



McGill

School of Nursing

Leading the way

2004 - 2005
NEWSLETTER

A Word from the Director

THE PAST YEAR WAS A TIME OF CHANGE for the School as we welcomed the first cohort of students from the integrated BN program and increased our enrolment substantially in the BScN and Direct Entry Master's programs. This year also saw the commencement of a number of research initiatives, including Groupe de recherche interuniversitaire en soins infirmiers de Montréal (GRISIM) and Psychosocial Oncology Research Training (PORT). We are bursting at the seams, but it is a wonderful experience to have so many students enrolled and to have dynamic student societies at all levels.

Although a new building for the three professional schools within the Faculty of Medicine is a priority of the university, support from the Ministère de l'Éducation, du Loisir et du Sport (MELS) has yet to be received. The large class sizes (we anticipate 150 students entering the undergraduate program in September 2005, a long way from the 43 in 2000–01) are presenting challenges in terms of finding appropriate classrooms, and we are unable to accommodate some of our research — for example, GRISIM is located off-campus.



Susan E. French, Director, 2001–05

The cost of nursing education, especially the clinical component, and faculty renewal, which are central concerns of the School, are shared by the other universities in Quebec. We participated in the development of proposals to the MELS requesting funding for nursing fellowships and monies to cover the cost of clinical education. Negotiations are continuing. Thanks to the Newton Foundation, McGill and the Université de Montréal were provided with the services of a consultant to identify the actual costs and academic resources required. That initiative has led to a formula that has been tested at the two universities and, after further testing at selected universities, will be shared with others across the country. The increased enrolment is straining our clinical resources and we were delighted when the McGill University Health Centre (older alumni may remember the individual parts — the Royal Victoria Hospital, Montreal General Hospital, Montreal Neurological Institute, Montreal Children's Hospital and Montreal Chest Institute) developed a computerized information system that identifies clinical sites and number and level of students that can be accommodated. The two clinical placement officers, Wendy Higden and Beverly Rowat, are doing a fantastic job in meeting the challenge of locating and maintaining suitable placements for the students.

Mélanie Lavoie-Tremblay, Université Laval, postdoctoral fellow with Linda O'Brien-Pallas, University of Toronto, joined the academic staff in January 2005. Her research interests concern the nursing work environment. Dr. Lavoie-Tremblay now represents the School with respect to the tri-university initiative Training and Expertise in Nursing Administration (Formation et expertise en recherche en administration des services infirmiers, or FERASI).

The School has welcomed two postdoctoral fellows, Sylvie Lemay and Céline Gélinas, who are studying with Celeste Johnston. Dr. Johnston, who holds an internal award, a James McGill professorship (equivalent to a senior Canada Research Chair), was recognized as one of six inaugural Mayday Fellows for Pain Advocacy — and the only Canadian — from September 2004 to March 2005.

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She was also admitted as a Fellow of the Canadian Academy of Health Sciences. In 2005 Anita Gagnon received an internal award, a William Dawson Scholarship (equivalent to a junior CRC). A third faculty member, Carmen Loiselle, received a Fonds de la recherche en santé du Québec career award. The success of our small number of tenured and tenure-track faculty in receiving career awards and operating grants is testimony to the quality of the research being conducted at the School.

Madeleine Buck, a full faculty member, was awarded a Teaching Scholarship by the Faculty of Medicine Teaching Scholars Program. Recently, McGill's proposal for interprofessional education for collaborative family-centred practice was successful in the Health Canada competition. This news was greeted enthusiastically at the School, where faculty members and students have been at the forefront of interprofessional initiatives, with Margaret Purden serving as co-principal investigator for the Health Canada project. Finally, publication of the textbook *A Collaborative Partnership Approach to Care* was a long-awaited event. Congratulations to the authors, Laurie Gottlieb and Nancy Feeley with Cindy Dalton.

The global health option in the graduate program is a response to our students' interest in that area. In 2004 we began to explore possible collaborative linkages with universities in China. News on that initiative will be published in the next issue of the newsletter. The relationship between a major hospital in Shanghai and the School and MUHC continues to flourish. McGill's unique approach to nursing and the integration of nursing education, research and practice that is one of its hallmarks have attracted the attention of a new college in Japan and linkages between the two institutions have been established.

In 2004 the School formed a consortium with nursing at the MUHC and at CLSC Côte-des-Neiges and, with support from the Newton

Foundation, joined the Secrétariat international des infirmières et infirmiers de l'espace francophone (SIDIIIEF), an international nursing organization founded in 1998 under the leadership of the Ordre des infirmières et infirmiers du Québec (OIIQ), the province's regulatory body and professional association for nursing. Membership in SIDIIIEF reflects a commitment to promoting nursing in both English- and French-speaking communities around the world.

The health-care system in Quebec has been reorganized around the four medical faculties, and each of the universities has a catchment area, referred to as Réseau interuniversitaire intégré de santé (RUIS). The Director of the School (or a designate) now sits at the McGill RUIS table. The McGill RUIS is a large geographic area covering part of the Island of Montreal and a large portion of western and northern Quebec. Additionally, a system of CSSSs (Centres de santé et de services sociaux, or Health and Social Service Centres) has been established. This reorganization has implications for the School. The School and the McGill Nursing Network are exploring specific educational initiatives to ensure that populations in more distant areas have access to quality health services.

The School has been fortunate in receiving the support of alumni and of special donors such as the Newton

Foundation. The Alma Mater Fund is used primarily to support students and student-related activities. In June 2004 the School hosted a workshop on problem-based learning under the leadership of Catherine Tompkins from McMaster University. That workshop was made possible by a bequest from Eelen T. Newton. Regrettably we had to discontinue hosting the annual Joan Gilchrist Nursing Explorations conference; the expenses associated with this event exceeded the available income and administrative services. Funding for professional development from the Newton Foundation was used to support the attendance of faculty members at national/international conferences and to invite guest speakers to McGill in the fall of 2005.

An Advisory Board has been established to assist the Director in promoting the mission, plans and priorities of the School. This body is a source of ideas and support for the development of the School as well as serving as a sounding board for the Director. The Board's eight members bring interesting and diverse perspectives to its deliberations, as they represent the broader community, academia, business, health-services development and nursing.

I have had the privilege of being the Director of the School of Nursing for the past four years in a wonderfully supportive environment. It has been a time of change and opportunity for the School. I have immensely enjoyed my work with students and colleagues at McGill and in the McGill Network, at other universities and within the OIIQ. The search for a new Director is in progress. I look forward to following the future developments of the School and nursing in Montreal and Quebec from Halifax and the shores of the Atlantic.

Susan E. French

Susan E. French
Director, School of Nursing
Associate Dean, Medicine
2001-05



Laurie Barkun, 2004 Scarlet Key recipient

A Word from the Alumnae President

Once again I wish to say thank you very much to all the alumnae and alumni who continue to support the School of Nursing. Your gifts are important. I have heard from many of you how much you enjoyed reading in the last newsletter about the impressive achievements of the School and its world-class faculty.

The good news continues in this issue. The excellent nursing education that we received here is a goal that more and more students are striving towards, and your contributions help to make this possible.

At a memorable reception last November, Susan French and I were happy to present Alumnae awards to 16 very deserving nursing students from the BN, BSc(N), MSc(A) Direct Entry and MSc(A) programs. We offer our congratulations and best wishes for continued success to these students.

The generosity of the Montreal General Hospital School of Nursing Alumnae Association continues to make possible two specially named MGH-School of Nursing awards each year, thus maintaining an important link with the history of nursing education in Montreal.

It has been a great privilege for me to work with Dr. French during her tenure as Director of the School of Nursing over the past four years. Her vision for the School has largely been realized thanks to her extraordinary leadership and her ability to foster creative collaboration and innovation at every level.

I want to take this opportunity to wish Dr. French all the best in her future ventures. I hope she will stay in touch with all her friends and colleagues in the McGill Nursing Network.

Martha Ann Stewart
Alumnae President,
1998-present



Martha Ann Stewart

Editorial Committee

Susan E. French, N, PhD
Margie Gabriel, BA
Martha Ann Stewart, N, MScA

Contributors

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Antonia Arnaert, N, PhD
Joanna Bailey, N, MScA
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Photos

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Editing & Proofreading

Jane Broderick

Design & Layout

Cait Beattie, Résolutique Globale

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The School Welcomes Two New Postdoctoral Fellows

The School of Nursing is honoured to welcome postdoctoral fellows Sylvie Lemay and Céline Gélinas.

Sylvie Lemay earned her bachelor's and master's degrees in nursing at the Université de Montréal and did her doctoral studies in clinical sciences at the same university. Her fellowship at McGill is under the supervision of Celeste Johnston and Manon Choinière. Dr. Lemay's main research interest is pain management with vulnerable populations such as children and the elderly. Her current research project concerns the pain-management practices of pediatric nurses and parents in the emergency department. It is funded by grants from Analyse et Évaluation des Interventions en Santé, an initiative of the Canadian Institutes of Health Research (CIHR)/Fonds de la recherche en santé du Québec and the Research Institute of the Montreal Children's Hospital. Also, Dr. Lemay received the Canadian Pain Society's 2004 Nursing Research and Education Award and a postdoctoral fellowship (2004–05) from the CIHR's Pain In Child Health strategy.

In addition, Dr. Lemay is co-investigator for an interuniversity, multidisciplinary project to develop and validate a scale to measure pain among the cognitive-deficit elderly. This study is funded by a CIHR operating grant of \$100,000.

