

ARCASN

Atlantic Region - Canadian Association of Schools of Nursing



Collaborating: Key to enhanced patient and student outcomes



June 8th to 10th 2017 in Moncton

A partnership between UdeM's and UNB's BN programs

**Conference
program**

2017
ARCASN
Annual
Conference
and AGM

**All activities
held at the
Jacqueline
Bouchard
building**

**UdeM
Moncton**



UNIVERSITÉ DE MONCTON
EDMUNDSTON MONCTON SHIPPAGAN

Collaborating: Key to enhanced patient and student outcomes

2017 Conference Planning Committee

- 🌐 Suzanne Harrison, École réseau de science infirmière, UdeM, co-chair
- 🌐 Kate Weaver, UNB Faculty of Nursing, co-chair
- 🌐 Ann Rhéaume, École réseau de science infirmière
- 🌐 Marilyn Hodgins, UNB Faculty of Nursing
- 🌐 Tina Emond, École réseau de science infirmière
- 🌐 Monique Mallet-Boucher, UNB Faculty of Nursing
- 🌐 Annie Duguay Ferguson, École réseau de science infirmière
- 🌐 Tracey Rickards, UNB Faculty of Nursing

Welcome to Moncton! This is the first time that two different nursing programs (UdeM and UNB) have co-hosted a conference. We knew the time was right to hold a joint conference after working together on the ARCASN executive for the last couple of years. As a result, we chose a conference theme that showcases the benefits of collaboration for both clients and students. Another first for this conference is the inclusion of other health care professionals as guest speakers and presenters. Friday is our interprofessionnal day. But why wait for Friday? Join us Thursday night for an interactive interprofessional simulation activity!

Sue and Kate





Get ready for a mini-ehpic™!!! Workshop on interprofessional education and collaboration

Donna Romano, RN., MSc, PhD, CPMHN(C)

Donna Romano is the Interprofessional Care & Education Leader at UHN and lectures at the Bloomberg Faculty of Nursing at the University of Toronto (UT). Donna began her Nursing studies at McMaster University, receiving her Bachelor of Science in Nursing, while later completing graduate school from the Faculty of Nursing, at UT. Her 20 year Nursing career has specialized in Mental Health Nursing, including clinical and hospital administrative roles. Her clinical and research interests center around the recovery process in first episode schizophrenia, fostering effective inter-professional teamwork, and researching the development of trust on health care teams. Donna was part of the panel that developed a Registered Nursing Association of Ontario RNO best practice guideline for healthy work environments. In 2009, she completed her PhD at the Institute of Medical Science University of Toronto. Her dissertation focused on "Exploring the Process of Recovery from a First Episode of Schizophrenia".

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Lynne Sinclair, MA (Ad Ed), BSc (PT), PT Reg (Ont.)

Lynne Sinclair is the Innovative Program and External Development Lead, Centre for Interprofessional Education (IPE), University of Toronto (UT), an Educational Consultant and was appointed as the first Interprofessional Education Scholar-in-Residence at The School of Community and Health Studies at Centennial College. Lynne holds an appointment as an Assistant Professor with the Department of Physical Therapy, Faculty of Medicine on the Faculty of Medicine. Lynne is widely invited as a keynote speaker for conferences, educational events and courses throughout Canada, the USA, Australia, Denmark and Saudi Arabia. She has been a principal investigator or investigator on numerous education initiatives and research projects. She has been the Associate Director at the Centre for IPE at UT and has served as the Associate Chair of the Department of Physical Therapy at UT. Lynne's passion for physical therapy and interprofessional education was ignited during her seven years at Toronto Rehabilitation Institute where she was the Director of Education for 12 health disciplines. She was awarded the 2008 UT Faculty of Medicine - Helen P. Batty Award in Faculty Development for Teaching Excellence along with an Honorary Bachelor Degree in Applied Studies by Humber College Institute of Technology and Advanced Learning in June 2013.

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Conference Schedule " At A Glance "

Date/Time	Activity	Location
Thurs June 8 th , 2017		Jacqueline Bouchard (JB) Bldg Université de Moncton
12:00-17:00	CASN Digital Health Workshop - Moncton	Open space ground level
18:00-19:00	ARCASN executive meeting	164 JB
19:00-20:30	Interprofessionnal simulation and wine and cheese	164JB and 180JB (lab)
Frid June 9 th , 2017		
7:30-8:30	Registration	Open space ground level
8:30-9:00	Greetings (President, Dean FSSSC)	Open space ground level
9:00-10:15	Interprofessionnal Collaboration Workshop, part 1	Open space ground level
10:15-10:45	Health Break, visit sponsor kiosks, visit posters	Open space ground level
10:45-11:45	Interprofessionnal Collaboration Workshop, part 2	Open space ground level
12:00-13:30	Lunch and ARCASN AGM, visit sponsors, visit posters	Open space ground level Sponsors (092JB) Posters (094JB et 096JB)
13:30-14:55	First concurrent session A, B and C	010JB, 086JB, 170JB
14:55-15:15	Health Break, visit sponsor kiosks, visit posters	Open space ground level Sponsors (092JB) Posters (094JB et 096JB)
15:15-16:40	Second concurrent session A, B and C	010JB, 086JB, 170JB
16:40-17:00	End of day one remarks, draw for prizes	Open space ground level
19:00	McSweeney's supper theatre	700 main Street
Sat June 10 th , 2017		
8:00-8:30	Registration	163JB
8:30-9:00	Greetings (Dean UNB/director UdeM)	163JB
9:00-10:25	Third concurrent sessions A and B	086JB, 170JB
10:25-10:50	Health Break and visit to sponsor kiosks	Open space ground level Sponsors (092JB) Posters (094JB et 096JB)
10:50-11:45	Fourth concurrent sessions A, B and C	010JB, 086JB, 170JB
11:50-12:30	Closing speaker	163JB
12:30-12:40	Final remarks, draw for prizes, acadian sweet treats for the trip home	163JB

