
- consistency in human resource practices – for example, non-use of agency nurses in acute care
- supporting a continuum of care, from the community to acute care to long-term care

How to contact us
If you have any issues or wish to implement changes across the McGill Network, speak to your director of nursing or call Elaine McAlister, Chair, McGill Network.

Elaine McAlister, BScN, MScA
Director of Nursing,
Mount Sinai Hospital
(514 369-5658)

Sharon Brissette,
BScN, MSc(N), DIA
Director of Nursing and Patient Services,
Shriners Hospital for Children
(514 282-6957)

Nursing Undergraduate Society
2001–02
In 2001–02 the Nursing Undergraduate Society made the leap into the 21st century with a new e-mail newsletter, an updated constitution and increased student participation in extracurricular nursing activities.

Our newsletter, NUS News, is sent to all undergraduates at the School of Nursing following scheduled Council meetings, to keep students informed about campus events and also to let them know that there are other students they can contact for friendship, assistance or guidance.

We invite all nurses in the community to submit any news that might be of interest to undergraduate students.

The Canadian Nursing Students’ Association conference, held in 2002 in Victoria, British Columbia, was the scene of much learning, networking and the all-important partying with students from other nursing schools.

As is evident from the distant site of the conference, the students needed a great deal of money to venture out and expand their nursing horizons. In order to raise funds, the NUS held a careers fair, the first of its kind for McGill, in November 2001. This was a tremendous success, with participation from hospitals in Ontario and Quebec and students from all over Montreal.

Other interesting events included a trip to a sugar shack and the initiation of the all-important partying with students from other nursing schools.

2002–03
In 2002–03 NUS activities began in the summer months, with the president attending the School of Nursing retreat and, in August, members of the executive taking time out of their busy schedules to execute a much-needed revamping of the NUS office, located in the basement of Wilson Hall. This included a fresh coat of paint on the walls and new couches and desks – the result being an office in which we can comfortably host meetings and receive drop-in visitors.

The team was also hard at work planning Nursing Frosh for new students. Members participated in a student panel on nursing orientation, answering questions and distributing NUS promotional materials in the hope of sparking interest early on in students’ academic careers.

Early in the school year we organized a team to participate in the “Ça Marche” walk-a-thon for HIV/AIDS, and students raised money for the Farha Foundation via a bake sale and the gathering of personal pledges. The team carried a big McGill Nursing banner in the walk-a-thon in order to show solidarity with the community.

A similar effort raised money for the “Walk for the Cure” for breast cancer. The proceeds went to support our sister association, the Graduate Nursing Colleagueship, which had assembled a team for the event.
Also in 2002–03, the NUS purchased a variety of McGill Nursing items such as penlights, mugs, key chains, T shirts and scrub pants, then sold the merchandise to students, staff and nurses in various clinical settings to promote pride in the School.

In October we partnered with the Medicine and Dentistry Student Association to organize a Halloween party. This event saw the coming together of future health-care professionals in a social setting. Several members of the NUS also attended the convocation of the 2002 graduating class. They distributed a NUS/McGill School of Nursing mug and penlight to each graduate, along with a word of congratulations.

Throughout the year, the Official and Associate Delegates of the NUS to the CNSA worked hard to raise money for students to attend the 2003 CNSA national conference in Saskatoon. The largest of these efforts was the second annual careers fair, which drew participation from more than 25 institutions and attendance by more than 100 students. Monies raised were used to help 11 undergraduates attend. At the conference, a McGill student ran for the position of National Conference Director on the 2003–04 CNSA Board of Directors. In addition, McGill beat a joint bid by several Toronto-area nursing schools to host the next conference.

2003–04

Throughout the year the NUS collaborated with the Colleagueship to organize several events, including the Spring Speaker Event and an end-of-year banquet.

In 2003–04 a great deal of initiative was put into preparing *The Nursing Student Survival Guide*, which contains useful information for undergraduate students at the School of Nursing. Also, students were subsidized to attend the Nursing Explorations conference, CPR courses were offered, and a joint Career and Placement Services-NUS conference was held to promote various paths to a nursing career.

To promote the NUS amongst undergraduate students and the community at large, the NUS Web site was updated and redesigned, and now includes the very popular Photoalbum, which contains pictures of undergraduate students at various events. The profession of nursing was also promoted, through the sale of McGill Nursing hooded sweatshirts, penlights, mugs, scrubs and T shirts.