Finally, she is part of Vet-Link, a pan-Canadian group dedicated to promoting nurses' education on pain management in elderly veterans using e-learning methods.

Dr. Lemay can be reached at sylvie.lemay@mail.mcgill.ca

Céline Gélinas has been a postdoctoral trainee under the supervision of Celeste Johnston at the School of Nursing since January 2005. She is working on the validation of behavioural and physiological indicators for pain assessment in critically ill patients who are unable to communicate.

Dr. Gélinas completed a doctoral program in nursing and measurement at Université Laval in 2004. Her research project concerned the development and validation of a pain-assessment tool in critically ill intubated patients with or without altered level of consciousness.

Dr. Gélinas gained clinical experience as a registered nurse in intensive care for five years and as a Clinical Nurse Specialist in cardiology for a year and a half. As a lecturer at Université Laval she taught critical-care nursing and physical examination/health assessment for three years. She has been an educator for the Ordre des infirmières et infirmiers du Québec in physical examination/health assessment since 2003, and starting in 2005 will be delivering a new one-day course on pain assessment and management in adults. In addition, she has four years' experience in oncological pain research.

Dr. Gélinas can be reached at celine.gelinas@mail.mcgill.ca

Celeste Johnston

Associate Director of Research and Postdoctoral Studies

GRISIM News

The Groupe de recherche interuniversitaire en soins infirmiers de Montréal (GRISIM) has awarded three pilot projects to School of Nursing faculty members as well as four student projects and four bursaries. Nancy Feeley has been awarded a pilot project for an intervention with mothers of premature babies still in the neonatal intensive care unit. The other two faculty members who received GRISIM awards are Hélène Ezer and Margaret Purden, who served as co-investigators on pilot projects.

Doctoral students Marilyn Aita, Janet Bryanton and Lisa Keeping were each awarded \$10,000 from GRISIM plus \$5,000 from the Canadian Nurses Foundation to support their PhD projects. Lisa Keeping also received a PhD bursary.

GRISIM members have been working on developing the axes of nursing

intervention research as well as a "mega-project." The axes are:

- Direct Nursing Interventions, led by Sylvie Cossette, a McGill PhD graduate and member of the Université de Montréal nursing faculty
- Interactive Communication Technology for Health, led by Carmen Loiseau of the McGill School of Nursing
- Natural Caregivers, led by Fabie Duhamel of the Université de Montréal nursing faculty.

The mega-project is actually a theoretical framework in which nursing interventions with specific populations are encased. True to the original group application, the overarching theme is Transitions. Two types of transitions will be considered: the point of discharge, and the beginning of the treatment regimen. There will be some generic intervention strategies such as information, education and self-evaluation, while other interventions will be specific to the populations. The populations identified thus far, based on the strengths of the researchers, are post-cardiac-event patients, premature neonates, HIV patients, cancer patients and mental health patients. The hope is that some submissions to external agencies will be made in the fall of 2005. All projects will include investigators from both universities or their affiliated hospitals.

Visit GRISIM at <http://www.grisim.ca>

Celeste Johnston

Co-director, GRISIM

Transdisciplinary Training in Psychosocial Oncology

PORT (Psychosocial Oncology Research Training), a Canadian Institutes of Health Research-Institute of Cancer Research, National Cancer Institute of Canada Strategic Training Program in Psychosocial Oncology, is an innovative initiative that links the country's top psychosocial oncology researchers across a variety of disciplines (e.g., nursing, psychology, management, medicine) and four



Participants in PORT's first annual meeting. Front row: Fuchsia Howard, UBC; Sylvie Lambert, McGill; Deborah McLeod, Dalhousie; Tressie Dutchyn, Dalhousie; Zeev Rosberger, McGill; Joan Bottorff, UBC. Back row: John Oliffe, UBC; Carmen Loisel, McGill; Greg Hislop, UBC; Tom Hack, University of Manitoba; Lynda Balneaves, UBC; Linda Di Dio, McGill

universities (McGill, Dalhousie, the University of Manitoba and the University of British Columbia). The mission of the six-year project is to train the next generation of researchers in this rapidly growing field dedicated to assisting patients and their families to cope with cancer. Carmen Loisel of the McGill School of Nursing is the Program Leader for PORT. Her co-leaders from the participating universities are Lorna Butler (Dalhousie), Lesley Degner (University of Manitoba) and Joan Bottorff (University of British Columbia).

In April 2005 PORT held its first annual meeting, in Victoria, British Columbia, under the theme "Key Concepts in Psychosocial Oncology Research: Contributions and Challenges." The meeting was planned to immediately precede the annual conference of the Canadian Association of Psychosocial Oncology, also taking place in Victoria. This meeting brought together PORT's first fellows with several of the 22 mentors affiliated with the program across Canada. This was an opportunity for colleagues to meet face to face after a year of primarily

"virtual" contact; e-mail, teleconferencing and video-conferencing had been the mainstays of communication throughout the year.

The year 2004–05 was a period of many firsts for the program. The first PORT fellows were selected. A new, 13-week doctoral-level seminar (Psychosocial Oncology Research), a core component of the initiative, was established. It focuses on evidence-based research developments in psychosocial oncology in which students explore state-of-the-art theory, research methods, findings and intervention programs from a variety of disciplines, including nursing, psychology, medicine, health services management and social work, that have contributed to this emergent field. At this seminar, first offered in January 2005, 10 PORT mentors acted as leaders, bringing to the discussions their expertise in specific areas of psychosocial oncology research. To accommodate participants from four universities across four different time zones, the sessions were held via video-conference; in addition, asynchronous group interactions, access to additional

material and information, and online discussions were made possible through the use of various Web-based tools such as e-mail and WebCT access.

As a result of experiences in the first year, a strong foundation has been established to welcome and support high-calibre researchers interested in pursuing further work in this important area of cancer care. With minimum stipends ranging from \$19,950 to \$36,750, plus the opportunity for top-up awards, those who are pursuing studies in a variety of fields at the doctoral or postdoctoral level and have an interest in psychosocial oncology research are encouraged to apply to PORT for a unique learning opportunity. Application deadlines are March 1 and October 1. Further information is available on the PORT Web site, www.port.mcgill.ca, or by contacting PORT by phone (514-398-7158) or e-mail (port@mcgill.ca).

Carmen G. Loisel
PORT Program Leader
Jill Martis
PORT Project Manager

Holistic E-Health Care

A New Approach for the Nursing Profession?

The road of life is filled with ups and downs, twists and turns. People who are facing long-term illness or experiencing loss and grief are often forced to re-evaluate their priorities and seek new meaning and purpose in life. For many, this is the beginning of a spiritual quest for a *sense of wholeness* despite their situation. The pain, suffering, fear and anger may detach people from a deeper level where they felt complete and deprive them of the sense of peace they once enjoyed.

Surviving a debilitating illness is not just about a cure. It is also about living a full life following treatment. The conventional medical model of care focuses on the physical phenomenon of curing, paying little attention to the person's emotional and spiritual struggle. Healing, in contrast to curing, is a process that comes from within. In the healing journey, patients can experience a profound sense of peace and regain a feeling of wholeness in the face of illness and suffering. Simply put, to be whole is to be healthy. When we are not whole we are split off from certain parts of ourselves, which are then mirrored back to us as an

unpleasant, stressful or even hostile external world.

Nurses have the unique task of working with patients at various and multiple points in their life journeys. They often encounter patients during the rough parts of the journey. Holism, or treating the whole person — the physical, mental, emotional, social and spiritual parts within a nexus of relationships — is central to the delivery of comprehensive, integrated care. Holistic health care is a philosophy of care in which a range of approaches is used to establish and maintain health and harmony of *body, mind* and *spirit*. The motivation behind all caring is the alleviation of suffering. Herein lies the essence of the spiritual connection with oneself and others and the beginning of healing. The process of personal transformation is the essence of true healing, the awakening of the wholeness that lies dormant. Although the journey is never-ending, it leads one to one's own unique, personal connection to the world.

Caring and healing are the hallmarks of the nursing profession. Florence Nightingale, the founder of modern nursing, emphasized the importance of the environment to the healing process. Similarly, in the McGill Model of

Nursing the patient and his or her family and environment are viewed as a single entity; the collectivity of the family and the interconnectedness of the patient with everything in the universe are recognized.

The potential of new technologies to deliver, support and coordinate services has emerged as a key area in the health and social-services sector. The availability of health care at the point of need is one of the key benefits of e-health care — the provision of services at a distance via electronic means, in particular over the Internet. This alternative delivery model makes it possible for health professionals to provide more *individualized, tailored holistic services*. While the advent of technology-supported services offers nursing new opportunities to deliver holistic care, one of the challenges facing nursing today is how to provide holistic care at a distance using information technologies that complement the care provided by physicians via telemedicine.

Antonia Arnaert
Assistant Professor

Books Launched

Canadian Essentials of Nursing Research

By Carmen G. Loiselle, Joanne Profetto-McGrath, Denise F. Polit and Cheryl Tatano Beck
Lippincott Williams & Wilkins, 2004
ISBN 0781742811

Canadian Essentials of Nursing Research features state-of-the-art research undertaken by Canadian nurse researchers as well as Canadian content relating to the history of nursing research, ethical considerations, models of nursing and models of research utilization. At the same time, this edition retains all of the features for which the original award-winning text, *Essentials of Nursing Research: Methods, Appraisal, and Utilization* (Denise F. Polit, Cheryl Tatano Beck and Bernadette P. Hungler, 2001), has been hailed by faculty and students alike,



Elizabeth Fernandus (right) with her parents at the 2004 Convocation

including its up-to-date, clear, concise and user-friendly presentation. The book is intended to help Canadian students become informed consumers of nursing research in terms of scientific merit and potential for utilization.

