We're getting bigger!

THE 2005–06 ACADEMIC YEAR WAS A VERY BUSY ONE at the School of Nursing. Our fall student enrolment reached 454 – the highest in the School’s history. While BScN enrolment remained relatively stable, a substantial proportion of our new students entered the revised BN program, which has been structured to fit with the new college programs in Quebec. The graduate programs have also grown, with a large cohort of students admitted to the Direct Entry stream of our master’s program and to doctoral studies.

The increased enrolment has presented challenges at a number of levels. An increase in the size of the student body requires an increase in the number of clinical placements and in the number of clinical supervisors. With the collaboration of our clinical placement coordinators and the commitment of the nursing leadership at the McGill University Health Centre, the SMBD–Jewish General Hospital and St. Mary’s Hospital, additional hospital placements have been secured. This past year, teaching time was contracted out on an individual basis or obtained through exchanges with the nursing departments of these McGill-affiliated hospitals.

In the community, the problems and solutions have been more complex. A concerted effort was made to meet with leaders across the community network to describe the McGill program and to highlight the contributions being made by students through their community health projects.

To address these changes and to ensure the high quality of our teaching, an orientation workshop was held for the fall and winter sessions, in order to orient new sessional and clinically based teachers to the School’s beliefs about nursing and the teaching strategies that are valued here. A teachers’ manual was developed with a view to describing the School’s programs, University policies and procedures, and common teaching and learning issues, as well as to answer the “what to do, whom to ask” questions that invariably arise. A Teacher Recognition reception was held in late spring 2006 for the large number of non-university-based educators who act as preceptors, tutors, project advisors and clinical group leaders in all programs and who receive no remuneration for their services.

At the end of the school year, we presented a pedagogical day during which faculty members identified and shared teaching strategies that they had found useful. This year, we will integrate new material in both French and English for use in our annual workshop for new preceptors.

The growth of the School of Nursing has brought other challenges. The need for new positions in tenure-track and non-tenure-track streams has been recognized by the Dean of Medicine, and we were able to recruit two faculty members for tenure-track positions beginning in 2007. We will also be looking to increase the stability of the faculty by adding permanent non-tenured positions.

Space in Wilson Hall for offices, research, classrooms and student activities is at a premium. Imaginative use and refurbishing of existing space will be an ongoing process, as will gaining access to other buildings. This year we reclaimed our faculty lounge; it is now a pleasant space for faculty and staff meetings, for small receptions and for receiving visitors to the School.

Hélène Ezer, Acting Director, 2005–06
Increased enrolment means increased costs, as Quebec universities do not receive funding for clinical education in nursing. Through the Table de Concertation, which represents all of Quebec’s university nursing schools, we are continuing to negotiate with the ministry responsible for education (Ministère de l’éducation, du loisir et du sport – MELS) to secure stable funding to cover these costs. In response to our follow-up report to the Accreditation Review of the Canadian Association of Schools of Nursing, the board of CASN expressed confidence in the School’s ability to meet the challenges posed by limited resources and to ensure the stability and quality of our programs.

I am delighted to report that our increased size has not affected the productivity of our faculty members. Members of the School’s academic staff are making enormous contributions to the development of knowledge. Antonia Arnaert is a member of a research team, the McGill University Training and Human Resources Development Project, that has received $11.5 million in funding. Dr. Arnaert brings to the project her expertise in evaluation and in the use of tele-health technology. Nancy Feeley has received a grant from the Canadian Institutes of Health Research for a randomized trial of a nursing intervention to reduce maternal anxiety and improve development outcomes for neonates with very low birth weight. This is one of the few randomized trials of nursing interventions to be funded by the CIHR. Formation et expertise en recherche en administration des services infirmiers (FERASI), a joint initiative of the McGill and Université de Montréal schools of nursing to develop expertise and to support nursing intervention research, has received $1 million from the Fonds de recherche en santé du Québec (FRSQ), the Newton Foundation and the MELS to fund its ongoing activities. As co-director of GRISIM, Celeste Johnston has taken a leading role in the development of its activities. Finally, Margaret Purden, Hélène Ezer and Kathryn Sherrard have received $1.3 million from Health Canada for the McGill Educational Initiative on Interprofessional Collaboration. This is the largest of Health Canada’s 11 grants awarded across the country. Other faculty members at the School will be major players in the project, which brings together both students and faculty members in the schools of Medicine, Nursing, Physical and Occupational Therapy, and Human Communication and Disorders.

Recognition of faculty achievements this past year has come in a variety of ways, some of which are highlighted here:

- Cheryl Armistead received the Nursing Undergraduate Society Teacher of the Year Award.
- Diane Borisov has taken on the position of Director of Nursing at the MUHC.
- Robin Cohen received a CIHR Investigator Career Award for her work in palliative care.
- Susan E. French received the CASN Academic Administrative Leadership Award and the CASN (Quebec) Special Award for Promotion of Inter-university Collaboration.
- Anita Gagnon received tenure and was promoted to the position of Associate Professor.
- Laurie Gottlieb received the graduate students’ Nursing Colleagueship Teacher Award.
- Celeste Johnston received the Nurse Researcher Award of the Canadian Association for Nursing Research and was appointed a Fellow of the Canadian Academy of Health Sciences.
- Mona Kravitz received the Ordre des infirmières et infirmiers du Québec (OIIQ) Jeanne-Mance award for Nursing Leadership.
- Carmen Loiselle was recommended for the Faculty of Medicine Honour List for Educational Excellence and had her FRSQ Research Career Scientist Award Junior 2 renewed.
- Ann Lynch was appointed Director of Clinical Operations and Nursing for the MUHC.
- Lynne McVey has taken on the position of Director of the Department of Nursing at the SMBD–Jewish General Hospital.
- Janet Rennick received a Hospital for Sick Children Foundation/IHDCYH-CHIR New Investigator Award and the Eureka Fellowship in Nursing Research.
- Judith Ritchie received the OIIQ’s Prix Florence for research, as well as the MUHC–Montreal General Hospital site award for Innovative Leadership in Nursing Practice.

A number of international activities took place over the past year. Madeleine Buck served as nursing representative in a group that visited Tanzania to assess the needs of a community devastated by HIV/AIDS.
The contacts developed there have resulted in the creation of a fund to support Nurses for Highlands Hope. Christina Clausen is now in Tanzania exploring the possibility of student placements for those interested in international health.

Our connections with Shanghai, China, remain strong. Two students from the Changhai Second Military Hospital came to McGill for the fall 2005 semester, to audit the Nursing Research course given by Nancy Frasure-Smith and to explore the organization and delivery of nursing services at the MUHC. New relations were forged this year with the Kaoshiung Medical University in Taiwan. Hélène Ezer and Margaret Purden were invited to give presentations on the integration of the McGill Model of Nursing into the curriculum and on the mutual benefit to education and practice of the joint appointment system at the School of Nursing. Contacts were also made with the Tzu Chi College of Nursing in Hualien, Taiwan. The possibility of a student exchange program and collaboration around research initiatives is now being explored.

In December, Janice Morse, an internationally recognized leader in qualitative methods in health research, was invited to the School to present and consult with students and faculty on their research projects. Her input helped enrich data collection and the interpretation of research findings. In July, the School of Nursing and the MUHC co-sponsored the opening ceremonies of the Sigma Theta Tau Conference on Evidence-Based Nursing, held in Montreal and attended by more than 1,300 people. This conference provided us with an opportunity to showcase the activities and programs of the McGill nursing network to an international audience.

We have been fortunate to have our alumnae’s and the Newton Foundation’s continued support of individual students, student activities and the many initiatives described above. This support has played a major role in helping the School grow and succeed.

It has been a privilege for me to work with the university-based and clinically based faculty, the students and the administrative staff in meeting the challenges of this past year. Their wisdom, patience and skills continue to generate solutions to the unusual challenges that come our way.

Hélène Ezer
Acting Director, School of Nursing, 2005–06

A Word from the Alumnae President

Warm greetings to alumnae, alumni, nursing students and families. I want to take this opportunity to sincerely thank everyone who has generously supported the work of the School of Nursing over the past year. Your gifts continue to be vitally important to the promotion of excellence in nursing education at McGill.

In my role there are many people to thank, and this year I want to acknowledge the contribution of faculty member Catherine Gros in increasing the visibility of the School of Nursing alumnae. For many years Catherine has coordinated participation by students and faculty in the Alma Mater Thank-a-thon (formerly Phonathon), held in March. This annual event provides us with a wonderful opportunity to personally thank alumnae and alumni across Canada and the United States for their gifts. I also wish to pay special tribute to the generosity of the Montreal General Hospital School of Nursing Alumnae Association, and the current president, Joan Meadows, who provide two named MGH–School of Nursing awards each year. As the student body grows, it becomes vitally important for all of us to acknowledge and support the academic excellence of future nurses.