The NUS Council kept the students busy with activities such as initiation of first-year students, movie night, Christmas and Halloween outings, attendance at Canadiens hockey games, soccer and volleyball games, a “Nursing Games” trip, a somosa and “Mr. Freeze” sale, and a bake sale.

A joint CNSA/School of Nursing conference for CEGEP nursing students was held to promote the two organizations, and nursing undergraduates were subsidized to attend the CNSA national conference, which took place in Montreal in January 2004 and was attended by more than 300 students from across Canada.

This year the description of each Council position will be updated and, to improve NUS’s relationship with its students, bylaws will be added to the constitution to allow for a U0 representative and BN representatives.

We would love to hear from readers. The NUS e-mail address is nus.nursing@mail.mcgill.ca.

**Megan Angus**  
*President, 2001–02*

**Laurie Barkun**  
*President, 2002–03*

**Sophie Vallée-Smejda**  
*President, 2003–04*

---

**United Arab Emirates: My Experiences**

Many of us dream of visiting another country. We plan our vacations in the hope of seeing new places and learning about other cultures before returning home. We take pictures and buy souvenirs, hoping we will remember those two or three weeks spent abroad for a long time.

In my case, the visit has not lasted just a few weeks and is not to a place a few time zones away. It was more than two years ago now that I decided to follow my dream and settle in a country eight time zones east of Montreal, with very hot summers, pleasant winters, and hospitable and tolerant people. Which country is that? Well, it is the United Arab Emirates, a small country located on the eastern tip of the Arabian Peninsula, bordered by Oman, Saudi Arabia and the Arabian (Persian) Gulf.

However, relocating is not as simple as overcoming jet lag. It is a challenge to adjust to a new culture, workplace, climate, customs and language. I smile when I remember my very first day in the UAE when, on a hot August afternoon, I walked around the city of Abu Dhabi and wondered why all the streets were absolutely deserted (and then worried that I might end up with heat stroke and miss my first day at work). Well, now I know that no one walks around like that when it is 45 degrees outside. I also know that it is absolutely normal for an address to be “the building next to where the Zadco Oil Company used to be.” And if I still can’t find the place, I know how to ask the taxi driver using a few words of his language (Urdu, since most taxi drivers in the UAE are Pakistani).

Speaking of language and nationality, that in itself is a very confusing matter. Of course the local people speak Arabic, but about 80 percent of the inhabitants of the UAE are from other countries, mainly India, Pakistan, other Middle Eastern countries and the Philippines. While English is widely
spoken in Abu Dhabi and Dubai (the two largest cities), I often regret that I know only a few words of Arabic. But then, it is never too late.

Some of these challenges are especially evident at work. Actually, work was the primary reason why I relocated to this country (although of course most of us have a variety of other reasons why we choose to work overseas). I was hired as a Clinical Resource Nurse at the newly opened Shaikh Khalifa Medical Center in Abu Dhabi. I was one of the first CRNs to be hired, and when I arrived I found myself responsible for the educational needs of nurses on all medical and surgical wards (over 100 beds). However, our CRN team has grown since then and now I cover “only” surgery and rehabilitation medicine (70 beds).

The hospital is managed by Interhealth Canada Limited, and earlier this year we succeeded in achieving compliance with the standards of the Canadian Council on Health Services Accreditation. This does not mean, however, that the hospital is staffed only by Canadian professionals. We are a multinational institution, with many nurses from the Philippines, Middle Eastern countries, South Africa, New Zealand, Britain, Sweden and elsewhere.

While there are certain advantages to this diversity, it takes effort to make sure that all care is delivered according to the highest standards and according to the policies and procedures that have been adopted. Some nurses from less developed countries might not be used to intravenous pumps and other modern equipment, while others might find it difficult to go through the day without speaking a single word in their native language.

And then of course there are the challenges directly related to the patients – their culture and religion. All of our patients are “local” (i.e., Emirati) and their lives revolve around the Islamic religion. Therefore it is of utmost importance that nurses and other health-care workers respect the practices associated with their faith and culture. In Arabic, islam means “submission,” and one submits by observing the five pillars of the faith. For example, Muslims are required to pray five times a day while facing in the direction of the Kaaba, the ancient shrine in Mecca. Since the hospital is a real maze and it is easy to get disoriented there, each room has an arrow on the ceiling pointing towards Mecca. During Ramadan, the holy month of fasting, those patients who are stable enough are given the option of fasting (just like all other Muslims) during the day and receiving all their meals and oral medications according to a special schedule between sunset and sunrise. While non-Muslims do not fast, we are required to be discreet and refrain from eating or drinking in public during this time.