From an overview of what nursing research entails, through details of study design, data-collection strategies and analysis, and critical appraisal of studies, *Canadian Essentials of Nursing Research* describes the ingredients that go into a meaningful nursing research study and explains how to identify and avoid methodological weaknesses and how to apply findings to nursing practice. Each chapter concludes with examples of both quantitative and qualitative research. The authors also include tips to help the novice researcher grasp the complexities of published research; a list of questions that walk the reader through a study, drawing attention to particular aspects that are amenable to critical appraisal; activities designed to encourage critical thinking; and access to free online articles for students and faculty to further stimulate research critique and discussion.

The popularity of *Canadian Essentials of Nursing Research* has led to a second revised edition to be published in spring 2006. In addition, the textbook is currently being translated and adapted for French-speaking undergraduate students in nursing.

A Collaborative Partnership Approach to Care: A Delicate Balance

By Laurie N. Gottlieb and Nancy Feeley with Cindy Dalton
Elsevier of Canada, 2005
ISBN 0779699564

The nurse-patient relationship is at the heart of nursing practice, and there are many different conceptions of it. The McGill Model of Nursing subscribes to the notion of a



Laurie Gottlieb

collaborative partnership between nurse and patient/family.

Although collaboration is a much discussed concept in the nursing literature and in the practice arena, little has been written about how collaborative partnership plays out in nursing practice and how it differs from the more traditional hierarchical relationship.

Collaborative partnership was first described over 30 years ago when the core concepts of the McGill Model of Nursing were identified and developed by Moyra Allen. Over the years graduates, faculty members and students of the School of Nursing have further developed these ideas in their practice and in their teaching. This book describes collaborative partnership from the perspective of 13 expert nurses and uses examples from clinical practice to demonstrate how the theoretical ideas about collaboration are put into practice.

The authors note that this book was made possible by the vision and support of Susan French, Director of the School of Nursing, and the generosity of Richard and Satoko Ingram and the Newton Foundation. The Ingrams are committed to disseminating the McGill Model of Nursing to a wider audience.

Dreams Have No Expiry Date: A Practical and Inspirational Way for Women to Take Charge of Their Futures

By Laurie Gottlieb
and Deanna Rosenswig
Random House of Canada, 2005
ISBN 0679312900

This book, which is co-authored by a member of the McGill School of Nursing faculty, is intended to help women redefine their life paths and find new meaning and direction at midlife. Whether capping a successful career and looking for a new challenge, finding themselves unexpectedly downsized or emerging from the home and looking for a new start, women are searching for purpose in their work and leisure. They are asking themselves what they will do for the rest of their lives.

Dreams Have No Expiry Date shows that the Vantage Years, a term coined by the authors, is actually the best time for people to live their dreams, because in these years they have the freedom, emotional resources, self-knowledge, time, wisdom and energy to do so. Gottlieb and Rosenswig use interviews with more than a hundred women, drawing on the latest empirical research and exercises designed to stimulate thinking and increase self-awareness, to help women articulate their dreams and assess their strengths, resources and readiness for change. They help readers to develop a personalized roadmap to realize their dreams. *Although Dreams Have No Expiry Date* is written for women, men are finding the messages apply equally to them.

The book has been well received. The authors have been featured on television and radio programs across the country and their chapter on Strengths is excerpted in the April 2005 issue of *Homemakers* magazine. The book is to be translated into several languages, including Spanish, Korean and Dutch.

The Teaching Scholars Program

An Opportunity for Reflection and Growth

It is with much pride and pleasure that I report on my activities as a Teaching Scholar during the past academic year. Offered by the Faculty Development Office within the Faculty of Medicine, this program is designed to encourage the professional development of health science educators at McGill.

Having submitted an application and gone through the interview process, I was thrilled to hear of my acceptance into the program. It has provided me with a wonderful opportunity to reflect on my teaching and to develop a better appreciation of the knowledge and skills required in the educational process. As part of this year-long program, I took two courses in the Faculty of Education: *Theories of Learning and Instruction* and *Educational Evaluation and Assessing Learning in Higher Education*. As a result of the latter, I have completely redesigned the way students will be evaluated in two of my courses.

An independent study is a major focus of this program. My area of interest is in developing a tool to increase interrater reliability in the evaluation of critical thinking in clinical practice. I am in the process of developing a series of videos depicting clinical dialogue; these will be used as part of a training session to help clinical teachers improve their skills in evaluating undergraduate students.

The program also includes attendance at monthly meetings held at the Centre for Medical Education and workshops offered by the Faculty Development Office. The highlight of the program for me has been the monthly meeting with my fellow teaching scholars, Francesco Ramadori (Anesthesia) and Joseph Rochford (Psychiatry). It has been especially nice to have a formal structure within which to dedicate time and thought to teaching and learning issues. Next year I will attend an

education conference funded by the Teaching Scholars Program.

I am particularly thankful to Susan French, who supported my nomination to the program; to Drs. Peter McLeod and Yvonne Steinert, who have been "coaches" throughout the program; and to the Henry and Bernice Kaufmann Foundation for its support of the Teaching Scholars Program.

Madeleine Buck

Faculty Lecturer

Doctoral Program

The PhD Program continued to thrive over the past year, with several important internal developments.

In November 2004 a student orientation meeting was held with the new Director of the PhD Program. Student issues and concerns were raised and addressed. The meeting was attended by nine Montreal-based students and seven students from the Maritimes via teleconference. The goals proposed for this year included the development of a policies and procedures manual for the program and an improved mechanism for communicating information to the PhD student body. It was decided that it would be useful to hold similar discussions twice a year.

In order to address the issue of communication, a PhD Student Association was formed. Student representatives Sylvie Lambert, Alain Biron and Anita Mehta have been representing the PhD student body on the various academic and faculty committees of the School. The Association's new central e-mail address allows for more timely distribution of news and announcements. In addition, a PhD student fund has been created in order to defray the costs of making presentations at conferences and preparing dissertations. A committee has been established to review and administer student requests for such funding.

The PhD Advisory Committee met in December to begin work on the

policies and procedures manual. Working collaboratively, faculty members and representatives of the PhD student body have addressed three important issues: time to completion of the program, the nature of the comprehensive examination, and progress evaluations. A timeline for expectations regarding coursework, examinations and dissertation work has been developed. It will help students and faculty to set goals and track progress, and will assist students in working towards timely completion of their program. To this end, the comprehensive examination for incoming students has been incorporated within the defence of the research proposal. Students will be able to concentrate their energies on developing their proposal and preparing for an oral examination in their substantive area. With these changes students are more likely to proceed swiftly through this process. The progress evaluations will be reinstated this year to help students plan their course of study and begin to develop a track record from the time of entry into the program. This will serve students well as they compete for fellowships and external funding.

A third area of development was admissions policies and procedures. The Admissions Committee, chaired by Laurie Gottlieb, reviewed the application and criteria for admission, streamlining the process and making the requirements more consistent with the admissions procedures of other North American nursing schools. It was anticipated that seven new doctoral students would be entering the program in fall 2005.

We are pleased to announce that two of our 20 doctoral students have graduated. Sonia Semenic successfully defended her dissertation, *The Influence of Personal and Contextual Factors on Breastfeeding Duration and Exclusivity Among First Time Mothers*, on February 18, 2005 (supervisor: Carmen Loiselle). Dr. Semenic was awarded a Canadian Health Services Research Foundation (CHSRF) Postdoctoral

Award, *Multiple Intervention Program Evaluation in Community Perinatal Health*, with co-supervisors Nancy Edwards (Professor and CHSRF/CIHR National Chair, School of Nursing, University of Ottawa) and Jean-Louis Denis (Professor and CHSRF/CIHR National Chair, Department of Health Administration, Université de Montréal). Virginia Lee successfully defended her study, *The Impact of Meaning-Making Coping on Psychological Adjustment to Cancer*, on April 22 (supervisors: Robin Cohen and Linda Edgar). Dr. Lee is a Nursing Research Consultant at the McGill University Health Centre and is currently working on her funded study, *Distinguishing Patients Who Benefited the Most from the Least from a Psychosocial Intervention for Cancer Patients: A Content Analysis of Data from a Randomized Control Trial*. Congratulations to both women.

Over the past year two students

successfully defended their research proposals, as follows: Rosemary Herbert (supervisor: Anita Gagnon), *Empowering Parents to Make Smoke-Free Spaces*; Margot Latimer (supervisor: Celeste Johnston), *The Examination of Individual Nurse and Organizational Factors Associated with Effective Pain Care in Hospitalized Infants*; Sylvie Lambert (supervisor: Carmen Loiselle), *Refinement and Psychometric Testing of the Differential Health Information Seeking Behavioural Scale*; Anita Mehta (supervisor: Robin Cohen), *Family Caregivers of Palliative Cancer Patients at Home: The Pain-Management Process*; and Maryse Pelletier-Hibbert (supervisors: Margaret Purden and Frank Carnevale), *The Adjustment Process of Spouses/Partners Living with Women Undergoing Dialysis for Kidney Failure*. We wish the students success in completing these important studies.