This is my last message as Alumnae President and I am very pleased to introduce the incoming President, Rachel Boissonneault, whom many of you met in May at the 2006 convocation reception at the School. While I have been very proud to represent alumnae and alumni, I am now happy to see a young graduate with exceptional talent and a clear vision for nursing take on this role. Rachel would love to hear from alumnae and alumni. Her e-mail address is Rachel.boissonneault@mail.mcgill.ca

Martha Ann Stewart
Alumnae President, 1998–2006
Research at the School of Nursing

Research at the School of Nursing remains active and productive. Four researchers — Robin Cohen, Anita Gagnon, Celeste Johnston and Carmen Loiselle — continue to hold career awards and/or chairs, which has resulted in the freeing up of time for their research programs. In addition, recently Janet Rennick was awarded a grant from the Canadian Institute of Child and Adolescent Health/Hospital for Sick Children Foundation. Externally funded operating grants currently cover a wide range of topics: interprofessional education, childbearing health among new immigrant and refugee women, family caregivers of palliative care patients, intervening with cancer patients to promote better coping, methods of nursing intervention using the Internet and similar technologies, developing measures in vulnerable populations, and intervention with mothers to decrease pain in their critically ill infants. Recently Nancy Feeley and colleagues received a Clinical Trials grant from the Canadian Institutes of Health Research (CIHR) for their research on intervening with new mothers of preterm neonates to promote positive interactions, and Celeste Johnston received a Complementary Alternative Medicine grant from the Hospital for Sick Children Foundation.

Of more interest to students, perhaps, are infrastructure grants to promote student learning and research. The principal or co-principal investigators of four studies with Strategic Training Grants from the CIHR are at the McGill School of Nursing. Robin Cohen heads a study on palliative care, Carmen Loiselle heads one on psychosocial oncology, Margaret Purden is co-principal investigator of a study on cardiovascular nursing and Celeste Johnston is co-principal investigator of a study on pain in children. These grants provide opportunities for graduate and occasionally undergraduate students to participate in multidisciplinary research, exchange visits, and Web-based courses and to receive funding for personal support or for projects.

GRISIM (Groupe de recherche interuniversitaire en soins infirmiers de Montréal), the joint program of McGill University and the Université de Montréal on nursing intervention research, received funding in April 2006 for two more years. GRISIM holds workshops and seminars and supports both students and faculty in nursing intervention research. Several doctoral students have received financial support for their studies (Marilyn Aita, Janet Bryanton, Lisa Keeping, Sylvie Lambert and Dianne McCormack), as have postdoctoral students (Céline Gélinas and Sylvie Le May). The fellowships are worth $15,000, of which $10,000 is provided by GRISIM and $5,000 through a partnership between the School and the Canadian Nurses Foundation. Faculty members are eligible for pilot-study support to help them develop studies that will be competitive for external funding. Dr. Feeley’s project with mothers of preterm neonates, for example, received pilot funding and was successful in the CIHR’s highly competitive Clinical Trials Committee.

GRISIM has recently provided funding for Dr. Gagnon to conduct two Cochrane Reviews on nursing interventions with new mothers that will provide a synopsis of the best evidence on which to base nursing practice in this area.

C. Celeste Johnston
Associate Director, Research
Training and Human Resources Development Project

The Training and Human Resources Development Project, funded by Health Canada and administered by McGill University, is a large-scale project to support Quebec’s initiatives in broadening access for English-speaking Quebecers to health and social services. Its objectives are to ensure effective communication, in English, between English-speaking Quebecers and personnel in the health and social services system, and to increase the participation of English-speaking personnel in that system. A budget of $11.5 million has been allocated for the development, application and evaluation of the project’s four components: (1) a language training program; (2) incentives for retaining English-speaking professionals and students already working in the regions, fostering additional participation in these regions, and developing distance professional and community support; (3) symposia and conferences; and (4) an innovation fund for local or regional initiatives related to the recruitment and retention of health-care staff.

The project also includes a research component. As described in its “statement of mandate” (January 25, 2006), the “Research Team serves as a resource for the Project Steering Committee and Advisory Board. The team helps the project by providing evidence-based information relevant to its goals and by conducting studies to obtain new evidence on questions relevant to the project’s mission. The Research Team also works to establish visibility for its own research through publications, conference presentations, and links to regional, national and international research groups working on similar issues. The Research Team undertakes studies in response to questions from project organizers and in response to questions identified by members of the Research Team itself.”

Interprofessional and inter-institutional (Concordia University, Université de Montréal, Université du Québec à Montréal and McGill University), the Research Team is led by Norman Segalowitz (Professor of Psychology at Concordia University). It will address issues concerned with the delivery of health services to minority-language populations. The statement of mandate points out that “although the team operates within the context of the McGill Project, its research is relevant to settings in Canada as a whole and internationally. In these settings there are challenges of delivering health care services to minority language populations — including minority Anglophone, Francophone, Aboriginal and Immigrant groups. In addition, there is a challenge of developing French and English language training programs for foreign-trained health care personnel now working in Canada.”

As a member of the Research Team, my interest is the delivery of remote holistic care to palliative care patients and their family members living in the community, using e-health technologies and distance professional development for nurses.

Additional information can be obtained at http://www.mcgill.ca/hssaccess/ or by contacting the Coordinator of the Training Human Resources Development Project, Mireille Marcil, at mireille.marcil@mcgill.ca

Antonia Arnaert
Team Member, HRD Project

The McGill Educational Initiative on Interprofessional Collaboration: Partnerships for Patient and Family-Centred Practice

In late fall 2004, nursing took the lead in bringing together a group of professionals from the schools of Nursing, Medicine, Physical and Occupational Therapy, and Communication Sciences and Disorders, submitting a project to Health Canada for funding. The project, titled The McGill Educational Initiative on Interprofessional Collaboration, received $1.3 million to support its activities until 2008. The project commenced in July 2005 with the participation of two clinical partners, the McGill University Health Centre and the Sir Mortimer B. Davis–Jewish General Hospital. Its purpose is to build opportunities for interprofessional education (IPE) and to create and sustain environments that are exemplars of interprofessional practice (IPP).

The initiative has four components. The first is to mount a faculty development program that builds the attitudes and skills required to teach IPP among university-based and clinically based educators. The second is to mount comprehensive IPE activities that are delivered within and across student groups over the course of their programs of study. The third is to create a range of resources and tools with a view to facilitating interprofessionalism in both education and practice. The fourth is to develop clinical learning environments that enable and enhance interprofessional practice.

Clearly, this is an ambitious undertaking. It requires the creation of an environment that values and rewards interprofessionalism among educators and clinicians in both university and hospital settings. Over the past year we have brought students and educators together to learn from and about each other around the care of patients with HIV and of families dealing with spina bifida. A seminar planned for October 2006 will bring together 500 first-year students and their educators from all four schools to explore issues related to professionalism. We have also systematically examined and described the characteristics of exemplar sites for interprofessional practice within the MUHC and the SMBD–Jewish General Hospital.

Margaret Purden, Hélène Ezer and Kathryn Sherrard are the nursing investigators for the project, and other faculty members are now actively...
involved. The basis for the School of Nursing’s commitment to this initiative is the knowledge that patients and their families benefit directly when cared for by a team that demonstrates trust, respect and clear communication, and that develops a comprehensive, integrated plan of care. Our young graduates will also benefit: as members of a dynamic and constructive team, they will be happier and more effective health professionals.

To learn more about interprofessional education and practice or about the McGill initiative, please contact us at IPE-IPP@mcgill.ca

Margaret Purden
Co-lead, McGill IPE & IPP Project

Hélène Ezer
Investigator, McGill IPE & IPP Project

PORT

PORT, the Psychosocial Oncology Research Training program based at the School of Nursing, is led by principal investigator Carmen G. Loiselle. The goal of this program is to develop a critical mass of scholars in psychosocial oncology, which is the study of personal, contextual and social factors that affect people’s experience with cancer. Thus far, 13 doctoral and postdoctoral fellows from the four participating universities (McGill, Dalhousie, the University of Manitoba and the University of British Columbia) have been awarded traineeships. Consistent with PORT’s mission of training the next generation of psychosocial oncology researchers from a variety of disciplines, the trainees come from specializations such as nursing, psychology, philosophy, nutrition and management. In its third year of a six-year program, PORT continues to be funded primarily by the Canadian Institutes of Health Research/Institute of Cancer Research and the National Cancer Institute of Canada. Additional funds are provided by the CURE Foundation and the Newton Foundation.

All components of the PORT program are now in full operation. The key elements are as follows:

• a core three-credit graduate seminar, *Psychosocial Oncology Research*, which also serves as one of two required courses for the new Psychosocial Oncology Option offered by McGill’s Department of Oncology

• an annual two-day meeting and workshops; the May 2006 annual meeting welcomed 24 trainees and mentors to Montreal under the theme “Innovations in Psychosocial Oncology Interventions and Research”

• a newly launched internship program providing financial support to PORT; this is for fellows interested in extending their research training experience beyond their home universities during their tenure with PORT

• mentorship from Canada’s top researchers in the field of psychosocial oncology

Minimum stipends range from $20,000 to $36,750, with the possibility of top-up awards. Students who have an interest in psychosocial oncology research and are pursuing studies in a variety of fields at the doctoral or postdoctoral level are encouraged to apply to PORT for a unique learning opportunity.