The presence of family is very important during illness, so frequently a patient’s family members stay in the hospital for the entire hospitalization. It is common to enter a patient’s room to be greeted by a family member offering a cup of Arabic coffee with cardamon and dates. The language barrier does not deter them from being friendly. I still remember my encounter with a middle-aged woman wearing an abaya (an all-concealing black cloak), headscarf and burka (a small mask covering the nose, cheeks and parts of the mouth), which is typical attire for local women. She was sitting at the bedside of her seriously ill daughter, and as I entered the room she started to show me photographs of her daughter taken before she had fallen ill. I couldn’t understand what she was saying, but she still managed to communicate to me that she found the situation very difficult.

Then there is the wife of a patient who each day knocks on my office door and greets me loudly: “Salaam Alaykum!” (Hello). I at least know enough to say, “Alaykum es-salaam...keifahalik?” (How are you?). There are two other expressions that one quickly learns after relocating to this country. One is “Alhamdulillah” (Thank God), which is what people usually say when asked how they are. The other is “Inshallah” (God willing); this means that nothing in the future will happen without God’s will, no matter how much effort one makes.

How does a non-Muslim live in this country, you might ask. Well, it is quite simple. We shop at Marks & Spencer, go for coffee at Starbucks or for beer at an English pub, shop for pork (which Muslims are forbidden to eat), buy wine in liquor stores and have food delivered from Pizza Hut. We go to malls where one might purchase a raffle ticket for a Mercedes or BMW and where women in miniskirts distribute samples of Body Shop soap. We fly to Europe, Africa or Singapore, as these destinations are only a stone’s throw away, while taking advantage of the extensive duty-free shopping at the Dubai airport (which has been voted the best in the world). When the time comes, we buy a Christmas log at the local La Brioche Café and have turkey just like our families in Canada do.

We go to the beach, drive cars (without having to shovel snow in winter!), and jog on the beautiful Corniche while watching the sun set spectacularly over the ocean and listening to the call to prayer coming from one of the many mosques. While some go to the mosque to pray, I continue with my jog.

Petra Mandysova, BScN ’93
October 29, 2002
Graduate Nursing Colleagueship

Students enrolled in the graduate nursing program at McGill are busy bees, between course work and clinical practice, teaching and research assistantships, conferences and, for some, part-time or full-time work. Despite their hectic schedules, these students make time for their families, friends and School of Nursing social activities.

The greatest achievement of the Colleagueship over the last three years has been the increasing cohesiveness of the graduate students as a group, given their diversity. The Colleagueship would like to thank everyone for making these years memorable and to congratulate all master’s students on their many successes.

The Colleagueship has been busy since the last alumnae newsletter went to press, continuing with old traditions and starting some new ones. Here is a taste of our accomplishments over the last three years.

With an increasing number of direct-entry students at the School, our welcome wine and cheese continues to be a hit, allowing new and returning students, faculty and staff to get to know each other.

In 2001–02 our first-ever intramural sports team, the Crashcarts, joined the McGill Intramural League. This gave our students the chance not only to “get fit” but also to practise their team-building and cheering skills on the floor-hockey and volleyball courts. The popularity of this event led the students in 2002–03 to enter the League again. Also in 2001–02, we participated in the CIBC “Run for the Cure” fundraiser for breast cancer.

The year 2002–03 was an exciting one for the Colleagueship. With the guidance and support of the School of Nursing support staff, the Colleagueship now has an official address and a place to call its own. The Colleagueship received funding from the School in 2002 to update its office space, provide funds for students to attend conferences and throw a School of Nursing banquet. Special thanks to Professor Susan E. French for her open-door policy: taking the time to listen to the students and supporting us in our endeavours has been invaluable.

Members of the Colleagueship have continued to be active and to represent students at meetings of the nursing faculty and the Post-graduate Student Society. Furthermore, in 2002–03 they joined the faculty in brainstorming around potential changes to the master’s program curriculum. Input was gathered from all students in the graduate program and then brought to the meetings for discussion. Without the support and guidance of Professor Anita Gagnon, Chair of the committee, none of this would have been possible.