McGill students continue to excel in securing funding. This year, new and renewed awards were granted to the following students: Janet Bryanton, GRISM fellowship, Canadian Nurses Foundation Nursing Care Partnership fellowship and CHART scholarship; Sylvie Dubois, CIHR fellowship and Ordre des infirmières et infirmiers du Québec scholarship; Rosemary Herbert, fellowships from the Canadian Nurses Respiratory Society and the Canadian Nurses Foundation Nursing Care Partnership program; Lisa Keeping, Heart and Stroke Foundation fellowship, GRISIM research grant and research assistantship with the Atlantic Health Science Corporation, New Brunswick Research Services; and Anita Mehta, Strategic Training Grant in Palliative Care (CIHR) and Maysie MacSporrán Graduate Studentship. Congratulations to all these deserving award recipients.

Margaret A. Purden
Academic Coordinator, PhD Program



PhD students, fall 2005. Front row: Marilyn Aita, Anita Mehta (Treasurer, PhD Student Committee), Sylvie Dubois, Dr. Margaret Purden (Academic Coordinator, PhD Program). Back row: Sylvie Lambert (Representative, PhD Student Committee), Marie-Claire Richer, Manon Ranger, Alain Biron (Co-representative, PhD Student Committee)



All Alumnae Award winners for 2004–05. Front row: Jose-Ann Martin, Stéphanie Ladouceur-Dupuis, Julie Fréchette, Nancy Lussier, Angela Dublanko. Back row: Kimani Daniel, Julie Gundry, Lyndsay Jean Hodgson, Sara Wilkinson, Pascale Audy, Josephine Lemay, David Klinkusoom, Leila Holden, Margarida Ribeiro Da Silva, Cynara Radley, Elissa Remmer. Missing from photo: Daniela Mercadante

PhD Student Committee

This year the nursing PhD students formed a new student committee, made up of Sylvie Lambert, student representative, Alain Biron, student co-representative, and Anita Mehta, treasurer. Many exciting events have taken place this year and more are to come. In the fall of 2004 the PhD students from Montreal and from the Maritimes distance program met with the new director of the program via teleconference. This forum was a first, and we hope to offer more opportunities for all students in the program to come together as well as for distance students and faculty to meet via videoconference.

Also this year, our committee has been able to offer some financial support, through funds provided by the School of Nursing Alumni Association, to PhD students attending national and international scientific meetings and conducting their dissertation research.

In the fall of 2005 we will be launching a research luncheon for faculty members and students to meet and discuss the different studies being conducted at the School of Nursing and the McGill University Health Centre. We hope that this roundtable will result in PhD students becoming more aware of the various research-related activities taking place on the campus. All are welcome.

School of Nursing
PhD Student Committee

Sylvie Lambert
Student Representative

Alain Biron
Student Co-representative

Anita Mehta
Treasurer

Revised Master's Program

The 2004–05 academic year saw another large class admitted to our master's program via the Direct Entry route, bringing the total number of

students enrolled in master's studies to 70. This is the largest number of students we have had since the program was introduced in 1975.

This year we began phasing in major changes to our curriculum. These changes are intended to allow for development of the content required for advanced clinical practice in specialty areas and greater flexibility for students with specific career interests. All students are now developing their projects in January of the first year of their master's program. This will allow them to get through the ethical review process and to take advantage of the summer session to implement their projects. Courses in advanced health assessment, clinical reasoning, role development and ethics are part of the new curriculum for those who are preparing for advanced practice roles in nursing. Nurse entrants with a special interest in such areas as international health, nursing administration or teaching will follow the "adjunct

stream” of studies, which allows them to tailor a program of study to meet their career goals.

The nurse practitioner program in neonatology admitted its first student in September 2004. This program is a joint initiative of the School of Nursing and nurse practitioners, nurse clinicians and physicians in neonatology. We are hoping to see growing interest in nurse practitioner preparation in a number of specialty areas as the role becomes recognized and supported in Quebec.

While these changes have brought with them some growing pains as students, faculty members and the clinical settings make their adjustments, they have also brought exciting new learning opportunities. The success of our efforts to date is a tribute to the commitment to quality and the willingness to collaborate that characterize the McGill Nursing Network.

Congratulations to the following award winners among our master's students: Joanna Bailey, Kimani Daniel, Angela Dublanko, Julie Gundry, Lyndsay Jean Hodgson, Caroline Marchionni, Daniela Mercadante, Cynara Radley, Elissa Remmer, Irene Sarasua, Geraldine Schaak and Fay Strohschein.

They are recipients of Nursing Alumnae Awards, the Maimonides Fellowship, the Nessa Leckie Memorial Award, the Canadian Italian Business and Professional Association award, FERASI fellowships, the Florence MacKenzie Award, the Irma Riley Fellowship, McGill Graduate Studies Fellowship and Faculty of Medicine summer bursaries.

Kudos to one and all.

Hélène Ezer

Assistant Director, MSc(A) Program

IAC Global Health Studies in the Master's Program

Staff, students and alumni of the McGill School of Nursing are reaching out to so many corners of the health-care world that our talents are becoming rather well known on a global level.

For several years students and faculty members at the School have shown an interest in developing their nursing skills in an international context. As the world becomes increasingly connected, it is important that new nurses understand health from a global perspective. Therefore the International Advisory Committee has developed an option of study for master's students with a special interest in global health.

This option, Global Health Studies, which is offered in conjunction with the Master of Science (Applied) program, will help students to broaden their understanding of and develop a critical perspective on issues of social justice and international nursing. Through several 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 diseases, medical anthropology and cultural geography. In addition, through an overseas clinical practicum, students will be able to broaden their knowledge and skills around the practice of nursing overseas.

The IAC is enthusiastic about introducing this new option to students entering the program in September 2005. We hope it will open the door to many new learning opportunities in global health, both overseas and in Northern Canada.

In addition to developing the Global Health Studies curriculum, the IAC has organized activities designed to foster the sharing of knowledge and experiences around nursing overseas and in Northern Canada. The IAC's fourth International Night, held in November 2004, attracted several dozen students. Four nursing students were invited to give presentations on their clinical placements, in Nunavik, Peru, Senegal and Switzerland. The Committee's monthly Brown Bag Lunch has also been a great success. This event has featured informal talks on issues ranging from nursing in Northern Canada to ethics in the French health-care system. The IAC looks forward to seeing continued participation in these and other activities in the years to come.

For additional information on the IAC or the Global Health Studies option, please contact Anita J. Gagnon, IAC Chair (anita.gagnon@mcgill.ca).

Luciana Ruppenthal
Irene Sarasua
Members, IAC



Barbara St. Jacques, former President of the MGH Alumni Association (second from left), and Joan Meadows, current President (third from left), with MGH Alumnae Award winners for 2004–05: Josephine Lemay (left), Margarida Ribeiro Da Silva, Stéphanie Ladouceur-Dupuis, Leila Holden

Introducing McGill Nurses for Global Health

McGill Nurses for Global Health (MNGH) was founded in September 2004 by a small group of Master's in Nursing students bound by a belief in health as a human right. The group's mandate is to:

- foster awareness among the student body around issues of global health and social justice
- advocate for the right to accessible health care
- establish links with community-based health organizations in the majority world.

The group's chief initiative is its partnership-building project with the Salvadoran community-based health organization El Fondo de Emergencia de Salud. In the summer of 2005 a member of MNGH spent two months volunteering with this organization in southeastern El Salvador, exploring the potential for a long-term partnership. The project was born out of student interest in gaining experience in international health care and a belief in the value of collaborative partnership in fostering understanding and meeting

mutual learning/resource needs. The founding members of the group felt that long-term, collaborative goal-setting with a community organization would lead to a more needs-based, priority-driven and sustainable approach to international rotations (placements) and thus be rewarding for all parties. In addition to providing a means for students to build their skills in community/international health, the partnership is expected to be a sustainable source of human resources for largely underserved communities. The group envisions the partnership as eventually involving faculty and students from other health disciplines such as medicine, physical therapy and occupational therapy.

McGill Nurses for Global Health has also been actively involved in awareness-raising activities. In November a guest speaker from the Social Justice Committee of Montreal was invited to the School of Nursing to speak on international debt and its effects on social spending and poverty in the developing world. In February MNGH hosted a Latin-American film series featuring documentaries from

El Salvador, Guatemala and Mexico. These films examine the political and economic context of poverty and oppression in North/Central America and the role of industrialized countries therein. The group also launched a Fair Trade Coffee campaign in Wilson Hall, petitioning Chartwells to sell certified Fair Trade Coffee in the building. Rooted in the well-established relationship between income and health, this campaign is intended to raise awareness around ethical alternatives to multinational trading systems that systematically impoverish and marginalize agriculturists around the world.

The group has received the full support of the School of Nursing administration and the Graduate Student Colleagueship and anticipates a broad membership base in the coming years.

For more information or to join the group, contact McGill Nurses for Global Health (MNGH-owner@yahoogroups.com).

Irene Sarasua

Member, MNGH

(irene.sarasua@mail.mcgill.ca)



Members of McGill Nurses for Global Health. Front row: Vince Ballenas, Tanya Martens, Misty Mallot. Back row: Annemarie Hoffmann, Maria MacDougall, Irene Sarasua, Amy Nyilan, Natalie Anderson



Joanna Bailey (second from right) accepts a Maimonides Foundation award given to a McGill student interested in a career in geriatric nursing. She is pictured with Lucie Tremblay, Director of Nursing and Clinical Services, Maimonides Geriatric Centre; Ben Cobrin, Founding President of the Foundation; Carol Ann Sherman, Faculty Lecturer, McGill School of Nursing; and Larry Nachshen, President of the Foundation.