First Concurrent Sessions, Friday June 9th (1330 to 1455)

Session A: Collaborations for Enhanced Patient Outcomes

Time	Presenter	Title	Campus
1330 to 1355	KEEPING-BURKE, Lisa	Women in addiction recovery: Understanding the journey	UNBSJ
1400 to 1425	WILSON, Tanya	Seeing beyond the eating disorder: New Brunswick health professionals' knowledge, skills, and experiences in eating disorder care	UNBF
1430 to 1455	MANUEL, April	"Lend me your ears": Engaging the hearing loss community in research	MUN

Session B: Collaborations for Enhanced Student Outcomes

Time	Presenter	Title	Campus
1330 to 1355	MALLET-BOUCHER, Monique	Using collaboration and cognitive science to foster student learning in clinical courses	UNB-M
1400 to 1425	HERBERT, Rosemary	Students' perspectives on collaborative global health experiences and competencies	UPEI
1430 to 1455	MANNING, Glenda	More than meets the eye: Understanding the client not just seeing the behaviour (A clinical simulation activity for mental health nursing students)	MUN

Session C: Other Innovations in Education, Practice, and Research

Time	Presenter	Title	Campus
1330 to 1355	COBBETT, Shelley	Facilitating dosage calculation competency: Instructional scaffolding throughout the curriculum	Dal
1400 to 1425	MORAN, Glenys	Students' experience writing the NCLEX-RN at the Centre for Nursing Studies, St. John's NL	MUN
1430 to 1455	McCLOSKEY, Rose	Changes in knowledge, attitudes, and interest in older adults as student progress through an undergraduate nursing program	UNBSJ

Second Concurrent Sessions, Friday June 9th (1515 to 1640)

Session A: Collaborations for Enhanced Patient Outcomes

Time	Presenter	Title	Campus
1515 to 1540	DUPUIS-BLANCHARD, Suzanne	Joining forces for aging in place research	UdeM
1545 to 1610	LUKEWICH, Julia	Nursing within primary care settings in Atlantic Canada: A scoping review	MUN
1615 to 1640	MacNAUGHTON-DOUCET, Lisa	The biologist, the nurse, and the health educator: 'Tips to outsmart ticks'	Dal

Session B: Collaborations for Enhanced Student Outcomes

Time	Presenter	Title	Campus
1515 to 1540	CHASSE, France	L'apport de la competence culturelle dans la formation infirmiere: les resultats preliminaires	UdeM
1545 to 1610	EMOND, Tina	La collaboration entre etudiants: Programme de mentorat au Secteur science infirmiere de l'Universite de Moncton, campus d'Edmundston	UdeM
1615 to 1640	HACHEY, Caroline	L'utilisation d'une vignette lors d'une étude qualitative (The use of vignettes in a qualitative study)	UdeM

Session C: Other Innovations in Education, Practice, and Research

Time	Presenter	Title	Campus
1515 to 1540	LAMSWOOD, Jennifer	A new model of mental health clinical learning: An undergraduate BN student evaluation	WRSN
1545 to 1610	WALSH, Audrey	Academic-practice partnerships in the classroom: The practice informed case study	Cape Breton
1615 to 1640	MANUEL, April & LUKEWICH, Julia	Predictors of success on the NCLEX-RN: A systematic review	MUN

First Concurrent Sessions, Saturday June 10th (0900 to 1025)

Session A: Collaborations for Enhanced Patient Outcomes

Time	Presenter	Title	Campus
0900 to 0925	MacDONALD, Marilyn	Interprofessional research and practice teams collaborating to drive care	Dal
0930 to 0955	READ, Emily	Working together: A qualitative exploration of positive nursing relationships	UNB
1000 to 1025	Rhéaume, Ann	The impact of long work hours and shift work on cognitive errors in nurses	UdeM

Session B: Other Innovations in Education, Practice, and Research

Time	Presenter	Title	Campus
0900 to 0925	ROY, Lilla	Supporting "The lost cohort": Investigating the transition to a new curriculum from the perspective of current curriculum undergraduate nursing students	Cape Breton
0930 to 0955	SECCO, Loretta	Nurse educators' perspectives on mobile information & student critical thinking	UNB
1000 to 1025	KEEPING-BURKE, Lisa	Getting there: Collaboration for success during a systematic review process	UNBSJ

Second Concurrent Sessions, Saturday June 10th (1050 to 1145)

Section A: Collaborations for Enhanced Patient Outcomes

Time	Presenter	Title	Campus
1050 to 1115	MONAGHAN, Joelle	Collaboration between sectors: Educating nurses on first time mothers use of online resources	Dal
1120 to 1145	MacPHEE, Cyndee	Providing better breastfeeding support for mothers who need it most	Cape Breton

Section B: Collaborations for Enhanced Student Outcomes

Time	Presenter	Title	Campus
1050 to 1115	COBBETT, Shelley	How do we know if what we are doing is effective? A developmental program evaluation plan	Dal
1120 to 1145	WEAVER, Kathryn	Metaphors of interdisciplinary collaboration to overcome the theory-practice gap when transitioning from RN to Advanced Practice Nurses	UNB

Section C: Other Innovations in Education, Practice, and Research

Time	Presenter	Title	Campus
1050 to 1115	REDMOND, Sandra	A, B, or C? A collaborative approach. Applying decades of evidence to multiple choice assessments	Dal
1120 to 1145	HODGINS, Marilyn	A collaboration to examine patients' use of acute care services within 30-days of hospital discharge	UNB