Spring is always a busy time for the Colleagueship, with the annual “Leap Into Spring” raffle. All proceeds from this fundraiser go to support our Spring Speaker Event, which gives us the opportunity to hear and learn from some wonderful guest speakers such as Rob Calnan, president of the Canadian Nurses Association, who gave us a taste of nursing issues across the country, and Jane Chambers-Evans, a Clinical Nurse Specialist in the Montreal General Hospital ICU, who spoke on nursing and ethics and presented an interdisciplinary model that can be used by nurses when faced with ethical dilemmas. In 2003 students and faculty enjoyed hearing about nursing from a different perspective when André Picard, a journalist for the Globe and Mail, reflected on his book, Critical Care: Canadian Nurses Speak for Change.

In April 2003 the Colleagueship and the Nursing Undergraduate Society jointly organized the first School of Nursing banquet for faculty and students. A committee was formed in January and after months of planning the big night went off without a hitch. The event was held at Thompson House and included a formal dinner, award presentations and sign-over to the new executives of both groups. A new award was also developed by the organizing committee to recognize the contribution of a faculty or staff member to student life. All nursing students were asked to nominate and vote for the person they felt was most worthy of the award. In 2003 there were two recipients, Madeleine Buck (faculty lecturer) and Margie Gabriel (support staff). Madeleine was unable to attend the banquet and was therefore presented with her award during one of her lectures. Kelly Jellem and Rebecca Earle (Colleagueship co-presidents) presented Margie with her award, a beautiful bouquet of flowers and a gift certificate for a day at a spa. This award has been long overdue and we hope it will become a tradition. Also, the strong relationship that was formed between the Colleagueship and the Nursing Undergraduate Society proved that two heads are better than one.

Many graduates of the master’s program have remained in Montreal, giving back to the McGill community in their roles as bedside nurses, Clinical Nurse Specialists, researchers, Nurse Practitioners and teachers. Many others have travelled across Canada or to other parts of the world to share their knowledge and expertise. It is inevitable, however, that wherever their nursing career may take them, School of Nursing alumnae will fondly remember where their journey began.

A major effort was made in 2003–04 to encourage interdisciplinary activities. In March 2004 the Colleagueship participated in organizing the First Annual Interdisciplinary Conference with colleagues in Dietetics, Physical and Occupational Therapy, Social Work, Communication Sciences and Medicine. The event was highly successful and the torch will be passed to the next Colleagueship executive to continue this effort.

Kristi Boyer and Meera Burney
Co-presidents, 2001–02
Rebecca Earle and Kelly Jellem
Co-presidents, 2002–03
Jessica Emed and Susan Takahashi
Co-presidents, 2003–04
In 2001–02 The Heart / Le Coeur paid special tribute to the accomplishments of our nursing community. We were astounded at how quickly the pages of our Christmas issue, “Celebrating Our Success,” filled up. There were so many awards, prizes and achievements to acknowledge that this issue could not come close to capturing all of the work that nurses have done and continue to do.

In February 2004 we celebrated the publication of our 20th issue. The School of Nursing newsletter continues to inform students, faculty and alumnae about the projects, issues and events that are so dear to them. More and more students are now participating in the writing and editing of articles for The Heart / Le Coeur. We are especially pleased with the interest shown by undergraduate students in joining the editorial committee in 2003–04. We believe that, in addition to the contribution of graduate students, the input of undergraduates is fundamental to the making of a school newsletter. Undergraduates represent the essence of the School of Nursing student body.

One of our greatest resources in developing our network is our alumnae. We need your help to stay on top of nursing projects and events. We welcome your input. Please let us know what you are doing or where you are so that we can strengthen our links. We are thrilled to be entering our fifth year of publication and hope you will be part of our evolution and growth.

The editorial committee is pleased to announce the imminent launch of the new The Heart / Le Coeur Web site. Through this tool we hope to bring our newsletter to many more readers and to create a stronger link with students and the community at large.