Graduate Nursing Collegueship

Over the past year the Collegueship has followed in the footsteps of those who came before. By keeping up old traditions and starting new ones we have continued to promote a sense of collegueship within the growing population of graduate students.

Respecting Old Traditions...

As Collegueship Co-presidents we welcomed the largest group of new students to date on orientation day 2004, making ourselves available to students as they began pursuing their graduate degrees in nursing. Some weeks later the Collegueship hosted a wine and cheese get-together for both new and returning students. A respectably sized team was pulled together for the CIBC Run for the Cure, raising money for breast cancer research. Thanks to a generous contribution from the Alumni Association, we were able to refund a considerable portion of various conference costs to all students who applied. We sat on the Second Annual Interprofessional Health Conference planning committee to represent nursing. We also made a monetary contribution towards the cost of the conference and purchased and prepared all of the food for the evening reception. McGill nursing students turned out in full force to show their

support for interprofessional collaboration. The year-end celebration, organized by a group of students unwilling to see this tradition fall by the wayside, gave students and faculty members a chance to gather one last time before parting ways for the summer and to send graduates off into their careers. The event included a nostalgic slide show and an awards presentation.

...and Starting New Ones

CPR certification and recertification courses were offered for the benefit of students who are required to be certified. A fundraising bake sale was well planned and executed thanks to the input and donations of many students. The Collegueship also hosted a preceptor/supervisor recognition evening. Graduate students were asked to nominate preceptors or supervisors they felt were exceptional and should be invited to this special event. Nearly 30 such people were then honoured at a wine and cheese gathering where they were presented with gifts for their outstanding contribution to our learning. Students and honourees alike expressed the hope that this tradition will be continued by the Collegueship in the future. It is always a challenge to plan such activities when balancing course loads, clinical and research practicums,

work responsibilities and personal commitments, but the rewards of a stronger community of nursing students are invaluable.

Joanna Bailey
Cynara Radley

Collegueship Co-presidents 2004–05
(Collegueship.nursing@staff.mcgill.ca;
collegueship.nursing@mcgill.ca)

McGill Medical Simulation Centre

Planning for the McGill Medical Simulation Centre — the largest and most ambitious facility of its kind in Canada — has been underway for more than two years. Dr. Kevin Lachapelle has been appointed Director of the facility and Linda Crelinsten has been chosen as Manager. With these key people in place, the project will be moving ahead at full speed.

The Centre will occupy an ideal downtown site in the La Cité complex. It will provide a training facility for developing confidence and accuracy in clinical and technical skills. Computerized mannequins, anatomically realistic devices, and role-playing actors displaying symptoms and behaviours that challenge even experienced clinicians will enable individuals and teams of health professionals to develop skills they would otherwise learn only in theory or by trial and error. Amitai Ziv, a consultant at the Israel Center for Medical Simulation at Chaim Sheba Medical Center, notes that such a facility allows health professionals to live their “worst nightmare” in the safety of a simulated environment.

Owing to the complexities of designing, funding, constructing and implementing such a large project, the target opening date has been delayed. I can guarantee that the wait will have been worthwhile. Visit <http://www.medicine.mcgill.ca/simcentre/> for more information about this grand project.

Madeleine Buck

Faculty Lecturer
Member, McGill Medical Simulation
Centre Steering Committee



Susan E. French, Nadia Perrault (winner of the Lexy L. Fellowes Memorial Prize) and Madeleine Buck at a reception following the 2004 Convocation

Bachelor of Science (Nursing)

The 2004–05 school year was a busy one for faculty and students in the BSc(N) program, with the largest-ever enrolment of 187 students. We are extremely proud of the many achievements of our students. We have had a greater number of in-course awards granted this past year than ever before. Thanks to alumnae donations, these awards are granted to students based solely on academic performance.

The Isabel Clarke Dickson Woodrow Scholars were Amanda Camacho, Julie Fréchette and Cindy Gauthier. The C. F. Wong award went to Melanie Sabbagh. School of Nursing awards were granted to Pascale Audy, Patrick Casey, Isabelle Hubert, Karen Moiroud, Melissa Lam Shang and Elizabeth Tse. Laurie Barkun (class of '04) was the recipient of the Graduate Student Award from the Marskell Group. Loyal Abou-Chacra was a Scarlet Key recipient for going “above and beyond the call of duty, being committed to the McGill community, and inspiring passion and creativity.” Julie Fréchette, U2, was awarded an

Undergraduate Summer Research Award by Fonds de recherche en santé du Québec. Forces d’Avenir finalists in the Health category were Karen Bontemps, Karine Bourgeois, Véronique Laliberté and Sidonie Mack, who submitted a culturally relevant nutrition booklet targeting recent immigrant families with children living in the Côte-des-Neiges district of Montreal; development of the booklet was guided by an acculturation model with the goal of reinforcing existing cultural/nutritional strengths while promoting a healthy transition to the Canadian context.

While cognitive and leadership abilities have been notable, I would be remiss in failing to mention the excellent physical abilities and stamina that our hockey team, the Please Be Gentles, demonstrated on several occasions! Kudos to these students for their ability to mix work and pleasure.

Our students continue to benefit from a broad range of clinical experiences in our hospital and community network. In April alone, 140 clinical preceptors from the McGill University Teaching

Hospital Network attended teaching and learning workshops. We particularly appreciated the welcome that our final-year students received during their May 2005 Clinical Internship course. We thank Mer et Monde, which has welcomed four students to Senegal and Honduras; Prince of Wales Hospital in Sydney, Australia; Surrey Memorial Hospital and the Queen Charlotte Islands General Hospital in British Columbia; Tulattavik Health Centre in Kuujuaq, Quebec; Centre de Santé et des Services Sociaux des Îles de la Madeleine, Quebec; and the town of Twillingate, Newfoundland.

The BSc(N) curriculum remained largely unchanged this past year. The course *Research Methods* was moved from U3 to the U1 plan of study, and a second Pharmacology course, *Drugs and Disease*, was added as a required course to the U2 studies. We are augmenting the emphasis on evidence-based nursing practice, and students are becoming extremely adept at using evidence-based resources such as the Cochrane Database of Systematic Reviews, the Database of Review Effects (DARE) and Turning Research into Practice (TRIP). While evidence is important, in making decisions students are learning to also take into consideration patient/family preferences, the nature of resources and clinical expertise.

Madeleine Buck

Assistant Director, BSc(N) Program

Bachelor of Nursing (BN) Program and Post-RN Initiatives

This section covers the three post-RN programs: the three-year Bachelor of Nursing (BN), the BN (Integrated option) and the Emergency Microprogram. With the admission of 46 students into the BN (Integrated) Program, the BN Program has expanded significantly. This cohort of students will be the first to graduate from a program that takes five years from entry to a CÉGEP nursing program through to a baccalaureate degree. They call themselves BNI

students. Most have come from the English CÉGEPs with which McGill has formed a consortium. We have also welcomed students from 10 different francophone CÉGEPs into this program.

Fall 2004 was a transitional term, with four of the six courses designed specifically for this group. The winter term integrated the BNI, regular BN and BScN students in several courses. This mix of integrated and special courses continued through the following summer between the first and second (final) year at McGill. In 2005–06 the BNI students will be completely integrated with other nursing undergraduates as they all move into the community for the entire year.

It has been a year of learning both for and from the students. McGill faculty members continue to meet regularly with our consortium partners to discuss the progression of students through the university segment and the adjustments that both levels will need to make in the future. In June 2004 faculty members from the English CÉGEPs and from McGill came together for a day to begin

forming a community of learners, sharing information and ideas. We arranged to meet again in June 2005, to reflect on the past year and plan for the coming one.

On the horizon for September 2005 is a large cohort of BNI students. We have received over 150 applications and expect to admit more than 100 students. While we are pleased with the expansion, our creativity and resources will be challenged as never before.

The three-year BN program continues to admit a small group of students. Upper-year students from this program played a major role in helping to orient the BNI students. They have been active in changing the Nursing Undergraduate Society's constitution to include representation for themselves and the BNI. This year, a BN student, Emily Ireland, was elected VP External Affairs and plays an important liaison role between nursing students and other students on campus. Both BN and BNI students have won awards and bursaries. They are Julia Eldrige (Woodrow Entrance Scholarship), Emily Ireland and Jackie Jehoda (Ordre des infirmières et infirmiers

du Québec bursaries), and Nancy Lussier (Women's General, Reddy Memorial and A. W. Lindsay awards). Congratulations to all.

Warm congratulations to the nurses who received their attestation for completing the Emergency Microprogram. They are Christina Chianotis, Florence Dartiguenave, Debbie Dawe, Emil Florea, Elisabeth Pineiro, Linda Quinn, Debbie Schichtman and Jocelyn Stafford-Cox, all from the McGill University Health Centre, and Rose Regis from the Sir Mortimer B. Davis–Jewish General Hospital. Without the support of the MUHC, particularly Gratienne Lamarche, and the SBMD–JGH, represented by Marie-Hélène Carbonneau and Valerie Frunchak, the program could not have been realized. It continues to be a rewarding experience and a pleasure to work with the core teachers, Denise Kudirka, Valerie Schneidman and Melanie Sheridan. This program has been a great example of collaboration between the School of Nursing and our network of teaching hospitals.