Posters		
Presenter	Title	Campus
ADIABAT, Khaldoun	Application of the PRECEDE-PROCEED Model to Promote Implementation of Evidence Based Practice by Nurses in New Brunswick	UNB, M
BREAU, Myriam	La recherche narrative au service de l'amélioration de la qualité de soins aux unités de soins intensifs	UdeM
FLEXNELL, Meaghan	Making theory matter: Integration of theory in nursing curriculum	UNBSJ
HODGINS, Marilyn	Lessons learned by piloting a collaborative, longitudinal investigation of the transition from hospital to home	UNB
LeBLANC, Adele	Student's perception of the impact of curricular design on mental well-being: Setting the stage	Dal
LITTLE, Victoria	Creating a provincial academic-research-education-practice partnership in public health	Dal
MacMULLEN, Jill	Giving a voice to adolescents living with a sibling with chronic illness	Cape Breton
MANUEL, April	Measuring the effectiveness of high fidelity simulation in interprofessional education to foster teamwork among undergraduate nursing, medicine, and pharmacy students: A pilot study	MUN
MANUEL, April	What are the experiences of aging nurses who live and work with a chronic illness: A phenomenological study	MUN
READ, Trudy	Teaching nursing students to be communicative & collaborative (creatively!): Moving from 'talking the talk' to 'walking the walk'	MUN
SCHOFIELD, Gladys	Baccalaureate nursing students: Does participation in a welcome to the nursing profession ceremony and adoption of a standardized uniform enhance their sense of professional identity?	MUN
WAYCOTT, Loretta	Survive or thrive? Entering nursing academia	Athabasca

ORAL PRESENTATIONS

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Autres Auteur(e)s

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Titre

L'apport de la compétence culturelle dans la formation infirmière: les résultats préliminaires

Abrégé

Plusieurs universités canadiennes offrent l'opportunité aux étudiants de poursuivre leur programme d'étude en pays étranger, pour un semestre ou plus. Les programmes de formation en soins infirmiers reconnaissent également les nombreux bénéfices tirés des expériences de soins à l'international. Toutefois, la contribution de la compétence culturelle à la formation infirmière demeure encore, à ce jour, peu définie. Cette étude qualitative vise à explorer l'apport de la compétence culturelle au sein de cinq grands domaines de compétences de la formation infirmière, soit la démarche de soins, la relation d'aide thérapeutique, les responsabilités éthiques professionnelles et légales, la collaboration interdisciplinaire, ainsi que l'épanouissement personnel et professionnel de l'étudiante. La méthode adoptée est l'examen de critique réflexive d'événements marquants qui sont survenus lors de l'expérience de l'étudiante à l'étranger. Les informations recueillies et analysées proviennent de 36 rapports d'événements marquants produits par 12 étudiantes infirmières de l'UMCE ayant participé à une expérience clinique à Haïti, au printemps 2015 et 2016. Parmi les événements marquants ayant le plus contribué à l'apprentissage des étudiantes figurent, entre autres, les défis éthiques liés au respect et à la dignité du patient, la relation infirmière-patient/famille et les différentes pratiques des soins de santé. L'examen d'un plus grand nombre de rapports est nécessaire pour mieux décrire l'apport de la compétence culturelle dans la formation infirmière.

Remarques

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Title

Facilitating Dosage Calculation Competency: Instructional Scaffolding throughout the Curriculum

Abstract

The issue of mathematical competency and its direct relationship to patient safety within the context of medication calculations is essential in nursing education (McMullan, Jones & Lea, 2010; Warburton, 2010; Wright, 2009, 2010). The importance of fostering numeracy competence in nursing students is elevated when one considers that up to 40% of a nurses' workload involves medication administration (Meechan, Jones, & Valler-Jones, 2011) and approximately 33% of medication administration errors are attributable to incorrect dosage calculations (Hodge, 1999). Nursing students often perform poorly on math exams (Beall, Roebuck, & Penkalsky, 2015). Current literature reveals inconsistencies in the approaches used by academics to enhance the student nurse's medication calculation abilities (Stoic, 2014). Ensuring patient safety must include a variety of factors, including perceived self-efficacy related to medication calculation (McMullan, Jones & Lea, 2010). Managing safety risks includes the ability to calculate, prepare and safely administer medications correctly, thus contributing to a culture of patient safety (CPSI, 2009). This presentation will share the results of our math readiness assessment pilot study and our approach to instructional scaffolding of dosage calculation competency in our BScN Curriculum. Scaffolding levels of instruction across the curriculum will be shared, with practical examples of learning objectives and activities at each level, moving from foundational numeracy assessment and learning resources, to content, to specialty situations, and culminating in contextual learning problems. By fostering a sound numeracy competency, meaning and context, and teaching drug calculation formulae while providing practical calculation examples demonstrate improved outcomes (Wright, 2005, 2009) for students, ultimately increasing patient safety.

References (space limitation would not allow reference list; available upon request)

Notes

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Title

How Do We Know If What We Are Doing is Effective? A Developmental Program Evaluation Plan

Abstract

With the introduction of a new or revised curricula, the importance of having a clear, concise program evaluation framework that outlines a consistent evidence-informed approach to evaluation is of paramount importance. A developmental approach to evaluation is beneficial when a program is new and innovative, and expected to grow and change through implementation. This approach is designed to be rigorous, but flexible to incorporate ongoing learning, and changes in implementation. This flexibility is particularly relevant in complex, ever changing environments. Schools of Nursing are situated in complex settings where there are a wide variety of influential factors. For example, changes to the service sector environment, or the health care system may occur and can be unpredictable. Through ongoing evaluation, evidence can be readily available to inform program adaptation to meet changes in the environment. With ongoing data collection, some of the learnings may be that data collection tools or methods may need to change and this evaluation is designed to adapt and change based on those learnings. Regular data collection will provide evidence for ongoing quality improvement through the process of framing the issue, testing iterations, and tracking the trajectory of the innovation or change. The purpose of the presentation is to share our Evaluation Project Plan designed to evaluate the curriculum for excellence in baccalaureate nursing education and best pedagogical practices. The plan evaluates educational processes and outcomes related to the development of the learner as a professional nurse in addition to ensuring that accreditation and approval standards are being met.