Application deadlines are March 1 and September 1. For further information, visit the PORT Web site (www.port.mcgill.ca) or contact the Project Coordinator at 514 398-7158 or port@mcgill.ca

Carmen G. Loiselle
PORT Program Leader

FERASI

The FERASI Centre (Formation et expertise en recherché en administration des services infirmiers) is operated through a partnership between three universities — Université de Montréal, Université Laval and McGill University. FERASI was founded in 2001 in recognition of the important role of nursing services administration within a changing health-care system and the need to address the shortage of researchers in this area.

The Centre collaborates closely with decision-makers to ensure the appropriate training of researchers in nursing administration.

In 2005–06 three School of Nursing students (Katherine Logue, Caroline Marchioni and Geneviève Tousignant) were awarded FERASI

Participants in the PORT second annual meeting. *Front row:* Fuchsia Howard (UBC), Rosa Matousek (McGill), Alison Brazier (UBC), Larry Mróz (UBC), Zhenfeng Ma (McGill). *Middle row:* Rosana Silveira Faria (St. Mary’s Hospital, Montreal), Joyce Davison (UBC), Joan Bottorff (UBC), Lorna Butler (Dalhousie), Krista Wilkins (U of Manitoba), Natalie Rosen (McGill), Bonnie Long (UBC), Sylvie Lambert (McGill), Deborah McLeod (Dalhousie). *Back row:* John Oliffe (UBC), Carmen Loiselle (McGill), Lynda Balneaves (UBC), Tom Hack (U of Manitoba), Maru Barrera (Hospital for Sick Children, Toronto), Lina Di Dio (McGill)
master’s scholarships and one student (Isabelle St-Pierre) was awarded a doctoral scholarship.

FERASI scholarships are offered to students in nursing, health administration and related disciplines. Research projects must be linked to one of the following fields: health human resource planning, the politics of nursing care, or the organization and management of nursing services.

On May 18, 2006, FERASI co-hosted a colloquium as part of the ACFAS (Association canadienne-française pour l’avancement des sciences) conference, which was held at McGill this year.

To learn more about FERASI, visit www.ferasi.umontreal.ca or contact me at 514 398-8161 or at melanie.lavoie-tremblay@mcgill.ca

Mélanie Lavoie-Tremblay
FERASI Program Representative
at McGill University

Strategic Training Program in Palliative Care Research

The six-year Strategic Training Program in Palliative Care Research has been funded since April 2003 by the National Cancer Institute of Canada (with funds donated to the Canadian Cancer Society) and the Canadian Institutes of Health Research. To our knowledge, it is the world’s only palliative care research training program at the doctoral and postdoctoral levels. It involves the participation of McGill University, the University of Ottawa and Université Laval.

Despite advances in cancer treatment and prolonged survival, 50 percent of people diagnosed with cancer in Canada will die from it. This represents a very difficult situation not only for the person who is dying but also for the family. This initiative is intended to increase our ability to produce excellent palliative care research in Canada. It has four objectives:

• to develop an exemplary nationally and internationally recognized program that supports and trains people from a wide spectrum of disciplines for the purpose of producing excellent interdisciplinary, innovative and relevant palliative care research
• to have trainees and mentors combine and develop creative palliative care research methodologies from different fields, disciplines and research laboratories
• to teach trainees and mentors to conduct and disseminate research that will be utilized by health-care providers and policy-makers for optimal quality of life amongst palliative care patients and their families
• to build an interdisciplinary network of palliative care investigators that results in collaboration between and amongst mentors and trainees and connects them to the broader palliative care research community

The School of Nursing plays a critical role in the program. One of its Associate Members, Robin Cohen, is the leader of the program and Mary Ellen Macdonald, also of the School, was a postdoctoral trainee and is now a mentor in the program, including teaching the qualitative section of its Protocol Development Workshop. Two School of Nursing doctoral students are currently funded by the program. Anita Mehta, PhD4, is nearing the end of data collection and analysis for her thesis project, “Family Caregivers and the Pain Management Process.” Anita is currently on maternity leave. She has received studentship funding for when the National Cancer Institute’s program of funding comes to an end. Lisa Chan, PhD2, is studying the therapeutic relationship between nurses and their patients at the end of life on a medical unit. Both Anita and Lisa have rejoined the School after working clinically upon receiving their master’s degrees, and have brought with them highly relevant clinical questions. Because of the interdisciplinary and collaborative nature of the program, these School of Nursing students are working with experts in the disciplines of epidemiology, medical anthropology, medicine, psychology and social work, as well as nursing, and are developing collegial relationships with students in these disciplines who have an interest in palliative care.

Details about the program can be found at www.mcgill.ca/cihr-pcrresearch, a bilingual Web site.

S. Robin Cohen
Research Director,
Division of Palliative Care,
Departments of Oncology and Medicine

CJNR

Canada’s oldest peer-reviewed nursing research journal, and one of the longest-surviving academic journals to have an uninterrupted publishing history, continues to occupy an important place within the School of Nursing. Unlike the majority of journals, which are published by large, for-profit publishing houses, CJNR has remained an integral part of the university. 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.

The past two years have seen many innovations at the Journal, including the launch of the CJNR Digital Archive. The archive is available through the McGill libraries and is made possible by the Richard H. Tomlinson Digital Library Innovation and Access Award to the School of Nursing. Here, readers can find every issue of CJNR from its inception in 1969 until 2003; the archive will be continually updated, with all issues up until the last three years available free of charge. The project is the result of three years of work by the Project Coordinator, David McKnight, and his associates in the Digital Collections Program. The most recent three years of the Journal are available to subscribers through our online provider, Ingenenta, and our online readership continues to increase steadily.

At the editorial level, CJNR has welcomed Souraya Sidani of the University of Toronto as Feature
Associate Editor for Best Practices in Research Methods, a column introduced in March 2005 to share theoretical and empirical information on the design and/or conduct of quantitative, qualitative, and mixed-method studies and to expand the repertoire of research methods for addressing topics of interest. Best Practices articles have focused on such diverse topics as electronic data collection, palliative care research in practice, and missing data.

Our Associate Editor, Sean Clarke of the University of Pennsylvania, continues to play a crucial role in setting the direction of the Journal, as well as writing some memorable editorials. His recent “Advice to Authors: The ‘Big 4’ Reasons Behind Manuscript Rejection” was deemed so informative that it was translated into French for publication in Perspective infirmière. Other recent CJNR editorials, written either by the Editor-in-Chief, Laurie Gottlieb, or by Dr. Clarke, have covered such hot topics as open access, the search for a national research identity for Canada and the unintended consequences of the Impact Factor.

In our continued effort to seek out topics of paramount concern to Canada’s nursing community, in late 2004 Dr. Gottlieb embarked on a cross-country tour of universities and research institutions, to engage researchers and students in discussions about the issues they would like to see tackled in the Journal.

As a quarterly journal, CJNR features focus topics, each of which has a guest editor, an expert in the field, with whom we work closely to craft the issue. In the past two years CJNR has published manuscripts with a focus on Continuity and Transitional Care (Guest Editor: Margaret B. Harrison of Queen’s University); Advances in Research Methods (Souraya Sidani, University of Toronto); Diversity and Health (Colleen Varcoe, University of Victoria); Rural Health Research (Judith C. Kulig, University of Lethbridge); Palliative Nursing and End-of-Life Care (Susan McClement and Lesley F. Degner, University of Manitoba); Aboriginal Health Research (David Gregory, University of Manitoba); Women’s Health: A Social Determinants Perspective (Judith Wuest, University of New Brunswick); and Risk and Safety (Joan Bottorff, University of British Columbia).

CJNR recently changed its policy of setting the topics for the focus issues from a five-year to a two-year plan, in order to reflect the dynamism within the nursing field and to parallel the trends in funding for particular research. With this increased flexibility, we are able to concentrate on issues that are especially relevant and to highlight the exciting research being done currently in Canada.

The focus issue on Violence and Health, to be published in December 2006, marks the first time that we will have Guest Editors collaborating from two different countries. Jacquelyn Campbell of Johns Hopkins University and Angela Henderson of the University of British Columbia will bring a new angle to the topic by comparing the research being done on each side of the border. In a similar effort to increase the Journal’s accessibility, in June 2006, for the first time ever, we included a commentary with one of our focus articles; the particular focus of that issue of CJNR was Risk and Safety and the commentary was written by a leading researcher in the United Kingdom. Such initiatives serve not only to generate debate but also to increase our international presence and readership.

We have also been maintaining our presence internationally through the attendance of Laurie Gottlieb and Joanna Toti, our Managing Editor, at the annual conferences of the International Academy of Nursing Editors. This has allowed us to keep abreast of issues facing our peers around the world.