If you would like to receive The Heart / Le Coeur, we would be delighted to place you on our mailing list. Simply send an e-mail with your complete postal address to: theheart.lecoeur.nursing@mail.mcgill.ca

Christina Clausen
Coordinator, 2001–02

Rebecca Earle and Kelly Jellema
Coordinators, 2002–03

Charlotte Evans and Geraldine Schaack
Coordinators, 2003–04

---

**Alma Mater Fund**

Many exciting and valuable initiatives in McGill’s faculties and schools are paid for by graduates’ gifts to the Alma Mater Fund. If you have not made your gift this year — or even if you have never given — now would be a perfect time. Please return your contribution with this form.

**ALMA MATER FUND, 1430 PEEL STREET, MONTREAL (QUEBEC) H3A 3T3 CANADA**

Your gift could be doubled if you work for a company with a matching gift program. Please write the name of your employer below.

Here is my tax-deductible gift for the fiscal year that began June 1.

My cheque payable to McGill University is enclosed, OR you may charge my gift to my credit card (credit card gifts will be processed in Canadian funds).

Direct my gift to the following area of need (for gifts under $100, select only one box):

- Nursing Development Fund
- Nursing Scholarships and Student Aid

$ ____________________________

Amount

[ ] MasterCard

[ ] Visa

Employer ____________________________

Signature ____________________________

Expiration Date ____________________________
A Word from the Alumnae President

First, I want to thank the alumnae and alumni who generously choose to support the School of Nursing on an annual basis. Your loyalty has meant that we have been able to increase the number of alumnae scholarships awarded to students over the last two years. This support is becoming ever more important to the growing numbers of students in each program.

I also want to thank the Montreal General Hospital School of Nursing Alumnae Association for its annual gift to the scholarship fund. An MGH scholarship has now been named in memory of a much-loved nursing teacher and mentor, Florence Mackenzie, in recognition of her legacy.

It has been a privilege for me to document many recent scholarship and convocation receptions in photographs. You will find these on the Alumnae page of the dynamic new School of Nursing Web site: www.nursing.mcgill.ca

Congratulations to all of you who are staying in touch: the BScN class of 1978 had a 25th-year reunion last fall, and the BScN class of 1998 celebrated their fiftieth in 2003. Madeleine Buck and her BScN classmates of 1979 are organizing a reunion this fall, and Naomi Akazawa is hoping for a good turnout of her classmates of 1995 at a reunion next year.

Martha Ann Stewart
Alumnae President, 1998–present

Where are our alumnae and alumni now?

We have heard from the class of...

2000s

Catherine Deslandes BScN ’02
Catherine has worked in Emergency at the MUHC – MGH site since graduation, completing certification in ACLS. She was hired by the Régie Régionale to work in Nunavik as a rural nurse starting in spring 2004.

Catherine-Anne Miller BScN ’02
After working on a surgical floor at the MUHC – MNH site, Catherine-Anne headed off to the war-affected mid-western region of Nepal where she works in a government hospital. Her term will last until at least 2005.

Mike Pasoff BScN ’02
Having worked six months in Galveston, Texas, in a Level 1 trauma centre, Mike returned to work in Emergency at the MUHC – RVH site where he completed certification in ACLS, PALS and TNCC: “I am continually gaining experience and will soon be going up North for outpost nursing opportunities. If all goes well, I will be doing my master’s in Nursing, Nurse Practitioner, in the next year.”

Nadia Spinelli BScN ’02
“Since my graduation, I’ve enjoyed working as a full-time nurse on 4 Surgery at the MUHC – MNH site. The Neuro has provided me with the opportunity to pursue part-time studies in the Neuroscience Nursing Program, which I completed in April 2004.”

Guylaïne Leduc MScA ’01
Currently a Nurse Clinician Educator at the Preston Robb Day Centre of MUHC – MNH site.

Suzanne Do-Davoll MScA ’00
Currently a staff nurse on a neurosurgical floor at the MUHC – MNH site: “I am at a point in my career where I am comfortable with my technical skills and can put more effort into improving those things that interest me such as my interpersonal skills and family therapy skills. I presented a poster of my master’s research, ‘Young Adults and Epilepsy: Quality of Life and Developmental Task Completion,’ to present at the Canadian Association of Neuroscience Nurses Conference in Quebec City in June 2003. It’s never too late to disperse your research findings!”

Melanie Dyke BScN ’00
Melanie has worked in the ICU of the MUHC – RVH site since graduation. She is involved in the orientation of new graduates as well as on the Environment Committee and the ICU newsletter. She has also worked with the School of Nursing on marketing and recruitment efforts.