Notes

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- -

Title

Joining Forces for Aging in Place Research

Abstract

Purpose: The purpose of this program of research is to enhance the aging in place experience for older adults and their families through a number of projects ranging from understanding seniors' experience, to family views of their senior loved one aging at home, to community organizations service delivery model, and age-friendly communities. The presentation will demonstrate how researchers need to collaborate with different groups to achieve change.

Background: It is well known that older adults want to age in place. In fact, 92% of adults over the age of 65 years live in the community, outside institutions, in Canada. Research on aging in place has focused on many aspects of the phenomena in the last few years but strides towards effective change and solutions to help seniors stay in their home remain elusive.

Approach: Methodology for our projects have been of the standard quantitative and qualitative but our approach has been one of collaboration with seniors, communities, government and other groups interested in a better outcome for aging in place.

Results: Through a collaborative approach, communities have prioritized actions to keep seniors in the community and groups who had never collaborated are now working together to provide services.

Conclusion: Researchers have long known the value of collaborating with other researchers but there is also much worth in expanding collaborations to community groups. Our research outcomes would not be possible without collaboration!

Notes

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Autres Auteur(e)s**Titre**

La collaboration entre étudiants: Programme de mentorat au Secteur science infirmière de L'Université de Moncton, campus d'Edmundston

Abrégé

Type de projet: Initiative pédagogique

Introduction: Les études au baccalauréat en science infirmière peuvent apporter des sources de stress pour les étudiants. Certaines recherches ont déjà fait mention des bienfaits apportés par des programmes de mentorat lors des études en science infirmière (Myall, Levett-Janes & Lathlean, 2008). À L'Université de Moncton, campus d'Edmundston, un programme de mentorat étudiant a été implanté en 2008. Ces étudiants agissent comme des modèles de rôle auprès des autres étudiants. Les étudiants-mentors offrent des disponibilités aux étudiants afin qu'ils puissent les rencontrer pour discuter de leurs besoins; que ce soit au niveau académique ou personnel. Cette collaboration entre étudiants facilite une meilleure harmonie dans leur programme d'étude. En plus, le programme de mentorat favorise une collaboration avec les professeures du Secteur science infirmière.

Parmi les objectifs visés par le programme de mentorat, notons le fait de faciliter l'adaptation à la vie universitaire; d'encourager la participation aux activités étudiantes; de développer un sentiment d'appartenance à la vie étudiante au secteur concerné et au campus; de favoriser la communication entre les étudiants et le corps professoral et de favoriser la collaboration entre les étudiants du Secteur science infirmière. De plus, le programme de mentorat est en lien étroit avec celui de l'appui à la réussite, qui joue un rôle important au sein de l'Université.

Conclusion: L'évaluation du programme de mentorat auprès des étudiants s'avère très positive; la majorité des étudiants (86 %) indiquent que les mentors fournissent des renseignements utiles et 89% se disent satisfaits des services reçus. En plus, le programme de mentorat a reçu des commentaires élogieux lors de l'évaluation des programmes en science infirmière.

Notes

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Titre

L'utilisation d'une vignette lors d'une étude qualitative

Abrégé

Dans le cadre de ma thèse de maîtrise, mon but principale est de mieux comprendre les facteurs influençant la décision des infirmières à utiliser des méthodes de confort lors d'une prodécure douloureuse chez les enfants. Des vignettes seront utilisées afin de m'aider à mieux comprendre les opinions, les intentions, le processus décisionnel et le jugement clinique des infirmières (Aguinis & Bradley, 2014; Barter & Renold, 1999 Brauer & al., 2009; Evans & al., 2015). Les vignettes sont souvent utilisées lorsqu'il y a une possibilité que le répondant puisse se sentir inconfortable à répondre aux questions de recherche (Barter & Renold, 1999; Goud, 1996). Par exemple, dans le cadre de ma recherche, le répondant pourrait être hésitant à expliquer qu'il ne fait pas toujours un effort à utiliser des méthodes de confort afin de diminuer la douleur et l'anxiété de l'enfant durant une procédure douloureuse. En utilisant la vignette pour initier l'entrevue, le répondant aura l'opportunité d'expliquer ce qu'il pense des décisions du personnage de la vignette, au lieu de parler de sa propre expérience. Cette présentation orale décrira l'historique des vignettes utilisées en recherche ainsi que les avantages et les désavantages de leur utilisation. Les étapes utilisées pour la création et la validation des vignettes utilisées dans la thèse de l'étudiante seront décrites. Étant donné que les vignettes sont souvent utilisées dans le cadre d'une recherche quantitative, il sera intéressant de voir comment les vignettes aideront avec la recherche qualitative de l'étudiante qui aura lieu à l'automne 2017.

Remarques

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Title

Students' Perspectives on Collaborative Global Health Experiences and Competencies

Abstract

Background: Rapid globalization and widespread migration necessitate that nurses world-wide are well versed in global health, and that nursing curricula prepare students to be global citizens. This study describes the perspectives of undergraduate nursing students concerning their global health experiences and outlines the collaboration that was used to create these experiences.

Purpose:

- . To describe interprofessional collaborations used to create global health experiences.
- . To explore nursing students' global health experiences and their perceptions regarding global health competencies.
- . To gain a deeper understanding of global health competencies that could be adopted to guide the development of nursing curricula.

Approach: Three focus group interviews were conducted with twelve participants who participated in a global health experience. The focus groups were held pre-departure, upon return, and six months following the experience. Participants reflected on their preparation, experiences, and on global health competencies for nurses articulated by Wilson et al. (2012).