As we approach the Journal’s 40th anniversary this year, we look forward to exploring the issues that we have defined for the next two years, as well as charting the course for the next 40.

Morgan Charles
Assistant Managing Editor, CJNR

PROGRAMS

Bachelor of Science (Nursing)

It has been another busy year for students in the BScN program. Our students continue to meet the many rigorous academic requirements of their program while also participating in university and community affairs.

Thanks to our generous alumnae funding, scholarships were awarded to several BScN students for their high academic performance, as part of our in-course awards program. Isabel Clarke Dickson Woodrow Scholarships were awarded to Julie Fréchette and Amanda Camacho. The C. F. Wong Award went to Chelsea Wenzynowski and McConnell Awards were won by Laura Stinson, Yana Zaugolnкова and Laura Mattioli. The School of Nursing Faculty Award went to David Klinkusoom. Laura Stinson is the first recipient of a $3,000 bursary from GRISIM (Groupe de recherche...
interuniversitaire en sciences infirmières de Montréal) to conduct an intervention study as part of her U3 studies in Community Nursing.

We have been impressed by the number of students who were able to attend the Canadian Nursing Student Association national conference in Newfoundland this past winter, and by the range of activities our students have participated in at the university and community levels.

Our students continue to benefit from a wealth of clinical learning experiences within the McGill University teaching network. Be it in an intensive care unit in a quaternary care centre or a CLSC community clinic addressing the primary health-care needs of populations, our BScN students have been able to study with some of the best nurses and health professionals in the city. Once they have mastered a certain level of clinical competence, the world becomes their arena for learning, with our international placement option for final-year students continuing to be very popular. This past year, students benefited from learning experiences at Connolly Hospital in Dublin (Ireland), Mission Community Hospital in Panorama City, California (United States), a military clinic in Iwakuni (Japan), Kenyatta National Hospital in Nairobi (Kenya) and Hôpitaux de La Timone in Marseille (France). Nationally, placements were made at the Tulattavik Health Centre of Ungava Bay Kuujjuaq, the Hospital for Sick Children in Toronto, and Sunnybrook and Women’s College Health Sciences Centre in Toronto.

The BScN curriculum is evolving to include more interprofessional learning opportunities, with a formal program to address professionalism being developed among the schools of Nursing, Medicine, Physical and Occupational Therapy, and Communication Sciences and Disorders. Starting this fall, faculty members will be integrating the use of the McGill Medical Simulation Centre into many of their students’ learning activities. With the launch of this centre, complete with a simulated patient program, high-fidelity mannequins, and audiovisual technology to record and analyze learning activities, our BScN graduates will be even better prepared to meet the heavy demands of clinical practice.

Madeleine Buck
Assistant Director, BScN Program

Bachelor of Nursing (BN) Program (Integrated and Three-Year Options)

For a variety of reasons, the 2005–06 academic year will be a memorable one for the BN program. The new five-year BN Integrated Program (BNI) saw its first graduates in the spring of 2006. Hélène Lucas Angers, Kathryn Baldwin and Sandra Cook were awarded Distinction. Julia Eldridge was awarded Great Distinction and the Dean’s Honours List. Julia was also the first recipient of a new prize for clinical and academic excellence, the Barbara Anne Altshuler Prize given by David Altshuler in honour of his mother. Both Mr. Altshuler and his mother attended the May graduation ceremonies. At the reception, held at the School of Nursing, Mr. Altshuler showed a profound understanding of the importance of nursing in the health-care system and the role of nurses in providing healing interventions for patients. The School is deeply appreciative of his vision of nursing and recognition of nurses.

The second cohort of the BNI program has proven to be the School’s largest entering class (99 students) in at least 20 years. As with last year, the proportion of students from within the McGill–CÉGEP Consortium and students coming from other consortia was two to one. This second cohort benefited from lessons learned by the first group. An elective to be taken in their final year was introduced, to replace the Families and Health Behaviour course, since much of the content overlaps with the Sociology of the Family and Sociology of Health courses taken in CÉGEP. For the 2006–07 academic year, Health and Physical Assessment will be shifted from fall to winter. The overall effect is to lighten the load in first year in order to ease the students’ adjustment to university.

Students in the BNI program have been closely monitored and studied since arriving at the university. In the fall of 2005 the findings of two small studies on these students and the
program itself were presented at the CASN (Canadian Association of Schools of Nursing) Health Educators’ conference held in Montreal. One study compared the performance of students in the McGill Consortium with that of students who came to McGill from other consortia. The McGill Consortium students performed better than the other group in the first semester, but by the second semester the difference had largely disappeared. Both groups found the Science courses a challenge. The other study explored the students’ transition to university. Surprisingly, the students from other consortia had a smoother transition in some respects. Difficulties negotiating the student and RN status played a large role in the transition. Additional information was gathered in June 2006, when the Curriculum Committee of the Consortium partners held a day-long conference, “From DEC to Bacc: Learning Together.” Both graduating students and students who had entered in 2005 participated in panel discussions about the program. The graduating group spoke of changes in themselves as they developed a more professional practice base, while the other group demonstrated considerable self-efficacy and a “can do” spirit. Taken together, these various initiatives have added to our understanding of students’ needs and experiences. This will allow us to develop strategies to achieve a smoother transition, better integration into the School and the university, and more meaningful professional growth. We plan to continue monitoring the process and the progress of students in this new program, with a view to improving and refining it.

Consistent with this perspective, the aim of the clinical course at the end of the first university year was revised to address students’ wish “to be taken to the next step.” The emphasis on critical thinking through reflection and practice situations remained, but we asked the teaching hospitals to help us by involving students in projects that address real problems in clinical settings. The success of the course is due largely to the excellent cooperation and support received from the MUHC, the SMBD–Jewish General Hospital, and St. Mary’s Hospital and from the fine team of teachers: Hedda Coronado, Ayan Dalel, Elaine Doucette, Viki Doucette, Andrea van Hulst, Kelley Kilpatrick and Julie Kinnon Shaw. The upbeat presentations and comments in the final class showed what students can accomplish in a very short time. Many of their constructive comments will be taken into consideration for next year.

With the growth of the BNI, there has been a concomitant decline in inquiries with respect to the BN three-year program. As a result, the program has suspended admission. Students who graduated with a Nursing DEC before 2004 and who have a strong academic record may be allowed to join the BNI after completing prerequisites for admission. Interested students can contact the Program Director at 514 398-3309.

The 2005–06 recipients of the Ordre des infirmières et infirmiers du Québec bursary were Lelia Holden (BN) and Yan Yin Poon (BNI). Lelia has just completed a nursing internship in another country. This augurs well for the health of the School and for the profession, as more bachelor’s-prepared nurses will be entering the health-care system.

Marcia Beaulieu
Assistant Director,
BN and BNI Programs

Nursing Undergraduate Society
When the 2005–06 NUS Council got together for our first meeting in May 2005, we set up a new NUS message board. While some argued that this “team-building exercise” was just a way of roping people into doing some housekeeping chores, we soon found that we were actually honing our communications skills and — dare I say it? — having some fun in the process. You see, for this activity we were each assigned special status: some of us designed the board but were not allowed to speak or to touch anything, some could speak but were not allowed to see the design plans or to touch anything, and some were blindfolded but had to use the materials and tools, including scissors (really sharp) and a stapler (vicious), to construct the board. Still with me? Essentially, we all had our strengths, and as a team we had to combine these to achieve our goal. (Three cheers for the McGill Model of Nursing.) It was a brilliant plan, if I do say so myself. By the end, all of us were on our hands and knees, laughing, covered in paint and glue,
talking to each other — and looking for Band-Aids for our nicked fingers. But, personal injuries aside, we were working together as a team and enjoying it. That was the point, and that attitude lasted the entire year, through thick and thin, leading to some wonderful achievements.

Part of what we wanted to achieve this year was “nursing outside the box: bringing nursing to the community around us.” Throughout the year we reached out to the university community by holding on-campus blood-pressure clinics, setting up cold/flu symptom awareness tables and distributing pamphlets on proper hand-washing techniques. Some Council members even held a fundraising drive on their own time for the Children’s Wish Foundation, with donations matched by the NUS.

Responding to a health ministry assessment of Quebec’s readiness to address a future flu pandemic, we arranged for some student volunteers from the School of Nursing to be trained in fitting N95 masks through the McGill Health Clinic. These students then fitted other students at the School with masks. The NUS hopes to make this collaboration an annual event, thus helping the McGill Health Clinic to ensure that all health-care students at the university are prepared to face airborne illnesses.

In order to foster understanding and collaboration among the health professions, we provided support for the formation of a McGill chapter of the Health Science Student’s Association, a nation-wide organization that promotes interprofessional health care. In addition, working collaboratively with Mitabi, a McGill student forum dedicated to increasing communication among the health professions, the NUS participated in the Third Annual McGill Interprofessional Health Conference, helping to bring a nursing perspective to its case scenario sessions. Also, we were responsible for organizing one of the sessions for Mitabi’s monthly interprofessional forum, choosing the theme “Caring through Death and Dying.”