1990s

Anne Gilchrist MScA ’99
Anne is enjoying her new role as the Learning Resources Consultant in Nursing Professional Practice at the Ottawa Hospital. She and her husband became the proud parents of a son, Lucas, on June 15, 2004.

Lucy Wardell MScA ’99
Lucy has been a Clinical Nurse Specialist for the multiple sclerosis program at the MUHC – MNH site since December 2001.

School of Nursing award winners, 2003
Marie-Sol Clermont BScN ’98
and Erik DeAgostinis BScN ’96
These two graduates were married in May 2002 and had a baby in February 2003.

Jessica Emed BScN ’98, MScA ’04
After graduation, Jessica worked in general medical at the MUHC – MGH site and at the CLSC Côte-des-Neiges Services Courants. She was also a Smoking Cessation facilitator at the Montreal Chest Institute. Jessica later moved to Edinburgh and enjoyed the experience of nursing in a new country. She then moved back to Montreal and completed her master’s, and is currently working with Lynne McVey at the SMBD-JGH. jess_emed@yahoo.com.

Julie (Hrinkanic) Smith MScA ’98
“I am currently working as a sessional nursing instructor with first-year students at the University of Windsor (and I love it!). Our daughter Elizabeth was born in August of 2001 and we were blessed with the birth of a son in July of 2003.”

Laurel Lowry BScN ’97
Currently a Nurse Clinician Educator in the Pre-admission Clinic and Same Day Admission Program at the MUHC – MNH site. In 2003, Laurel presented the paper “Nursing Interventions and the Use of Valproic Acid in a Patient with a Brainstem Stroke” at both the European Association of Neuroscience Nurses’ Congress in Denmark and the Canadian Association of Neuroscience Nurses’ meeting in Quebec City.

Bonnie Thamm Kollmar BScN ’97
After starting her career at Toronto Public Health in school health and maternal/infant home visiting, Bonnie took a position as public health nurse with York Region in 1998. Her team delivers prenatal and postnatal community services to families, including group education, home visiting and community development initiatives. She also enjoys taking temporary internal jobs: media contact for York Region Health Services and, currently, acting manager of the Healthy Children team. Bonnie plans to take up part-time master’s studies.

Naomi Akazawa BScN ’95
“After starting my nursing career at the MUHC – MNH site, with the availability team learning vital nursing knowledge/skills in neurosciences, I became Assistant Head Nurse on 3 Northeast. After a year’s leave of absence (a wonderful hospital-nurse benefit), I went to Japan for three months and bought/renovated a house. I returned to the MNH in 2003 when I was in a motor vehicle accident (long story, work-related) that I am recovering from. I hope to return to work soon so that I can share my experiences as a patient! In 2005 we will be having our 10th-year reunion, so if you were part of our fantastic class of ’95 please contact me at naomi_akazawa@hotmail.com.”

Linda Liu BScN ’95, MScA ’98
Recently completed a post-master’s degree as an adult/geriatric nurse practitioner at Boston College. She has been teaching master’s-accelerated students part-time at Boston College and has two research articles in press. Linda presented her research on “Predictors of Mammography Use at Recommended Intervals Among Older Women” at the Eastern Nursing Research Society conference in Boston in April 2004.

Twyla Graham BScN ’94
“After six years as a nurse in a health department in upstate New York (working in maternal-child services), I moved to Baltimore, Maryland, where for the past year I have been nursing at Johns Hopkins Hospital in the GYN/OB department. I rotate through the newborn nursery, intrapartum unit, and labour and delivery. It’s a very challenging, fast-paced environment with a large high-risk population from both the inner-city and the eastern states. However, I have to admit that my first love is public health.”

Manon Coulombe BScN ’93
Currently working at CLSC Métro in Home Care (and loves it!). In September 2002 Manon started working on her master’s at the Université de Montréal. manoutje99@hotmail.com

Petra Mandysova BScN ’93
Until 2000, Petra was a staff nurse/Nurse Educator at the MUHC – MNH site. She then became a Clinical Resource Nurse in the department of Surgery and Rehabilitation Medicine in Abu Dhabi, United Arab Emirates, in a newly opened tertiary care hospital. She obtained Neuroscience Certification from the Canadian Nurses Association in 1999 and was certified as a CPR Instructor-Trainer by the Heart and Stroke Foundation of British Columbia and Yukon in 2002. Petra has presented papers at conferences in Canada, the United States and the United Arab Emirates and has published several articles. See Petras article on page 16 of this newsletter.