Results: Students emphasized the importance of their global health experiences. They generally agreed with Wilson's Global Health Competencies, however they did suggest that country-specific information rather than general knowledge would be more relevant for some competencies. They articulated that knowledge of the determinants of health, in particular culture, was essential, and suggested that culture needs to be more explicit in Wilson's competencies.

Conclusions: Findings from this longitudinal study will help inform curriculum development in nursing education

Notes

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Title

A collaboration to examine patients' use of acute care services within 30-days of hospital discharge

Abstract

BACKGROUND: Unplanned re-entry into the acute care system by recently discharged patients is costly not only to the healthcare system but also to patients and their families. Unplanned re-entry has been described as an indicator of treatment failure and as potentially preventable.

PURPOSE: Objectives were to examine incidence of acute care service use (hospital readmission or emergency department visit) by patients within 30 days of a discharge to home and to describe patients' demographic and clinical profile.

APPROACH: Analyses were conducted of 13-months of administrative data and 19351 discharges from one tertiary hospital. The majority of discharges (84.6%) were to home.

RESULTS: There were 1604 readmissions within 30-days of discharge, representing 8.3% of discharges. The odds of readmission was higher for men than women. Although the odds of readmission was lower for those less than 35 years of age, no significant difference was observed among older age groups (Years 35 to 64, 65 to 79, 80 or older). Approximately one-third (36.7%) of 30-day readmissions involved those aged 35 to 64 years. Of cases discharged home, 12.2% (n = 2,004) visited the emergency department (ED) within 30 days. Almost half of these ED visits occurred within 7 days with more than 200 within 24 hours of discharge.

CONCLUSION: Reported rates of re-entry are likely conservative as analysis involved data from only one facility. An unexpected finding was the high rate of re-entry by patients aged 35 to 64 years, which challenges the assumption that problems during transition from hospital to home primarily involve the elderly.

Notes

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Title

A New Model of Mental Health Clinical Learning: An Undergraduate BN Student Evaluation

Abstract

Background: Nursing faculty, at Western Regional School of Nursing (WRSON), have struggled with how to best deliver quality practice experiences in Mental Health Nursing in light of recent changes to clinical placements. Traditional clinical placements in acute and community mental health settings were no longer feasible due to shortage of clinical placements and limited capacity of students in the clinical areas. Therefore, nursing faculty were tasked with developing a new model for mental health clinical. To enhance the mental health clinical experience, the new clinical placement model utilized student placements in: acute mental health, community mental health, protective community residences, protective care unit, and structured clinical learning sessions.

Purpose: The purpose of this presentation is to discuss the findings of the student evaluation of the new mental health clinical placement model.

Approach: Fifty-one students completed an evaluation survey of their clinical experiences under the new mental health clinical placement model. The survey used a Likert type scale that evaluated student perceptions of how experiences in each applicable clinical area aided them in meeting learning objectives for the clinical course.

Results: Results from this evaluation do not support the use of non-traditional clinical models in the delivery of practice experiences in mental health. While traditional clinical placements were rated positively, the protective community residences and protective care unit were rated negatively.

Conclusion: The findings from this evaluation have implications for future delivery of mental health clinical at WRSON. As well, the findings from this evaluation have possible implications for nursing schools with similar clinical placement issues.

Notes

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Title

Nursing within Primary Care Settings in Atlantic Canada: A Scoping Review

Abstract

Background: Newfoundland and Labrador (NL) ranks among the highest in Canada for risk factors for and the prevalence of chronic diseases. The province has committed to working towards reforming primary care delivery through the integration of interdisciplinary primary health care teams. As interdisciplinary models of care are becoming more prominent within Canadian healthcare systems, so are the roles of nurses, including nurse practitioners (NP), registered nurses (RN), and licensed practical nurses (LPN).

Purpose: A scoping review was conducted to examine and synthesize evidence related to nursing in primary care settings across Atlantic Canadian provinces (i.e. New Brunswick, Newfoundland and Labrador, Nova Scotia, Prince Edward Island).

Methods: Joanna Briggs Institute scoping review methodology was used. The Nursing Role Effectiveness Model was used to define nursing variables of interest and organize study findings.

Results: A total of 20 articles were included in the review. RNs and NPs in primary care settings were well-represented in the literature, while no articles focused on LPNs. Emphasis on interdisciplinary collaboration was evident. However, the function of nurses in primary care was found to be limited by institutional constraints and influence of other providers. Nursing roles in primary care settings consisted primarily of chronic disease management, education, and health promotion. Primary care settings that incorporate nurses were found to be related to positive patient health outcomes, improved access to services, and high patient satisfaction.

Conclusions: Nurses are a valuable part of interdisciplinary primary healthcare teams in Atlantic Canada. Clarification of the role of nurses in chronic disease management, health promotion, and preventive care is needed. There is considerable potential for future research into the specific attributes of nursing and primary care teams that result in positive patient and system outcomes.

Notes

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Title

Interprofessional Research and Practice Teams Collaborating to Drive Care

Abstract

Cystic Fibrosis (CF) is a complex disease, and requires a team of healthcare experts that includes patients and families working together to manage this disease. The team operates in a regional clinic setting. In the course of a current research project studying medication adherence in adults with CF we observed the work of this team first-hand, including team members in our study. Recognizing the value and impact of interprofessional care we assembled an interprofessional team of researchers and interviewed individuals with CF, family members, and care team members to understand the experiences of those involved related to medication adherence. The goal of the project is to generate a theory about adherence to guide clinical practice and to inform strategies that contribute to self-management among adults with CF. I will outline the investigators backgrounds, the study sample, how their expertise contributed to the research/analysis and to the development of a product relevant to all involved.