The NUS took a stand against the Students Society of McGill University’s annual campaign to have the A+ mark added to the grading scale. We informed our SSMU representatives that this would promote individualism and competitiveness, which can only serve to taint the ideals of true learning and academic respectability.

While we are passionate about the role we have played in the university around us, what we are perhaps most proud of are the steps that the NUS has taken this year to promote solidarity within the School itself — nursing within the box, so to speak. What sparked this interest was the unfortunate “Nurse’s Song” incident at a respected Canadian medical school which debased the profession of nursing. Although it was the middle of summer, we all came together to join the continent-wide movement for nursing solidarity and professionalism. This experience led us to reflect on our own nursing school and our own student community. We realized that our first task, before trying to nurse the world around us, was to break down the barriers that divide us and make us less efficient and resourceful within our own School.

To promote solidarity and camaraderie, the NUS and a team of volunteers organized the first Nursing Frosh to include all nursing undergraduate years and programs. We managed to put together three intramural sports teams and were well represented at the Nursing Games. Oh, and by the way, our intramural ice-hockey team finished with more wins than losses for the first time ever! We organized several social events, and at the end of the year we even witnessed BScNs, BNs and BNI’s celebrating together as graduating nursing students at the first-ever graduation ball to include us all.

We participated in arranging opportunities for students to prepare for their nursing careers, such as curriculum vitae workshops, careers fairs, a master’s information session and an in-house flu-shot clinic. And despite the odds, the NUS helped to raise $9,500 to send 18 students to the Canadian Nursing Students Association conference in Newfoundland — making McGill’s nursing delegation one of the largest in attendance.

Recent “alum” will be happy to learn that, working collaboratively with the School of Nursing staff and the School of Social Work student society, we finally made some headway concerning
the computer room in the basement of Wilson Hall that so many groups doing team projects truly rely on. After so many years of frustration and disgruntlement, there is renewed hope that one day the common nursing student will triumph over Wilson Basement Technology and maybe even (gasp!) get to print something.

After much review and scrutiny, this year the NUS decided to cease conducting our own separate class evaluations and to actively support the use of McGill’s standardized MOLE (now called MERCURY) evaluations. This move was made in order to promote understanding and partnership between students and professors. We hope that by working collaboratively with faculty, rather than separately from them, we will send the message that students and faculty are on the same team, striving towards the same goals. Of course, the NUS will continue to play a crucial role in providing academic opportunities, outlets and support for students within the School. But we are confident that this first collaborative step will, in the long run, help to break down certain institutional barriers so that students will have a stronger sense of the entire School as a resource that can help them make the most of their education.

We hope that this sense of being part of a larger academic team will inspire all of our students to problem-solve and initiate, and to reject the practice of just waiting for opportunities or solutions to come along.

Many members and supporters of the NUS have taken on responsibilities well beyond those required by our constitution, and often without formal recognition. I would like to take this opportunity to acknowledge the hard work that everyone has put into the NUS this year and the sacrifices they have made. This includes faculty members, the volunteers on our various committees and our two non-official NUS members. All of you have been vital to the NUS’s successes. Thank you.

Many would agree that the nurses most looked up to are those who are never content with the bare minimum and who also have a true team spirit. These nurses may not always choose the most direct methods, but they always achieve the most, and do so with flair and a real appreciation for the people around them. Such a love of life is contagious and refreshing. I believe that the NUS this year has demonstrated that as a team we can achieve so much more than what our titles demand of us, weakening the stereotyping that can hold us back. This is a message that my colleagues and I will carry with us throughout our nursing careers.

It gives me great pleasure to say that the newly elected 2006–07 NUS team is eager to start its term. These people already have wonderful ideas, and as a team they seem to have limitless energy. I have no doubt that they will meet the challenges they face and achieve great things. I wish them every success in this most rewarding experience.

David Klinkusoom
NUS President, 2005–06

BScN Class of ’65
Still Going Strong

After 40 years, the “Bluebirds” returned to McGill to celebrate our first-ever class reunion. Due to much detective work by Roz Paris, we were able to locate all nine surviving members of the 1965 class (two graduates have died). We had scattered all over North America, and one graduate (Joan Hawthorne) we found near Perth, Australia.

After much planning and e-mailing back and forth, we managed to get together for an October weekend in Mont-Tremblant, Quebec. The weekend began with a small reception at the School of Nursing, and it was there that we saw each other for the first time in four decades. We discovered that we were all fit and healthy and all still working, most of us in nursing. We laughed, hugged, chatted, and met some of the School’s faculty and staff members. We then headed north to a comfortable condo for our “retreat.”

The BScN class of 1965 with members of the McGill faculty
Standing, left to right: Barbara Rowat, Marilyn Adderley, Roz Paris, Elke Seibert, Dorothy Gonder, Joan Hawthorne, Evie Monk, Reet Karu, Betsy Rowzee
Not pictured: Jill McMurtry, Beverly Rowat
That weekend we had the most amazing “group” experience, helped by the fact that three of us have worked in group, family or individual counselling. We shared our personal experiences of the last 40 years and reminisced about our five years together at McGill (having predated the introduction of the CÉGEP system). We were struck by the depth and significance of these roots. We even took great pleasure in escorting Dorothy Gonder to a lingerie shop in Mont-Tremblant for her wedding gift. Dorothy will definitely have something to remember us by.

We all had at least one thing in common — a dislike for our blue school uniform (hence the Bluebirds moniker), designed by Moyra Allen. Some of us remembered being mistaken for elevator operators at the hospitals. And being only the fifth BScN class to graduate, we were often viewed by the other nurses as “theoretical” nurses lacking in clinical skills.

In those days nurses would often stand when a doctor entered the nursing station. At McGill we were told this wasn’t expected, so we always remained seated — which caused some backlash and contributed to our sense of being nursing pioneers. Some of the fears and intimidations we experienced as students were left unshared at the time. Although we could laugh about them now, we did agree that present-day students should have some means of discussing their concerns as a group.

We have all led full and active lives, experiencing the death of loved ones, divorce, childrearing and remarriage. Marilyn (Adderley) Willis has a master’s in nursing and is Project Manager in Cancer Research Studies at the University of Illinois in Chicago. Marilyn was unable to attend the reunion but spoke to all of us by phone from Australia.

Evie (Monk) Wallace, our class president, has been a group therapist with the Calgary Health Region for the past 25 years and is a member of the faculty of the Group Therapy Training Program. Evie has two daughters and a son.

Roz Paris has a master’s degree in nursing from McGill and works as a Clinical Nurse Specialist in the Menopause and Chronic Pain clinics at the SMBD–Jewish General Hospital in Montreal. Roz has two daughters.

Barbara (Rowat) Flam has a master’s degree in nursing from McGill. She taught nursing in the School of Nursing for four years and at Dawson College for many more. Barbara retired last year but substitute teaches part time when not playing golf. She has a son and a daughter.

Beverly Rowat has a master’s degree in nursing from McGill. She taught nursing at Vanier College for many years and then served as a research coordinator for the McGill Faculty of Medicine. Bev is now Clinical Placement Coordinator at the School of Nursing.

Betsy (Rowzee) Williams has worked for the last 14 years as a geriatrics nurse for the State of Maryland, doing home assessments. Betsy has a son and a daughter.

Elke (Seibert) Haas worked in nursing for 10 years, raised two girls full time and is now a buyer for an antique shop. She gardens, cooks and hikes. Elke lives in South Carolina.

All in all it was a most unforgettable weekend. With a menopause nurse specialist and three therapists among us, one can imagine the lively discussions about our bodies, sexuality and aging. We discovered LOINS (loss of inhibitory neurons syndrome), which really means putting your foot in it, and Vagi-Fem, which needs no explanation!

Yes, those were the days, my friends. And we won’t be waiting 40 years before having our next reunion.

Beverly Rowat
Class of ’65
Master's Program

In 2005–06 the second-year revisions to the master's program were phased in. Four new courses were introduced: Clinical Reasoning, Advanced Assessment, Ethics in Advanced Practice and Role Development. There were times when the changes felt overwhelming for both students and faculty, but our pioneer graduates of 2006 have set high standards for those who follow. One of these graduates, Irene Sarasua, spoke eloquently of their goals and achievements in her valedictory address to the graduating class at the Health Sciences convocation.

The Neonatal Nurse Practitioner program, a stream within the master’s program, is now phasing in the last segment — the Practitioner Internship. The success of the program is a result of collaboration between the Montreal Children’s, Royal Victoria and SMBD–Jewish General hospitals. The work of the neonatologists and the neonatal nurse practitioners in building the content of the program and facilitating the students’ learning has been a fine example of interprofessional education and practice. Our thanks go to Carol Ann Sherman for her wisdom and experience in walking with all of us through this process.