1980s

Leigh Bowie BScN ’87, MScA ’91
Currently Staff RN, Select Specialty Hospital, a physical rehabilitation hospital. “I enjoy working with patients and their families as they work hard to regain their health. I am also enjoying raising my two sons in sunny Arizona but I love to visit Montreal.” leigh08@earthlink.net

Leslie Myers MScA ’87
Currently living in Calgary and has a challenging and enjoyable job with the parent-child team at a community health centre. Leslie has worked in the area of women’s health since graduating and taught women’s health courses at McGill from 1990 to 1999. She is very involved in community organizations in Calgary, perhaps trying to recreate the Montreal sense of community and public programs. fracow@istar.ca

Joan Hamilton MScA ’85
Currently Clinical Nurse Specialist in Cancer Care, Queen Elizabeth II Health Sciences Centre, Halifax. Joan has published the book When a Parent is Sick: Helping Parents Explain Serious Illness to Children (Pottersfield Press, Halifax, 2001). joan.hamilton@CDHA.nshealth.ca
1970s

Estelle Fox BN ’78
Now retired. gordon.fox@utoronto.ca

Patricia Rose BScN ’78, MScA ’91
Currently Clinical Nurse Specialist in Critical Care at the MUHC – RVH site. She is also the 2004–05 recipient of the Eureka! Fellowship for Nursing Research at the MUHC. The goal of her one-year research fellowship is to develop and test a scale to measure the risk of skin breakdown in the critically ill.

1950s

Zella (Palmer) Johnson BN ’56
Zella has spent one day each week for the past three years working as a volunteer on the Helpline on BBC Radio Suffolk. They like the Canadian accent!

In Memoriam

Phyllis (Pip) McDonald
BN ’69
Passed away on February 23, 2002, after a valiant battle with cancer. Phyllis joined the Canadian Women’s Army Corps in 1942 and was demobilized in 1946 as lieutenant. She later earned her RN at the Montreal General Hospital and her BN at McGill University. She practised nursing until her retirement. Phyllis will be remembered by her many students at the Montreal General and Queen Elizabeth hospitals for her high standards in nursing, demanding that the patient be considered all-important, and for her caring and understanding approach.

Sylvia Josey Holmes
MScA ’64
Passed away at Richmond General Hospital in British Columbia on January 1, 2003, after a brief illness. Sylvia was a faculty member at the University of British Columbia School of Nursing from 1966 until her retirement in 1994. She earlier held teaching and administrative positions at the Jewish General Hospital in Montreal.

Edith J. Mitchell
Public Health Nursing ’46

Marie Janet (Ford) Luttrell
Public Health Nursing ’45
Passed away on November 24, 2001, after a brief illness.

In Memoriam

Florence Mackenzie (1925–2002)
Eulogy presented at memorial service

In August 2002 a little of the soul of the School of Nursing slipped away when Florence Mackenzie died at the MUHC – MGH site. Flo provided an elegant example of how to bring together the knowledge and values of nursing and the principles of education.

Flo completed her nursing training at the Montreal General Hospital School of Nursing in 1947. After a number of years as a head nurse and nursing supervisor, she came to McGill where she earned a Diploma in Teaching and Supervision, a Bachelor of Nursing and a Master of Science (Applied). She returned to the General and began her teaching career there as a clinical instructor. In 1962 she was appointed Associate Director, Nursing Education, and continued in that position until the MGH School of Nursing closed its doors in 1971. Flo joined McGill as a full-time faculty member at that time and continued here until her retirement in 1990.

A number of qualities marked her contributions to nursing education and nursing practice. Flo brought intelligence and wisdom to all that she did. She believed in people’s abilities and understood that everyone had to move at their own pace – she always had the patience to wait until we were ready. She respected everyone with...
whom she worked. I cannot remember her ever losing her temper or being insensitive to others. Flo was a natural mentor. Whether it was her employees at the Montreal General or her colleagues at McGill, she knew how to respond to their needs and insecurities. Above all, she had a remarkable sensitivity, never feeling shy about allowing tears to come to her eyes when she felt someone else’s pain.