Marcia Beaulieu

Assistant Director, BN Program



2004 graduates celebrate at a Convocation reception

Community Health Nursing (Undergraduate)

Several developments in community and public health nursing at the federal, provincial and territorial levels in Canada have affected our community health nursing program at McGill.

First, Community Health Nursing (CHN) has been officially recognized by the Canadian Nurses Association (CNA) as a nursing specialty. The Community Health Nurses Association of Canada (CHNAC) is refining the certification process by identifying core CHN competencies based on national standards of practice and is developing the certificate examination. The first CHN exam will be administered in April 2006. This milestone highlights the importance of CHN to the health of Canadians. In the public health domain, strategic responses to recent public health crises such as the SARS epidemic include the collaborative development of pan-Canadian public health goals, targets and processes. One theme that will guide goal development is the need for an integrated supportive public health system. Part of this theme is the recognition that public health practitioners must develop core competencies (knowledge, skills and abilities). CHNAC, in consultation with the Public Health Agency of Canada, has evaluated CHN-specific competencies for their fit with pan-Canadian competencies. The CNA has observed that the level of scrutiny for CHN competencies is unprecedented.

The CHN standards of practice and competencies will provide a resource and rationale for university curriculum development across Canada. Changes in the McGill curriculum that were implemented in the 2004 U3 theory course *Primary Health Care* include an increased emphasis on public health and epidemiology and the introduction of public health system preparedness and response to specific public health risks (such as pandemics and disasters).

The CHNAC standards provided a framework for the teaching of core CHN population-level concepts and processes in *Primary Health Care* (PHC) and *Community Health Nursing I and II*. The McGill Model of Nursing continued to guide students in their interactions with clients and families in community settings. A commitment to incorporating problem-based learning strategies into curricula resulted in a variety of in-class activities, including simulated community health assessment and development of health promotion proposals to prepare students for their CHN clinical placements. Students also had to formulate their own accountability and professionalism standards for clinical learning in community settings.

The 2004–05 U3 students rose to the challenge. An invaluable component of our community health nursing program is the student-led community health assessment report and related community health promotion intervention project. Seventeen student teams conducted theory-based assessments of the populations with whom they worked during their CHN clinical placement. Students collected, organized and analyzed quantitative sociodemographic and epidemiological statistics and qualitative health data from their community clients, then used the results to propose, design, implement and evaluate evidence-based health promotion interventions. The 2005 student projects were particularly relevant to current PHC priorities. While all the teams deserve recognition, I regret that I must limit myself to a few examples of the McGill U3 student contribution to community health in Montreal.

The members of the CLSC Parc Extension team (Patty Babalis and Joannie Belanger) were spurred to action when their community health assessment indicated that as many as half of Parc Ex students fail to progress past Secondary 3. These two industrious nursing students organized a highly successful career fair for Grades 4, 5 and 6 at Sinclair Laird

Elementary School. Representatives from Public Safety, Dentistry, Engineering, Nutrition, Social Work, Nursing, Education and Community Development, among other disciplines, collaborated in the effort. The schoolchildren enthusiastically participated. Evaluation results demonstrated a shift in their attitudes and career goals and a desire on the part of all community participants to sustain the program. At one point in the day the community participants were photographed eating lunch together around one table, discussing community issues and developing new partnerships. The McGill students had achieved a sustainable example of PHC principles in action.

The CLSC Côte-des-Neiges team (Kareen Bontemps, Karine Bourgeois, Véronique Laliberté and Sidonie Mack) observed that many immigrant populations arrive in Canada with very real strengths that must be recognized and supported if they are to be sustained against strong local (potentially negative) influences. These four students developed an attractive multicultural nutrition booklet that “focuses on maintaining healthy traditional dietary practices, complemented by use of local foods from the *Canada Food Guide* food groups,” and directs new immigrants to local culturally appropriate resources.

Two student teams (Batshaw Youth and Family Centre and Jewish General Hospital) approached the important issue of promoting play as an essential component of healthy child development. The two products address a similar issue from different approaches, each relevant to the population concerned.

The CLSC Métro team developed and conducted a comprehensive school nutrition program. The CLSC St. Laurent team developed and delivered a sex education program to more than 10 Secondary 3 classes. And the list goes on.

Three student teams entered their projects in Quebec’s Forces d’Avenir

competition. The CLSC Côte-des-Neiges team was chosen to represent McGill as a finalist in the Forces d'Avenir Health category. We wish the four members of this team the best of luck.

The U3 students' energy and commitment to their projects were remarkable and inspiring. Community Health Nursing in Montreal is in fine hands. We wish all the students well and hope that some will choose CHN as their ultimate career goal. The students, in turn, have expressed their gratitude to the nurse preceptors, program managers and community participants who provided essential support for their projects. Community partners gave the students the freedom to develop their vision of CHN and to learn from their setbacks and triumphs. The skills the students developed throughout these health promotion projects will be transferable to whatever domain of nursing they eventually choose and will contribute to the evolution of nursing practice in Montreal and beyond.

Additional changes in our program include the development of innovative community health clinical placements. McGill has seen its student population grow by leaps and bounds. The 2004–05 class population represented an increase of more than 100 percent over 2003–04, while faculty resources diminished. This caused great stress for all our teaching resources, particularly clinical placements.

In response we developed new initiatives beyond traditional clinical placements. Loyal Abou-Chacra agreed to provide leadership in creating a student liaison nurse position at the Jewish Rehabilitation Hospital for the Société d'assurance automobile du Québec's Blessures orthopédiques graves program. The team of Elizabeth Blair, Golda Kligman and Michelle Nadon provided support for Loyal's learning and experimentation in this new position. The initiative was evaluated as successful for all concerned, in particular for Loyal's clients, who received a new level



Cheryl Armistead

of nursing care. We plan to expand upon the model in 2005–06. Two students were placed at the Batshaw Centre under the guidance of Maria Felix and Jennifer Martin. Pascale Audy and Melissa Tremblay exceeded all expectations of U3 students in a complex, demanding learning situation, proving that students thrive when challenged. This year several students chose to continue studying PHC (Patrick Casey, PHC Initiative in Newfoundland and Labrador), Public Health (Loyal Abou-Chacra and Melanie Sabbagh), CHN (CLSCs) and of course International Health (seven students) during their final *Integration Course* at McGill this spring, rather than the more traditional critical care/medical/surgical placements. These students are breaking new ground in clinical placements and creating sustainable learning opportunities for future classes. Congratulations to all involved for possessing the courage and vision to develop new CHN education opportunities.

The year 2004–05 was one of significant challenges and triumphs. The U3 students were ultimately placed in 10 CLSC and 10 Ambulatory

Care settings, with approximately 80 nurses contributing to the development of learning opportunities in widely varying contexts. The coming year will continue this trend with the arrival of the new BNI students (integrated CEGEP/McGill program) into community health nursing. The 2005–06 class size is predicted to exceed 80 students and the following year well over 100. In addition, we are entering a new era of collaboration with our Réseau interuniversitaire intégré de santé (RUIS) clinical partners. Significant change tends to bring both stress and potential. Past history ensures that lessons are learned but we prefer to look forward and build on our strengths. We trust that the new academic-clinical partnerships will represent a new era in collaborative teaching-learning that will serve to narrow the perceived academic-practical gap to provide continuity in learning and promote quality care. RUIS and Law 90 governing practice together provide Quebec nurses with a real opportunity to promote lifelong learning, be it with students in the clinical setting or within the profession itself.

Finally, we are grateful for the imminent return (from a year's sabbatical) of our esteemed colleague Oaima Mansi, who developed the foundation and processes for the *Primary Health Care, Resources in Special Population* and *Community Health Nursing* courses. We will continue to develop, together with our community (clinical) partners, meaningful learning experiences for McGill students, to ensure that they graduate with the theoretical and clinical foundation to demonstrate core CHN competencies. Graduates of the McGill School of Nursing are well prepared to assume leadership roles and influence the shape of nursing practice in the years to come.

Cheryl Armistead

Faculty Lecturer

Coordinator, Primary Health Care and Community Health Nursing I

Nursing Undergraduate Society

At the end of my tenure as President of the Nursing Undergraduate Society, I have one final duty — to write an overview of all that has happened this year. And the more I think about it, the more amazed I am at what we have managed to achieve.

The 2004–05 academic year started with a successful Discover McGill day when new students were given a chance to meet members of the NUS and other nursing students, and to find out all the tricks of survival and how to enjoy themselves at McGill. Plenty of advice was proffered.

This year we students have had unique opportunities at Wilson Hall and throughout the campus. We were fortunate in having our cafeteria renovated. The eating area has been completely transformed into a place where students can enjoy eating, studying or just chatting. Consequently there is much more activity in the basement “pit” now than there was in previous years.

Second-year nursing students took the initiative to plan an influenza vaccination clinic within their year. This was a wonderful opportunity for students to practise their IM injections on each other and at the same time

receive their shots. We hope it will become an annual event. Also, a second-year student set up a NUS Web page (www.mcgillnus.tk), and now that we have it up and running I don't know how we ever did without it.

After the devastation of the December tsunamis, I was proud of the fundraising activities that were quickly put together by NUS member David Klinkusoom. All the money raised was sent to the affected countries to help rebuild schools and the education system.