There is increasing demand in Quebec for nurse practitioners with the knowledge and skills needed to deliver primary care and to help people manage chronic illness. We shall be developing a program for Nurse Practitioners in Primary Care with the Université du Québec à Abitibi over the coming year, and hope to offer it as an extension program to students in the region served by that institution.

Over the past several years, Direct Entry students have been the largest cohort in the master’s program. This year we will also have a significant number of students entering with a bachelor’s degree in nursing. The larger class size and the need to reach students at a distance are challenges that will require new teaching strategies, to ensure that we maintain the dialogue that is such an important feature of graduate studies.

Congratulations to the following award winners among our master’s students: Natalie Anderson, Judy Bianco, Natacha Bielinski, Naomi Burton Macleod, Patrycja Chojecki, Agnes Dzialo, Katherine Logue, Maria MacDougall, Misty Mallot, Caroline Marchionni, Amy Nyland, Anelise Santo, Irene Sarasua, Geneviève Tousignant and David Wright. They are recipients of Nursing Alumnae awards, the Maimonides Fellowship, the Nessa Leckie Memorial award, FERASI fellowships, the Irma Riley Fellowship, a McGill Graduate Studies Fellowship and Faculty of Medicine summer bursaries.

Hélène Ezer
Assistant Director, Master's Program

Master’s of Nursing Students’ Colleagueship

It has been an exciting year for the McGill Master’s of Nursing Students’ Colleagueship. We kicked off the 2005–06 school year with our annual welcome wine and cheese party for graduate students and faculty members. The event was very well attended and gave faculty members and students a chance to meet again or for the first time and to whip up lots of enthusiasm about the year ahead.

On October 2 members of the Colleagueship put together a team to participate in the CIBC Run for the Cure to raise money for breast cancer research. It was a beautiful day and a great way to take part in health promotion at the community level. In December we had a wonderful potluck party at Thomson House to celebrate the end of the semester and the start of the holiday season. Colleagueship members showed up en masse to enjoy homemade dishes, good music and a little dancing. The Colleagueship also held a fundraising
raffle, with more than $100 being raised for educational and social events within the organization.

The year 2006 got off to a great start. In January the Colleagueship introduced a Nursing Career Month for graduate students, an event aimed at facilitating the transition from graduate nursing student to practising nurse and at helping students to develop their personal career goals. This exciting endeavour began with a panel discussion during which graduates Joanna Bailey, Min Dumas and Charlotte Evans shared their personal experiences with licensing, job searching and starting their first nursing job. We then heard speakers from the MUHC Human Resources Department, the Ordre des infirmières et infirmiers du Québec, the Canadian Nurses Association, and McGill’s Career and Placement Services, as well as a talk by the School of Nursing’s Nurse Practitioner, Carol Ann Sherman.

The Colleagueship was also involved in planning the Third Annual Interprofessional Health Conference. Students from all health disciplines came together to organize this event, which is designed to educate students in the value of interprofessional practice and in integrating interprofessionalism into their clinical practice. Speakers from Health Canada, Montreal hospitals and McGill University spoke about interprofessional practice initiatives at the federal, hospital and university levels. The event concluded with groups of students from the various disciplines discussing case studies as a way of fostering appreciation for the unique role of each profession.

Overall, the Colleagueship had a busy and successful year. Our last event, a year-end get-together in the spring, was an opportunity for faculty members and students from all years of the program to come together and enjoy some delicious food, fond memories and good company in celebration of another year at the School of Nursing.

Natalie Anderson
Ashley O’Dacre
Colleagueship Co-presidents, 2005–06

From Strength to Strength: MScA Students Build on Each Other’s Work

“Protecting Patient Safety, Cancer Care and Quality Initiatives: International Perspectives and Across Care Settings” is the theme chosen by the editors of the *Journal of Nursing Care Quality* for three articles describing the work of McGill MScA students.1 These students — Meera Burney, Iris Gourdji and Joanna Bailey — have gone on to establish careers in the McGill health-care network; however, they have broken new ground for students interested in studying patient satisfaction and publishing the results of their work in order to improve the quality of care delivered to patients and their families.

Situation-responsive nursing is an important element of the McGill Model of Nursing. Responding to the unique needs of patients, their families and patient populations in general is at the heart of continuous quality improvement (CQI) activities in university teaching hospitals.

“Traditionally, knowledge to guide improvement came predominantly from randomized controlled trials, considered to be the gold standard of research evidence.”2 It has been proposed, however, that when one is trying to improve a complex system, perfect inference, randomization, power calculations and large samples are not necessary.3 CQI methodology was developed to accelerate and support change in actual settings. The most commonly employed model for improvement is described by Langley et al. in *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance*.4 The four simple steps in the PDSA (Plan Do Study Act) cycle are inherent in this model: plan a change, implement the change, study the results and act on the results. This cycle inextricably links small-scale changes and the measurement of their impact.

Given the increasing interest in service quality from the standpoint of the user, patient satisfaction is frequently being employed as an outcome indicator in quality improvement initiatives. Self-administered surveys are the most widely used and convenient means of assessing patients’ evaluations of their health care.5 Each of the three articles published by the McGill MScA students reports the results of satisfaction surveys. Each student had also identified what was most important to patients in order to modify the care environment for enhanced patient satisfaction and
quality of care. In each instance, aspects of care that patients had identified as important and as unsatisfactory were highlighted and interventions to improve patients’ experiences were developed. For example, nurses spend much time instructing cardiac patients in lifestyle adjustments at the time of their discharge from hospital. However, when patients’ were asked if they were satisfied with the information they had received at the time of discharge, they stated that they felt inadequately prepared for the challenge of returning home following hospitalization for a heart attack. Nursing interventions were then adjusted to incorporate this new information, resulting in greater satisfaction of cardiac patients and their families upon the return home from hospital.

Each year, McGill MScA students have been building on the previous year’s work, which has led to greater understanding of patients’ experiences in hospital. Students currently in the program are conducting targeted patient focus groups and repeat patient satisfaction surveys, thus building on the work of previous students and contributing to improvements in the quality of hospital care being delivered to patients and their families.

The McGill School of Nursing, its network of clinical adjunct faculty and the hospital staff who have worked with the students should take pride in their contribution to the preparation of a new generation of nurses dedicated to continual improvement in the care offered to patients and their families. This new generation of nurses, with their enhanced understanding of CQI methodology, have the tools necessary to guide quality improvement initiatives in order to best respond to the needs of patients and families.

**Lynne McVey**
Director of Nursing and Co-chair, Quality and Risk Management Program, SMBD–Jewish General Hospital

**International Advisory Committee and Global Health Studies**

In 2005–06 the International Advisory Committee concentrated on getting the Global Health Studies section of the master’s program up and running. This option is meant to help students both broaden their understanding of and develop a critical perspective on nursing in a global context. Through certain course electives, students will have the opportunity to explore a range of topics, including maternal/child care, health in developing countries, nutrition, tropical and infectious disease, medical anthropology and cultural geography. In addition, through an overseas clinical practicum, students will have an opportunity to broaden their knowledge and skills around the practice of nursing overseas.

The Global Health Studies section was developed by the IAC and approved by the faculty of the School of Nursing in summer 2005. This year the focus was on offering incoming students an opportunity to apply to the section while ensuring that adequate support is available to them throughout their program of study. In the past year the IAC also jointly supported (with fourth-year bachelor’s students) the fifth Health Knows No Boundaries international evening, which attracted several dozen students.

The IAC’s monthly Brown Bag Lunch also became a joint event this year, with the McGill Nurses for Global Health. These monthly meetings feature informal talks on issues ranging from nursing in Northern Canada to ethics in the French health-care system. The IAC looks forward to continued participation in activities such as these in the years to come.

For further information about the IAC or the Global Health Studies option, please contact the IAC at globalhealth.nursing@mcgill.ca

**Anita Gagnon**
Chair, International Advisory Committee

**McGill Nurses for Highlands Hope**

The McGill University School of Nursing has taken a particular interest in health issues facing the Njombe and Makete districts of Tanzania since my visit there in January 2006. I was part of a group that also included Dr. Norbert Gilmore (an AIDS expert within the McGill community), Dr. Roy Baskind (then a resident at the Montreal Neurological Institute), Terry Mosher (a.k.a. Aislin, the political cartoonist) and Royal Orr (a journalist and chair of Canadian Friends of Highlands Hope). Nestled in the Highlands of Tanzania, this beautiful area looks much like the Highlands of Scotland. Unfortunately it is one of the poorest parts of the country and also has the highest incidence of HIV/AIDS infection.

While the people of the region display particular determination and integrity, many of their basic and practical needs are left unmet and thousands of orphans have had to cope with loss and uncertainty. Highlands Hope is a network of three small hospitals and HIV/AIDS clinics — in Bulongwa, Njombe and Ikonda. The health-care teams, made up mostly of nurses, are struggling to meet the many demands for health services. They have only recently begun to provide antiretroviral treatment (in Canada such treatment was begun more than 15 years ago).

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While this therapy is long overdue, its positive results have meant that more and more people are using the Highlands Hope network.