Notes

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Title

Using Collaboration and Cognitive Science to Foster Student Learning in Clinical Courses

Abstract

In their systematic review of clinical assessment in nursing education, Wu, Enskar, Lee, and Wang (2015) identified the need to develop new and holistic models of clinical assessment that nurture the learner through instructor-student collaboration and facilitate the development of competent nursing practice.

This presentation will discuss the use of transcendental phenomenology to explore the lived experience of nursing students with formative assessment (FA) in clinical courses. The research question guiding the study was: How is the phenomenon of assessment experienced by nursing students when FA is formally embedded in clinical courses? Inherent in this question were the following issues: (a) the meaning of clinical experiences for nursing students, (b) the meaning of being assessed through FA, and (c) what it is like to be assessed when FA is formally embedded within clinical experiences.

The findings presented suggest a fundamental paradigm shift from traditional nursing education to a more pervasive integration of FA in clinical courses so that students have time to learn before being graded on their practice. Relating the findings of this study with the education literature provided evidence that a more deliberate integration of formative assessment into clinical nursing courses might contribute to shift students' conceptualization of clinical environments from evaluation grounds to learning grounds where the student-instructor relationship contributes to enhance students' potential for learning in clinical courses (Anema & McCoy, 2010; Catalano, 2012; Del Prato, 2010; McCutchan, 2010; Germann & Gaberson, 2014).

Besides the findings, recommendations for future research will be presented.

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Title

More Than Meets the Eye: Understanding the Client Not Just Seeing the Behaviour
(A Clinical Simulation Activity for Mental Health Nursing Students)

Abstract

Background: Simulation that represents realistic clinical situations can be a valuable learning tool in mental health nursing education. It provides students not only with a means to apply learned theoretical concepts but a safe environment in which to do so. Simulation can help enhance student understanding of client illness, symptoms, and perceptions.

Purpose: The purpose of the simulated activity was to provide third year baccalaureate nursing students, enrolled in a mental health clinical course, an opportunity to gain insight into how to interact with and care for clients living with a mental illness.

Activity: The developed simulation activity was piloted in the fall of 2015 (n=22) and consisted of three individual scenarios that highlighted the symptoms of: auditory hallucinations; visual hallucinations; obsessive thoughts and compulsive behavior. Upon receipt of the ARCASN 2016 Education Development Fund Award, the piloted simulation activity was expanded both in student participants (n=40) and scenarios (depression). Each scenario was comprised of three different components: the briefing; the simulated activity; and the post-scenario debriefing. To further enhance the activity, faculty and student preparation guides were also developed.

Results: Evaluations were completed anonymously using a Likert scale and open-ended questions. Feedback was very positive with recommendations that the activity be offered to all future nursing students enrolled in the mental health clinical course.

Conclusion: Given the success of the simulated activity, incorporation into the nursing curriculum for baccalaureate students and adaption for nursing staff orientation in mental health settings should be considered. As well, this simulation could be adapted for use in other undergraduate programs for those who will be employed in mental health settings.

Notes

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Title

Predictors of Success on the NCLEX-RN: A Systematic Review

Abstract

BACKGROUND: In the past, nursing graduates were required to successfully complete the Canadian Registered Nurse Examination (CRNE) to become a Registered Nurse. In January 2015, it was replaced by the National Council Licensure Examination (NCLEX-RN). Since this change, the first time pass rate on licensing exams across Canada has decreased considerably. Of Canadian writers, only 69.7% were successful in passing the NCLEX-RN. In 2015, the pass rate on the NCLEX-RN ranged between 50.3% - 84.2% across provinces/territories compared to 86.1% to 89.8% for first-time Canadian writers on the CRNE.

PURPOSE: The goal of this project was to conduct a scoping literature review to identify the factors that predict success/failure for nursing graduates on the NCLEX-RN.

APPROACH: A scoping review using Joanna Briggs Institute (JBI) methodology was conducted to identify quantitative and qualitative studies focused on predictors of success for the NCLEX-RN.

RESULTS: A total of 25 studies met inclusion criteria. Predictor of success on the NCLEX-RN exam included a high GPA, grades in nursing courses (e.g., medical-surgical nursing), clinical performance, the completion of a comprehensive predictor test/program, previous post-secondary education, and age.

CONCLUSION: The literature review has identified predictors of success for the NCLEX-RN. The findings from the review will inform future research that will focus on the development of a database that will examine relationships between identified predictors and success on the NCLEX-RN.

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Title

Changes in knowledge, attitudes and interest in older adults as student progress through an undergraduate nursing program

Abstract

Background: Nursing programs have a responsibility to prepare future practitioners to care for the growing number of older adults who will be accessing health care. Preparation involves ensuring students have the knowledge, skills and desire to provide quality care to older adults.

Method: A longitudinal study on nursing students' knowledge of, attitudes towards, and interest in caring for older adults was conducted. Data was collected using: i. Palmore's Facts on Aging Quiz; ii. Kogan's Attitudes about Older People Scale; and iii. Survey on work preferences after graduation. Data was analyzed using multivariate multilevel logistic regression, poisson regression and descriptive statistics.

Results: No significant differences were noted in students overall knowledge and attitudes towards older adults after completing an undergraduate nursing degree. Cumulative improvements were noted between students' first clinical experience and graduation, but not between some years of the nursing program. Students older than 30 scored higher in both knowledge and attitudes. Gerontology was not a common 1st or 2nd career preference at any point of the study.

Conclusions: Given the likelihood that future nurses will be required to care for older adults, there is a need for nursing programs to evaluate the adequacy of gerontological content in curricula. Concerted efforts to improve students' attitudes towards older adults and for nursing programs to present gerontology as a challenging and rewarding career choice are needed.