Flo maintained her close connection with the Montreal General Hospital over the years through her work with the MGH nurse clinicians who were developing new roles and with the MGH Nursing Alumnae Association. She returned to her MGH family to be cared for in her last months, and there she remained the generous and gracious lady she had been throughout her life. We shall keep alive what she taught us.

Hélène Ezer
Associate Professor

In Memoriam
Eelen Newton

Everyone needs an angel. Eelen Newton was the McGill School of Nursing’s angel during my term as director. Her unwavering support and interest in the School made an enormous difference.

I first met Mrs. Newton on a trip to Vancouver while attending the International Council of Nurses (ICN) conference. For the first time in 25 years, the ICN was holding its meeting in Canada. Because so many nursing leaders from around the world had graduated from McGill, we decided to have a booth at the conference, to celebrate the School’s former students and showcase its current activities. Eelen Newton’s name was given to me by McGill’s alumnae office as an alumna who had continued to take a special interest in the School. Little did I know that a casual phone call would result in a very special relationship.

Upon hearing that I would be in Vancouver for the ICN conference, Mrs. Newton immediately invited me to join her and her sister for dinner at her home. Mrs. Newton, then in her early eighties, regaled me with stories of her time at McGill. Her mother had travelled across the country, almost 50 years earlier, to find a university for her daughter and settled on McGill because of its academic reputation and because of Miss Lindenburg, then the director of the School of Nursing. It was during Miss Lindenburg’s tenure that the McGill Senate had voted to close the School for lack of funds. These were the war years and money was tight. The School of Nursing’s alumnae rallied to keep it going because of their commitment to the School and respect for Miss Lindenburg. Eelen Newton never forgot Miss Lindenburg and felt she could best repay her by continuing to help the School in any way she could. As she once told me, “Miss Lindenburg never let the School down. It’s the very least I can do.”

The afternoon following our dinner together, Mrs. Newton and her sister, both dressed in their finest, which included white gloves and a little chapeau, appeared at McGill’s booth at the ICN conference. The next day I received a call at my hotel from Mrs. Newton asking me if the School could use $10,000. This was a gift from heaven! It came at a time of unprecedented fiscal constraint and budgetary cutbacks, not unlike what the School had experienced during Miss Lindenburg’s tenure as director.

Every year from then on, Mrs. Newton sent the School money. She took a great interest in everything that was happening at the School and took great satisfaction in the fact that her money made a difference to the quality of life for students and faculty. Her generosity helped to support lecture series, finance the student newspaper – The Heart/Le Coeur – send faculty members to workshops, buy equipment for the lab and made countless other expenditures possible.

On every subsequent trip I made out west I always dined with Eelen Newton, fascinated by her reflections and her insights. And every year I looked forward to Christmas when I would receive a beautiful card, designed and hand made by Mrs. Newton and containing a personal note. I became alarmed one December when her card failed to appear. I called her family only to be told that Mrs. Newton’s health was failing and she was now in a home. I sent her a note but never received a reply. Several months later I received a call from her family informing me of her passing. I felt a deep sense of sadness. Not only had the School lost a friend and supporter but so had I. Eelen Newton had made a significant difference.

Laurie N. Gottlieb
Professor, Flora Madeline Shaw Chair in Nursing

[N.B. Mrs. Newton continues to contribute to the School’s growth and development. In 2003 we received a bequest from her estate. The monies are directed towards faculty development efforts. In June 2004 we invited Catherine Tompkins to lead the Problem Based Learning Series. This workshop was highly successful, with participants from both the university and clinical areas.]
## WHAT'S NEW WITH YOU?

Have you moved? Received a promotion? Changed careers? The Alumnae Association welcomes updates from graduates of the School.

<table>
<thead>
<tr>
<th>NAME</th>
<th>YEAR OF GRADUATION AND DEGREE</th>
<th>PRESENT POSITION</th>
<th>ADDRESS/CITY</th>
<th>PROVINCE/POSTAL CODE/COUNTRY</th>
<th>HOME TELEPHONE</th>
<th>BUSINESS TELEPHONE</th>
<th>E-MAIL</th>
<th>YOUR NEWS</th>
</tr>
</thead>
</table>

ADDRESS OF “LOST” ALUMNAE AND ALUMNI

McGill School of Nursing, 3506 University Street, Montreal (Qc) H3A 2A7 Canada  Fax: (514) 398-8455  E-mail: margie.gabriel@mcgill.ca