McGill Nurses for Highlands Hope was founded to foster relations and support between the School of Nursing and the Highlands Hope network. Several projects are underway, including sponsorship of Njombe's Betty Liduke at the International AIDS Conference held in Toronto this past August. Mrs. Liduke, a nurse, has been instrumental in ensuring that health promotion and illness treatment activities reach individuals and their families. Attendance at the AIDS conference provided her with an opportunity to validate her own program as well as gain new insights.

The School of Nursing was thrilled to host Mrs. Liduke at an event where she shared her nursing challenges with us.

Our first McGill Nurses for Highlands Hope Fellow, Christina Clausen, is currently in Tanzania collaborating with members of the consortium. Her work there will facilitate the entry of nursing students to the area; in fact we are hoping to send at least two students from either our Global Health nursing program or our Nursing Internship program to Tanzania in 2007.

A highlight of our fundraising year was a generous donation by the students of St. George's Elementary School in Montreal. Within a very short period these children raised almost $2,500 to help purchase a pediatric-sensitive CD4 machine. Until now there has been no testing or treatment of children under two years of age because of a lack of this basic resource.


Anyone with a particular interest in health care and nursing issues in Tanzania is encouraged to join McGill Nurses for Highlands Hope by contacting me at 514 398-4155 or at madeleine.buck@mcgill.ca

Madeleine Buck
Faculty Lecturer

A typical Highlands Hope hospital in Tanzania

Doctoral Program

We are pleased to announce that Margot Latimer successfully defended her dissertation, The Examination of Individual, Nurse and Organizational Factors Associated with Effective Pain Care in Hospitalized Infants, on June 13, 2006 (supervisor: Celeste Johnston). Congratulations to Dr. Latimer. We wish her much success in her future endeavours.

Over the past three years, students successfully defended their research proposals. These are Susan Gillam, Expecting to Quit: An Implementation Evaluation of a Smoking Cessation Program for Pregnant and Parenting Women, on November 28, 2005 (thesis advisor: Anita Gagnon); Sylvie Dubois, The Role of Informational Support in Relation to Health Care Service Use among Individuals Newly Diagnosed with Cancer, on December 19, 2005 (thesis advisor: Carmen Loiselle); and Mae Gallant, An Exploratory Study of Nurse-Client Partnership in the Context of Diabetes Mellitus Illness Management, on July 20, 2006 (thesis advisors: Marcia Beaulieu and Frank Carnevale). We commend these students on completing this important phase of their dissertation work and wish them success in carrying out these significant studies.

Students have been conscientious about disseminating their work. School of Nursing students are either the first author or a co-author of 12 articles published in 2005–06 or currently in press, in such journals as Aboriginal Health, Acute Pain, Nursing Management, Professional Nursing, Nurse Educator and Maternal and Child Health Nursing. In addition, two book chapters were accepted for publication and 10 papers were presented at the national meetings of six organizations, including the Canadian Pain Society, the Canadian Association of Psychosocial Oncology and the Canadian Public Health Association. Three students presented a total of 10 papers at three international conferences, including the Ninth International Nursing Research Conference, held in Madrid, and the
McGill students excelled once again this year in obtaining funding. New or renewed awards were granted to the following students: Marilyn Aita, FRSQ fellowship, GRISIM research award, and awards from the Canadian Nurses Foundation and the Hospital for Sick Children Foundation; Alain Biron, FRSQ fellowship, FERASI fellowship, GRISIM research award, FERASI travel grant, and awards from the MUHC Research Institute and the Canadian Nurses Foundation; Janet Bryanton, research grant, University of Prince Edward Island; Marsha Campbell-Yeo, GRISIM doctoral fellowship and Nova Scotia Health Research Foundation award; Lisa Chan, Maysie MacSporran graduate studentship and CIHR Strategic Training Grant in Palliative Care; Sylvie Dubois, Ordre des infirmiers et infirmières du Québec scholarship; Lisa Keeping, GRISIM doctoral fellowship; Sylvie Lambert, CIHR fellowship, PORT travel grant and Maysie MacSporran graduate studentship; Margot Latimer, FERASI fellowship; JoAnn MacDonald, Canadian Nurses Foundation Nursing Care Partnership award and P.E.I. Health Research Program fellowship; Anita Mehta, CIHR Strategic Training Grant in Palliative Care; Dianne McCormack, GRISIM research award and Canadian Nurses Foundation award; Marie-Claire Richer, Academy of Canada Executive Nurses scholarship and Research Institute of MUHC award; and Isabelle St-Pierre, FERASI fellowship. We congratulate these award recipients on their outstanding achievements.

Margaret A. Purden
Academic Coordinator, PhD Program

PhD Student Committee

Many exciting events were undertaken by the PhD Student Committee during the 2005–06 academic year.

In fall 2005 we held a welcome luncheon where new students met informally with current students and discussed issues related to commencing doctoral studies. Many tips and recommendations were happily shared and gratefully received. With the collaboration of faculty, we held a workshop on how to prepare applications for grants and fellowships. In addition, this year our committee provided some financial support, through funds allocated by the School of Nursing Alumni Association, to doctoral students participating in national and international scientific meetings and conducting their dissertation research.

Also in fall 2005, we initiated a research luncheon, in collaboration with GRISIM (Groupe de recherche interuniversitaire en soins infirmiers de Montréal), where students from McGill University and the Université de Montréal meet to discuss various research projects and activities.

These luncheons have constituted a roundtable for doctoral students to become more aware of the different research-related activities being conducted at the two universities. Thank you to all participants.

Sylvie Lambert and Alain Biron
Student Representatives

Anita Mehta
Treasurer,
PhD Student Committee

The McGill Directors of Nursing Network

The McGill Directors of Nursing Network met at the Shriner's Hospital three times over the course of the past year (November 30, 2005, January 27, 2006, and February 24, 2006). The meetings were organized by Sharon Brisette, Director of Nursing at the Shriner's Hospital.

The membership of the committee was expanded to include Madeleine Boulaiy-Bolduc, Associate Director of Nursing for the MUHC, who is the nursing representative on the McGill Réseau universitaire intégré de santé (RUIS) Committee. Johanne Desrochers, Associate Director of MUHC Telehealth, was invited to participate as an ex-officio member in order to keep us abreast of developments in telehealth.

Two major issues were discussed at the meetings. The first was the roles of Directrice des soins infirmiers (DSI) and Responsable des soins infirmiers (RSI) in the Réseau. To help us with our deliberations, we invited Sylvie Hains, nursing representative at the ministry of health, who shared with us the vision of the ministry and her role within it. The second issue was the mandate and membership of the McGill network forum given the development of the concept of RUIS by the ministry and the many DSI or RSI in the McGill Réseau who currently are not members of this forum.

Diane Borisov
Chairperson,
McGill Directors of Nursing Network
Health Care Reform and Nursing

The development of clinical practice in nursing has always been a priority of CLSCs, as indicated by the existence of RSI (Responsable des soins infirmiers) positions. With the new health-care reform in Quebec, most CLSCs have been merged with hospitals and other health-care institutions to form a Centre de santé et de services sociaux (CSSS).

The CSSS de la Montagne is the result of a merger of three CLSCs: Côte-des-Neiges, Métro and Park Extension. Unlike other CSSSs, this one comprises only frontline community services, with no hospitals or long-term-care establishments. It has chosen to move into health-care reform and create the position of Nursing Director as well as Nursing Advisor positions.

Each nursing advisor is responsible for one area of expertise among the following: Professional Development, Chronic Illnesses, General Care and Physical Health, Palliative Care and Mental Health. The nursing advisors work with the nursing team leaders, who are ultimately responsible for training and supervising clinicians. The health-care team also includes a nursing coordinator assigned to the department of prevention and health promotion; this nurse is responsible for infection prevention as well as for implementation of the local action program (PAL). The nursing advisors will be involved in establishing service “corridors” for specific health conditions (heart failure and cancer, for example) between the CSSS and several hospitals in the area.

The main responsibilities of the advisors and clinical specialists are to ensure continuity in clinical practice across all programs and to ensure the standardization of work processes and approaches. The advisors also will be involved in developing protocols and procedures, identifying training needs, and developing quality indicators. A training laboratory will be set up so that nurses can learn new techniques and new technology and how best to integrate these into their work.

The CSSS de la Montagne is affiliated with McGill University and therefore offers internships in most of its programs. The new nursing department will benefit junior nurses as well as students.

Aline Bourgon
Director of Nursing, CSSS de la Montagne

Kristine Vitez
Teaching Coordinator, CSSS de la Montagne

Marketing and Recruitment

This proved to be another exciting year for the School of Nursing in the area of marketing and recruitment. Our goal was to increase interest in the nursing profession, and more particularly the many wonderful opportunities that a McGill nursing degree can offer. With that in mind, we continued to work on previous marketing and recruitment efforts and looked for new and interesting ways to promote our great programs.