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Title

Collaboration between sectors: Educating nurses on first time mothers use of online resources

Abstract

Background: Historically, mothers have turned to their social networks of family, friends and health care providers for support during their early postpartum period. Recently, formalized postpartum care delivery is changing with supports and information being made available online. As well, more mothers are connecting online through virtual social networks. Nurses have limited understanding of how online resources are used and what impact they have on mothers' decisions to access traditional health services.

Purpose: To enhance our current understanding of first-time mothers' practices accessing online resources and services during the first 6 months postpartum, across Nova Scotia. Specifically, we will provide information about where mothers go for information and support, why they choose certain resources and services, and how relations of power affect their practices.

Approach: Feminist poststructuralism methodology enabled an examination of how mothers' experiences searching for and accessing postpartum support were socially and institutionally constructed. Data collected through 1) online forums 2) focus groups 3) e-interviews were analyzed using discourse analysis.

Results: Most of the mothers in our study identified online networks as a significant means to connect with other mothers for advice and to gain support in the form of normalization and validation. Most mothers described a preference for information to come from a variety of sources and described critically analyzing advice received, including information from health care providers.

Conclusion: Nurses have a role in helping mothers navigate. Understanding mothers' information seeking practices provides nurses insight into how they can best support and meet mothers' needs and do more than simply impart information.

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Title

Students' Experiences Writing the NCLEX-RN at the Centre for Nursing Studies, St. John's, NL.

Abstract

In 2015, ten provincial/territorial registered nursing regulatory bodies implemented the US-developed NCLEX-RN as the entry-to-practice examination. Soaring failure rates across the country and questions about whether or not this exam is an appropriate assessment tool for Canadian entry-level nurses, has stimulated considerable discussion and debate. Given this, it was important to explore students' perceptions in order to inform nurse educators about approaches to facilitate student success. In 2015, a two phase mixed-methods study was conducted with first-time writers, pre and post writing of the NCLEX-RN. Results indicated that although students felt well informed about the NCLEX-RN, they were concerned about comprehensive testing, writing computerized adaptive tests, American content, and being first-time writers. Results from phase II indicated that students felt the exam was harder than expected and that the US-developed exam affected their outcomes. Students provided recommendations for faculty to facilitate student success. In 2016, a follow up study was conducted to compare and contrast the 2016 graduates' experiences with those of first-time NCLEX-RN writers (2015). Students were also asked about the usefulness of preparatory resources identified by first-time writers. In this presentation, we will highlight the themes that arose out of the analysis of the data from both studies and discuss implications for nursing education.

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Title

Working Together: A Qualitative Exploration of Positive Nursing Relationships

Abstract

Background

While positive nursing relationships are a key determinant of nurse-nurse collaboration in the workplace, relatively little is known about nurses' qualitative perspectives on what contributes to high quality relationships. Quantitative researchers have reported high rates of incivility among nurses and role of peer-peer nurse relationships as a mediating factor to improve job satisfaction. However, few qualitative studies have explored descriptions of positive relationship to identify factors they identify as salient to promote collaboration within the nursing team.

Purpose

The goal was to explore factors that nurses identified as contributing to positive relationships with nurses in the workplace.

Approach

An online survey about nurses' social relationships at work was sent to 2,000 Registered Nurses in Ontario (July-Sept 2015) and Alberta (Sept-Nov 2016). A total of 500 nurses responded and of these, 85 provided responses to an open-ended question "Is there anything else you wish to share regarding your workplace relationships on your unit?" The data were analyzed using a systematic qualitative coding approach in NVivo software.

Results

Nurses described both positive (45/81; 55.6%) and negative (21/81; 25.9%) statements about their relationships with nurses in the workplace. Thematic coding of the positive relationship statements identified Cohesion or 'working together' as the major theme with several subthemes that included 'bond', 'support', 'shared interests' and 'positive processes'. Negative relationship themes were related to the 'work environment', 'nurse personality', and 'inter-professional disrespect'. The results help inform recommendations for practice and education on ways to understand and promote positive nurse-nurse relationships and collaboration.

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A, B, or C? A Collaborative Approach Applying Decades of Evidence to Multiple Choice Assessments

Abstract

Multiple choice questions (MCQs) are a commonly used testing format in nursing education as well as in other disciplines. Astoundingly, nearly a century's worth of evidence exists to support the use of three versus four or five option MCQs as the optimal number of option choices to provide a valid and reliable test result (Haladyna & Downing, 1993; Redmond, Hartigan-Rogers & Cobbett, 2012; Tarrant & Ware, 2010; Vyas & Supe, 2008). A quasi-experimental between groups study was collaboratively conducted in three post-secondary institutions offering a four-year undergraduate baccalaureate nursing program in three Canadian provinces. The purpose of this replication study was to investigate the psychometric properties of three option MCQs when compared to the more traditional four option questions in nursing assessments. A total of 1264 assessment questions included in the testing of 913 nursing students spanning eight clinical and non-clinical courses were examined as part of the study. The purpose of the presentation is to share the findings of the current research and provide further guidance for nurse educators to assist in improving MCQ writing and test design. Additionally, the question as to why there is reluctance to adopt this testing format, despite the rich and varied body of evidence that supports such a necessary change in practice will be addressed.

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Title

The impact of long work hours and shift work on cognitive errors in nurses

Abstract

Background: Twelve-hour shifts are more commonly used in hospital settings and there is growing concern over the impact that extended and irregular work hours have on nurses' well-being and performance.

Purpose: The purpose of this pilot study was to examine the impact of long work hours and shift work on cognitive errors in nurses.

Approach: Twenty-eight nurses working different shifts (8-hour days and 12-hour rotation) participated in this study. Nurses were assessed at the beginning of four consecutive shifts using actigraphy, a sleep diary and an after work survey.