Thanks to our athletic representative, students this year had a wide range of athletic activities from which to choose. These included skating, skiing, soccer, intra-nursing games and the famous (or infamous) Nursing Games, held in Quebec City. Nor should we forget the McGill Nursing hockey team: the Please Be Gentles had another victorious year, with a record number of supporters.

In November our Canadian Nursing Students' Association representatives undertook a major project: organizing the Quebec Regional Conference at McGill University. The event, held under the theme “A Glimpse into Oncology,” featured excellent speakers and a successful career fair. Later, in January, 24 McGill nursing students

attended the CNSA National Conference in Windsor, Ontario, whose theme was “I Bet You Didn't Know *This Was Nursing!*” The speakers focused on aspects of nursing that are not typically associated with the profession. Karen Moiroud (U2) was elected Quebec Regional Director at the event and now represents Quebec within the CNSA. All attendees were pleased with the National Conference and fundraising is already underway for next year's event, to be held in Newfoundland.

Our school year ended with an enjoyable trip to La Goudrelle sugar shack. We took a bus there from McGill and ate enormous amounts of maple syrup and other seasonal offerings. The rain deterred no one from having a wonderful time. We reached the culmination of the nursing students' social calendar when, on April 29, before embarking on our final internships, the third-year students celebrated their graduation with a semi-formal cocktail party at Auberge St. Gabriel.

My fears that my duties as NUS President would interfere with my studies were put to rest by the excellent input of the NUS Council. The year passed very quickly, with many hands sharing the work. We ran into few problems and had a lot of fun. I believe the NUS is an important part of our education at McGill.

I want to thank all who have been involved with student activities — not only with the NUS, but with the CNSA, graduation events, the Inter-professional Conference, Mitabi, and all of the other activities that have helped to divert our attention from the stresses of the program and have made the year a success.

I am confident that the newly elected council, led by David Klinkusoom as President, will have an equally successful year in 2005–06.

Sara Wilkinson

NUS President 2004–05

(nus.nursing@mail.mcgill.ca)



Members of the School of Nursing hockey team, the Please Be Gentles

Nursing at the MUHC

Developments, Practice, Education and Research

It is a pleasure to offer an update on developments within the Department of Nursing of the McGill University Health Centre over the past two years.

Valerie Shannon retired as the first MUHC Director of Nursing in February 2003 after successfully merging five nursing departments into one during the previous half decade. Her leadership was instrumental in shaping the collective MUHC vision upon which we continue to build today.

Currently the MUHC has 3,000 highly qualified nurses across the five sites (Royal Victoria Hospital, Montreal General Hospital, Montreal Children's Hospital, Montreal Neurological Hospital and Montreal Chest Institute) and six missions (Oncology/Palliative/Respiratory, Medical, Surgical, Women's Health, Mental Health and Emergency). Our recruitment and retention numbers remain strong despite the ongoing challenges to our health-care system. Our recruitment team has been very active and remains particularly sensitive to the needs of nurses at various points in their careers.

The well-being of our patients and their families and the environment in which our nurses practise remain at the core of our mission. Consequently the department has adopted three guiding principles, which encompass the values most important to the achievement of our goals. First and foremost, it remains committed to providing the highest possible level of care and to promoting patient safety throughout the organization. Second, it recognizes that as the care requirements of patients become ever more complex nurses will have to acquire more specialized knowledge. Finally, the MUHC has been at the forefront, along with its network partners, most notably the Sir Mortimer B. Davis-Jewish General Hospital, in advancing the concept of humanization

of care, carefully assessing the quality of our interactions with our patients, their families and other members of the health-care team.

These principles have been useful in focusing our practice as well as our education and research programs. For example, over the past year nurses across all sites have been intensely involved in the implementation of Best Practice Guidelines from the Registered Nurses Association of Ontario. The RNAO generously provided a grant for this purpose to the MUHC, one of only two organizations in Quebec to receive such support. Quality indicators in the area of skin integrity, pain management, and falls prevention were chosen and nurses have developed assessment tools and interventions to improve care at the unit level. A significant reduction in the number of falls and an increased focus on prevention of skin breakdown have already been demonstrated in all clinical areas. Nurses have taken the opportunity to obtain information about current patterns of practice, as evidenced by hospital-wide surveys on skin integrity and pain management, and are in the process of standardizing documentation of these areas of care across all sites.

Education

Madeleine Boulay-Bolduc joined the department in May 2004 as Associate Director of Nursing, Clinical and Professional Staff Development. Over the past year she has led a number of initiatives that have streamlined our efforts in continuing education. Our Canadian Nurses Association certification program remains very successful due to the generosity of the Royal Victoria Hospital Foundation. Implementation of MUHC-wide policies commenced with the successful launch of the Hypoglycemia Protocol, with standardized policies on heparin and insulin to follow this year. In addition to the revision of the orientation programs and customized continuing education offerings for nurses within the MUHC, Dr. Boulay-Bolduc has been working

collaboratively with the School of Nursing and the Ordre des infirmières et infirmiers du Québec to develop courses for nurses in the Far North, now part of our Réseaux universitaires intégrés de santé responsibility in providing for population-based health initiatives. In addition, as part of a project to restructure clinical placement, an informatic tool is being developed to ensure optimal use of clerical areas within both the hospital and educational facilities.

Research

Judith Ritchie, Associate Director of Nursing Research, is leading many initiatives to increase the use of evidence-based practice while also serving as principal investigator or co-investigator on Nursing Services Administration projects totalling over \$2.5 million.

Anita Gagnon's dynamic research program in Maternal and Infant Health, particularly within the refugee population, has received grants totalling nearly \$6.9 million.

The area of pain, comfort and recovery among infants and children remains a strong area of funded research, involving in particular Franco Carnevale, Celeste Johnson, Andrea Laizner and Janet Rennick, with grants collectively nearing \$4.9 million.

Patricia Rose successfully completed her Eureka Fellowship with a study assessing the risk of pressure ulcers in critically ill patients. She is the third recipient of this award generously donated by the Newton, Montreal General Hospital and Montreal Children's Hospital foundations.

Redevelopment Plans

The MUHC Department of Nursing is actively involved in planning the move to the Glen Yard site and redevelopment of the Montreal General Hospital site. The first phase, which includes the Children's Hospital, the Ambulatory Cancer Centre and the Eye Centre, is due to be completed by 2008, with the remaining adult services and research institute to be constructed

by 2010. Redevelopment is also well underway at the Montreal General Hospital site, which will continue to serve as a level 1 trauma centre and to house our neuroscience mission.

This exciting future is possible only because of the collective talents of so many nurses who practise according to the traditions of our founding hospitals and in collaboration with the School of Nursing as a partner in care. We continue to work closely with the hospitals in our network, a structure of nursing excellence unique in the country.

On behalf of the MUHC Department of Nursing, I would like to sincerely thank Susan French for her outstanding contributions to the School of Nursing during her tenure and to wish her well on her move to the Maritimes. Let us continue to cherish and nurture our profession and the core values of nursing upon which our society so greatly depends.

Ann Lynch

Director of Clinical Operations and Nursing, McGill University Health Centre

Assistant Professor, School of Nursing, McGill University

Sir Mortimer B. Davis—Jewish General Hospital Department of Nursing

We of the Sir Mortimer B. Davis—Jewish General Hospital bid a fond farewell to Susan French, who so graciously postponed retirement plans to serve as Director of the School of Nursing. It has been a pleasure to fulfil the objective of building a “faculty without walls” between the JGH and the School of Nursing. The larger Montreal Nursing Network has always been our strength, and the envy of all in Canada, the United States and afar. It has, under Dr. French’s tenure, gained form, structure, durability and soul. Students and faculty move easily to and from the School. Joint planning, implementation and evaluation of curricula have resulted in rich experiences for staff nurses, faculty, patients and families. Scholarly work

has grown exponentially. Nursing care is evidence-based, relevant, competent, confident and compassionate. Graduates are finding fulfilling careers in practice, education, administration and research.

The McGill Model of Nursing has been implemented thoroughly at the JGH.

Nursing is taken very seriously at the JGH. Nursing’s voice is heard at all important decision-making tables, including those pertaining to the allocation of human and material resources. Although teamwork is highly valued at the hospital and our relationships with physicians and the multidisciplinary team are characterized by close collaboration, nurses manage the business of nursing — recruitment and retention, hiring, evaluation, budget management, provision of educational support from novice to expert, and consultation on matters of concern to the hospital as a whole.

The hospital administration makes every effort to provide nurses with state-of-the-art patient-care units, cutting-edge and time-saving equipment, technological support and, perhaps most important, the time and space to practise our profession. The JGH Foundation provides space, equipment and technical support to our Centre for Nursing Research,

which is a beehive of research activity for staff, students and faculty.

The JGH recognizes that we cannot achieve excellent medical practice and research without excellent nursing practice and research.

Visitors a year from now will be struck by the transformation of the physical plant. We have gained much-needed room for expansion with the purchase of nearly six acres of land, plus two buildings with a total area of 80,000 square feet, from Les Soeurs de Sainte-Croix. Sister Annette Legault, Regional Director of Les Soeurs de Sainte-Croix, refused all commercial offers and accepted ours because the Sisters were confident that we are a tertiary-care university teaching hospital that cares about service to the community.