As always, the School was present at a number of CARAVAN visits. These visits are organized by the main recruitment office of the university and entail the presence of various McGill faculties and departments at CÉGEPs in the Montreal area. They allowed us to target nursing and non-nursing...
students in both francophone and anglophone institutions. Interest during these visits was impressive. Questions flowed, as did requests for information packages and interviews.

The School also participated in the annual Salon de l’Éducation, held in the Place Bonaventure exhibition hall. This event was attended by hundreds of students, mostly from high schools and CÉGEPs. Information packages were distributed by the boxful, and students’ queries regarding all of our programs (including the master’s and doctoral programs) were addressed in detail. Particularly interesting at this event were queries from internationally trained nurses wishing to obtain licensing and higher education in Quebec.

A new addition to the program this year was participation in the Nurse Educators Conference organized by the Canadian Association of Schools of Nursing. The conference, which was co-hosted by the McGill and Université de Montréal nursing schools, was held at the Hilton Bonaventure Hotel in downtown Montreal. The event saw nurses from across the country come together for the purpose of improving nursing education. As most of the attendees were bachelor’s-prepared RNs, marketing and recruitment efforts were focused on our postgraduate programs.

As a bonus, a representative from C/NR, the nursing research journal published at McGill, was present in order to promote this quarterly publication as well as books and other works authored by School of Nursing faculty members. Interest in our programs and publications ran high, making this a worthwhile venture.

As always, one of the most productive and successful events was the annual McGill University Open House, held in late January. Thousands of high school and college students from across North America attended, and with the help of student volunteers from our various programs, potential nursing students were greeted enthusiastically.

The presence of Myelo Wilson, our anatomically correct skeleton, a cardiac model and a pregnancy model, as well as videos and PowerPoint presentations, ensured that interest in our kiosk remained at a constant high. Finally, as usual, a raffle was held; interested students provided us with their contact information as well as the programs that interested them, in exchange for a chance to win a gift certificate for the McGill bookstore. This feature allowed us to gauge interest in our various programs. According to return volunteers, interest at this year’s event was up from that of previous years.

A new member of the Marketing and Recruitment team is Santiago García, an MBA student from Colombia hired via the Work Study program as the School’s Marketing and Recruitment Coordinator. Santiago spent the year preparing materials and diligently answering questions from potential students via e-mail.

Finally, a proposed new Marketing and Recruitment initiative has been well received by the administration of the School of Nursing. It entails contacting various Montreal-area high schools and offering them the opportunity to have a representative of the School visit their upper-level classes. This endeavour is intended to stimulate interest in the nursing profession as a whole while also giving us a chance to answer
students’ questions and to debunk any misconceptions they may have about the profession. These visits would also serve to foster interest in our specific programs and the many career opportunities offered by a McGill nursing degree. Finally, targeting nursing students early on would enable us to better guide them as they prepare to enter our programs. By outlining requirements, especially in mathematics and the sciences, we could help students to qualify for entry to our programs. Although this new initiative has yet to be implemented, we hope it will be met with enthusiasm.

The Marketing and Recruitment team is always looking for fresh new ideas and opportunities. If you have any suggestions, please do not hesitate to contact us at recruitment.nursing@mcgill.ca

Laurie Barkun
Student Recruitment Officer,
2005–06

McGill takes great care to show its appreciation to everyone who makes a donation to the University. Planned gifts often go unrecognized while the donor is alive, however, because the University is not aware of the gift.

If you have made a provision for McGill in your estate plans, we invite you to join the McGill University 1821 Society. Bequests and other planned gifts have always played a vital role in helping McGill remain strong. The Society’s name recognizes the very first such gift, made by fur merchant James McGill, which resulted in the creation of the University itself in 1821.

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www.mcgill.ca/alumni (click on “Giving to McGill” then on “Planned Giving”)
2000s

Stéphan Johnson BScN ’05
Since July 2005 Stéphan has been working on 4 Surgery at the MUHC–Montreal Neurological Hospital, where he had been a student and then an extern. He enjoys being part of a multidisciplinary team and is gaining valuable experience. Stéphan recommends this unit to new graduates.

Raleen Murphy MScA ’04
“In November ’05 I started a full-time job on a neurosurgery unit at the Queen Elizabeth II Hospital in Halifax…after working at the MUHC–Montreal Neurological Hospital for one year. We care for a diverse group of patients and their families, including those who have had major back surgery, craniotomies for brain tumours, trauma patients with closed head injuries/traumatic brain injuries, spinal fractures, seizure patients undergoing telemetry to identify seizure brain activity, as well as stroke patients. Our floor also has a four-bed Intermediate Care Unit…for acutely post-operative patients…I had a two-week training course for this unit. I am on the planning committee to develop a patient care delivery model for my unit. It is interesting and exciting to work on such a fast-paced unit and I am looking forward to becoming more involved in making innovative improvements to the way we deliver nursing care.”

Suzanne Do-Davoll MScA ’00
In December 2004 Suzanne and her husband became the proud parents of a healthy baby boy. Suzanne returned to work at the MUHC–Montreal Neurological Hospital, 4 Surgery, in April 2006.

Anita Mehta MScA ’00
Anita gave birth to a 7.1-pound (54-cm) boy, Shaan Kumar Kumarsingam, on July 6, 2006. Congratulations to Anita and Satheesh on the birth of their son!

1990s

Stephano P. Tedeschi BScN ’99
Stephano recently obtained a graduate degree in Nursing Administration and started a new job as Clinical Advisor Specialist for the Nursing Directorate of the Douglas Hospital in Montreal. He began studying for his PhD in September after receiving the FERASI award for doctoral studies in Nursing Administration. His decision-maker partner is also at the Douglas Hospital. Stephano has been married for two years to Nadia Orsini, who works in the McGill Alumni Department.

Tiffany Duckworth Farrell BScN ’95
“I am working as a Clinical Practice Specialist at Sarasota Memorial Hospital in Florida. It is a new formal educator role that has been established
here for each nursing unit to support our professional growth as a Magnet organization. We achieved Magnet status from the [American Nurses Association] in 2003. As we are not an official teaching hospital, we are in the beginning stages of finding our professional nursing voice. It’s great fun to be a part of SMH at such a pivotal time for our profession.”

Vicky Ouimette BScN ’95
“Current position: Head Nurse of the post-partum and intermediate care nursery at St. Mary’s Hospital. We are working hard toward achieving recognition from the [World Health Organization] and UNICEF as a Baby Friendly Hospital by 2007. We will be the first hospital of this scale (3,600 births/year) in Montreal. Since 2000, we have supported the training of 12 nurses to become board certified lactation consultants: a full year of study compensated as one day/month of paid study guided by a consultant. Starting in the case-room we have changed many of our practices to implement the 10 steps to becoming Baby Friendly. This initiative is helping our new mothers in their efforts to breastfeed, which in turn increases their children’s general health. It is a major health promotion initiative.”

Rosa Sourial MScA ’92
Rosa was recently appointed Quebec representative on the National Stroke Nursing Leadership Forum of the Canadian Stroke Network. She has been a Clinical Nurse Specialist in the cerebrovascular program of the MUHC since 2001.

1980s
Diane Lowden MScA ’88
Diane is currently President of the International Organization of Multiple Sclerosis Nurses, which has close to a thousand members from 29 countries. Her term is for two years. Diane is a Clinical Nurse Specialist in the multiple sclerosis program of the MUHC–Montreal Neurological Hospital.

Dale J. Gordon MScA ’82
Dale works as a family Nurse Practitioner for the Aroostook Band of Micmac Indians in the state of Maine, where Nurse Practitioners won their independence in 1996. She “moonlights” in the local emergency department.

1960s
Mary Ellis BN ’67
Mary Ellis has retired.

Bette Dawn Brown BN ’65
Bette is retired and lives in a seniors’ complex. She is very thankful for the education she received at McGill.

For more news on 1960s grads, see the article on the BScN class of ’65 on page 12.

In Memoriam
Patricia Anne Hall BN ’69
Patricia Anne Hall passed away at the Sunnybrook Health Sciences Centre in Toronto on August 1, 2006. She will be missed by her many friends and colleagues in the Ontario health-care community.

Allison (Cleland) Minard Dip Nurs T&S ’52
Allison Minard passed away on November 1, 2005, at the Wolfville Nursing Home in Wolfville, Nova Scotia. She was always proud of her association with McGill and enjoyed attending her class reunions.

Mary June (Frost) Provost MScA ’72
During her 40 years at St. Mary’s Hospital in Montreal, June Provost was a friend to countless patients and colleagues. She died in 2006, leaving a husband, four sons and five grandchildren.

Janet Margaret Wood BN ’68
After working as a Clinical Nurse Educator at the Montreal General Hospital, Janet Wood taught nursing at John Abbott College for 25 years. She also served as Coordinator of the James Bay Nursing Project, which grew into the Cree Student Support Service. She died at the Lakeshore General Hospital on September 7, 2006.

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### What’s New with You?

Have you moved? Been promoted? Changed careers?
The Alumnae Association welcomes updates from graduates of the School.

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