We are going to see a brand new hospital complex: expansion of the Lady Davis Research Institute, development of the Segal Comprehensive Cancer Centre, a new centre of excellence for cardiovascular disease, new and expanded intensive care facilities, and state-of-the-art diagnostic and operating room facilities.

Plans are being implemented to support clinical teams with innovative information technology systems: better communication systems, step-saving medication-dispensing devices that reduce human error, and programs to involve patients and families in acquiring and using online health information.

On August 26–28, 2005, the hospital held The Weekend to End Breast Cancer, a 60-kilometre fundraising walk to benefit cancer care and research. Nurses took part by walking, helping with band-aids, offering drinks or just cheering the participants on.

We look forward to seeing you in the coming year.

Mona Kravitz

*Associate Professor, McGill
Associate Executive Director (Nursing)
SMBD—Jewish General Hospital*



Mona Kravitz



Laurie Barkun (centre) reading the Hippocratic Oath following the 2004 Convocation

The New CSSS System and Nursing Practice in Quebec

What Is a CSSS?

A CSSS is a Centre de santé et de services sociaux, or Health and Social Service Centre.

July 2004 saw the passage of Bill 24, which stipulates that Quebec health-care institutions with various missions, such as hospitals, CLSCs and long-term-care facilities, join forces to better serve their respective populations.

Twelve CSSSs have since been created in Montreal, each with a different composition: five comprise hospitals, CLSCs and long-term-care facilities; six comprise CLSCs and long-term-care facilities; and one is a CLSC only.

Regardless of its composition, each CSSS must tailor its services to the needs of the local population (which varies between 108,000 and 229,000), contracting whatever services are necessary to ensure that every client is guaranteed access to all the health and social services he or she requires.

What Does All of This Mean for the Client?

Each CSSS has four objectives: to provide clients with immediate access to health and social services; to guide clients through the health-care system; to promote healthy lifestyles; and to develop a local network of health and social-service professionals, organizations and businesses.

Is the McGill Model of Nursing Relevant to CSSSs?

Central to situation-responsive nursing, or the collaborative partnership, as it is known in the McGill Model of Nursing, is client empowerment. The McGill Model fits with the role of the nurse in the CSSS system, which places the emphasis on prevention and promotion. In fact the ministry of health stipulates that each CSSS designate a senior manager responsible for prevention and promotion. The important role of teamwork and collaboration among professionals from different institutions means that nurses will have to develop the ability to meet the multiple needs of their clients.

Where Does the Nursing Profession Go From Here?

Under the CSSS structure, nurses exercise their clinical judgement on a daily basis, which requires them to use all of their considerable nursing skills. They have a global outlook and take a holistic view of the client and his or her family. The nurse follows the client through hospitalization, rehabilitation in an institution and recovery in the home environment, ensuring that he or she has ready access to quality services throughout the continuum of care. The nurse helps the client to navigate the health and social-services system whenever necessary, all the while ensuring that the person achieves not only improved health but *sustainable long-term* health and well-being.

In order to fulfil this role, nurses will have to be adequately prepared. It is imperative that all academic institutions and clinical settings collaborate closely in order to meet the needs generated by the CSSSs. Each setting, whether community- or hospital-based, will have a greater role to play in preparing students for the new reality in nursing practice.

This is a crucial moment for the nursing profession. Our nursing leadership must ensure that nurses' professional autonomy is respected, that their creative and strategic abilities are emphasized, and above all that their expertise as frontline professionals is valued. Collaboration between clinical and academic institutions must be reinforced, to ensure continuity of quality care for every client. A collaborative partnership approach at all levels, be it with clients, other professionals or institutions, is one way to begin engaging in this process.

Aline Bourgon

*Director of Nursing, CSSS Côte-des-Neiges, Métro, Parc Extension
Faculty Lecturer, School of Nursing*

Kristen Vitez

Teaching Coordinator, CSSS Côte-des-Neiges, Métro, Parc Extension



25-Year Reunion for BSc(N) Class of '79

The class of 1979 had a lot of spirit then and, a quarter of a century later, does still. With 15 of 38 graduates in attendance and greetings from another six who could not be there, this group helped to make Nursing one of the most represented faculties at Reunion 2005. While we are all much more confident than we were in the late 1970s, and many have accomplished so much both personally and professionally, it was amazing to see how little we have changed (as evidenced by our photo with Mr. Mannequin). It was a wonderful occasion for reminiscing and rekindling friendships, and we would recommend the same experience for others. The Alumni Office makes this type of reunion easy, as it provides the templates and infrastructure to support such events.

Madeleine Buck
BSc(N) graduate '79

Class of '79 with Mr. Mannequin from the Learning Lab. Left to right: Lynn (Peterson) Lowe, Carole Moore Lypaczewski, Madeleine Buck, Janet Woodall, Leslie McGregor, Carol (Werner) MacDougall. Kneeling: Heather Baker Khoury

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Where are our alumnae and alumni now?

We have heard from the class of...

2000s

Rachel Boissoneault BScN '04

“Habituellement, je ne suis pas très bonne pour donner des nouvelles, mais cette fois-ci je tenais à partager mon excitation et mon bonheur. Déjà (mais seulement) 10 mois que je suis infirmière à l'Hôpital neurologique de Montréal et combien enrichissante est mon expérience. J'ai vraiment trouvé 'la place' qui me permet de m'épanouir tout en m'amusant et en souriant. After working on 4 Surgery, I have moved to the Neuro intensive care unit to gain experience. The MNH is really the best of two worlds: a small hospital but part of a big centre; French and English; junior and senior nurses and team members. All these elements make my RN experience extraordinary.”

Helen Fong MScA '04

“Since graduating, I have returned to the MUHC–Montreal Neurological Hospital, 4 Surgery, where I have enjoyed orienting new staff and participating in research projects that have included postoperative pain and bladder management in the neurosurgical population. In June 2004 I prepared a poster presentation of my master's research called 'Becoming Ready to Go Home and to Manage Self-Care: An Exploration of Brain

Tumor Patients and Families' for the Canadian Association of Neuroscience Nurses' annual meeting in Calgary. In 2005 I obtained CNA certification in Neuroscience Nursing.”

Melanie Carrier BScN '02

After completing her degree, Melanie began nursing at the Royal Victoria Hospital in the ICU. After two years there, she sought to explore dimensions of nursing beyond the MUHC. She is now in Boston, working at the Massachusetts General Hospital in the SICU, and is thrilled with the new challenge.

Carol-Anne Lee BN '02

Carol-Anne works at the MUHC–Royal Victoria Hospital site and was recently promoted to Assistant Head Nurse, Urology and Cystoscopy Day Surgery Department. “Let the games begin!”

1970s

Lynda Streeter BN '75

Lynda works part time as a Diabetes Nurse Educator for the Halton Diabetes Program in Oakville, Ontario. She is married with two teenaged sons who are attending university.

Leslie Vincent BScN '75, MScA '84

Leslie is Senior Vice-president of Mount Sinai Hospital in Toronto and Assistant Professor in the Faculty of Nursing at the University of Toronto.

1960s

Dorleen Edna Stem Emerick BN '68

Dorleen has been retired from nursing since 1974 when she gave birth to the first of three daughters. She is now enjoying her grandma years.

Suzanne Dern Green

Teaching/Supervision MED-SRG Nursing '62

Suzanne works as per diem staff relief from April to November at the Veterans Affairs Medical Center in New York State. She is a member of the Honor Society for Nurses, Sigma Theta Tau. In the fall of 2002, 2003 and 2004 Suzanne was a presenter at workshops for Cooperative Extension at Cornell University. She is the author and publisher of *Dysletic Spel-Wel Dictionary: Aphonetic to English Translation*, the 2005 edition of which is now available. She is also the author of *Green's Language/Laterality/Learning/Literacy Guide: A Medical Educational Social Model*, which is written for educators and therapists.

1950s

Mary Gower-Rees Diploma Teaching and Supervision–Pediatrics '55

Mary is retired from nursing and living in a retirement residence in Sidney, British Columbia. She took a trip to Machu Pichu and the Galapagos in 2004. She spends her spare time volunteering at her local hospital and in the Health Department Baby Clinic. Mary hopes to attend the annual alumni dinner for her 90th birthday in 2007.

Looking for Lost Alumnae

Carol Ross: Your classmate Sandra Barbara Reid-Voronka is looking for you.



Members of the class of '79 are in high spirits as they gather at Nancy Feeley's home a quarter of a century on.

What's New with You?

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

NAME _____ DEGREE / YEAR _____

PRESENT POSITION _____

ADDRESS _____

TELEPHONE: HOME _____ BUSINESS _____

E-MAIL _____

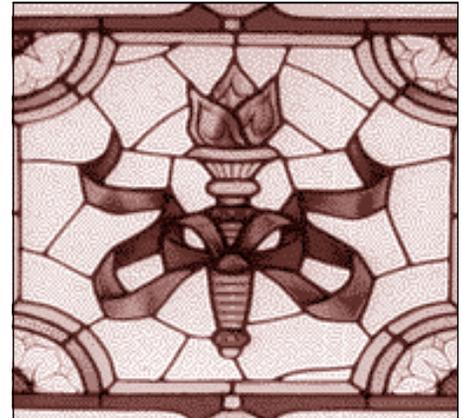
YOUR NEWS _____

ADDRESS OF "LOST" ALUMNAE AND ALUMNI _____

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

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School of Nursing
McGill University
3506 University Street
Montreal, Quebec
H3A 2A7