Results: Nurses working 12-hour rotations had less total sleep time and less sleep efficiency than 8-hour day nurses. Twelve-hour rotation nurses also napped more than their counterparts. There were no differences between the two groups with respect to cognitive errors.

Conclusions: Twelve-hour rotations have a negative affect on nurses' sleep patterns. There is no evidence indicating 12-hours rotations increased errors. Nurse administrators can implement specific countermeasures, such as planned napping, to reduce the effects of disturbed sleep patterns in nurses.

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Title

Supporting "The Lost Cohort": Investigating the transition to a new curriculum from the perspective of current curriculum undergraduate nursing students

Abstract

Background: During the process of transitioning from a content-based, four-year curriculum to a new concept-based, three-year one, faculty must be particularly sensitive to the learning needs of two unique cohorts of students.

Objectives: The purpose of this research was to explore nursing students' experience in their current nursing program during the transition to a new curriculum.

Method: BScN students, from all years of the current program, were invited to participate in the 90-minute focus group. A script was developed with questions to guide facilitation of the focus group. Recordings of the focus group were transcribed and analyzed using thematic analysis.

Results: 25 students participated, of which 88% percent were female, 56% were under 23 years of age, and 92% were originally from Cape Breton. Students expressed support for many aspects of their nursing program and their experience as a whole. A variety of emotions emerged, including confidence, frustration, confusion, and a sense of "being left behind" and "lost" in the transition to the new program, particularly in the last cohort. Concerns about being heard, a dislike of "constant change", uncertainty about the impact of the phasing out process on their future success as nurses, and a misunderstanding of the rationale for the new curriculum emerged.

Conclusion: Understanding the experience of students in a program that is being phased out is important; and good communication is needed to make them feel valued. Faculty should be striving to keep these students from feeling like they are forgotten, inadequately prepared, or sub-par.

Notes

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Title

Nurse Educators’ Perspectives on Mobile Information & Student Critical Thinking

Abstract

Background

Nurses are knowledge workers who constantly analyze data, information, and knowledge to inform critical thinking, decision making, and patient care. Experts have noted that numerous complex types of knowledge inform critical thinking and nursing actions. Nursing programs across Canada have integrated mobile information to improve student access to quality knowledge sources to inform their critical thinking. Current evidence suggests that students value mobile information as it improves access to knowledge sources and lowers stress about getting clinical information. However, few researchers have explored nurse educators’ perspectives on whether or how mobile information informs student critical thinking.

Purpose and Approach

Therefore, the current project analyzed qualitative survey responses for a sample of nurse educators (n= 27) from three Canadian provinces (NB, NS, and BC) where mobile information was integrated within the curriculum. The textbox responses on whether and how mobile information fosters student critical thinking were analyzed using content analysis and Nvivo software.

Results & Conclusions

While findings indicated a high percentage (73%) of nurse educators agreed mobile information improved critical thinking, content analysis of statements provide insight into nurse educators’ ideas about the role of mobile information resources. Findings will be discussed using various types and models of knowledge and critical thinking.

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Title

Metaphors of interdisciplinary collaboration to overcome the theory-practice gap when transitioning from RN to Advanced Practice Nurses

Abstract

A particularly pressing concern is how members of the nursing profession who have expanded their scope of practice from Registered Nurse to Advanced Practice Roles (NPs and Nurse Educators) are experiencing their transition into the nursing workforce.

Available evidence suggests that new Advanced Practice Nurses struggle with "imposter phenomenon" (feeling not qualified for the job and expecting to be found out someday) and with high expectations of themselves from the beginning. They are reporting high

frequency of job changes related to interprofessional conflicts. Other factors that complicate their transition include organizational and professional unfamiliarity with the

NP role and NP needs, the exponentially exploding evidence base, and the complexity of patient needs and healthcare systems. To better understand the role transition required to overcome the theory-practice gap, graduate students who completed a course in

Theoretical Foundations of Nursing used metaphorical inquiry to conceptualize their experience and possible solutions. The metaphors of interdisciplinary ferrying and

gardening they developed illuminate strategies for easing the passage of the role transition via collaboration with and support from teams of persons from different

disciplines and sectors. Together, graduate students and course instructor will share their perceptions about how to reduce the anxiety and loss of self-confidence that accompany Phase One of the transition (initial process of acquiring the skills and knowledge needed for the advanced practice role) to ensure successful transitioning into Phase Two (period of adjusting to the new role that follows program evaluation). Transition Theory and metaphorical inquiry are described and applied. The rationale and ramifications of the

resulting solution-focussed interdisciplinary approach are discussed.

Keywords: advanced nursing practice, role transition, interdisciplinary collaboration, metaphorical inquiry, transition theory

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Title

Seeing beyond the eating disorder: New Brunswick health professionals' knowledge, skills, and experiences in eating disorder care

Abstract

Background: Eating disorders, the most life-threatening of all psychiatric illnesses, require prompt identification and treatment. Health professionals, however, struggle to provide care, especially in New Brunswick where there is no recognized eating disorder treatment centre.

Purpose: To understand the needs of NB health professionals who provide care and services, we explored the perceptions, experiences, and training of professionals from disciplines of medicine, dentistry, nursing, social work, occupational therapy, dietetics, and psychology.

Approach: Using a constructivist world view and narrative approach, the stories of 8 health professionals were elicited and analyzed to identify themes within individual core stories (concentrated "representations" from participant interviews) and derive a collective core story (aggregate representation). Findings were returned to participants.

Results: We identified two common themes: 1) the complex nature of eating disorders and 2) the valuing of health priorities. The collective core story, a process of seeing beyond the eating disorder, was explicated through integration of the two themes. Seeing beyond the eating disorder encompasses threads of tension due to the complexity of eating disorders, anticipating the need for additional resources, taking stock, mobilizing resources, affectivity (moral distress and moral outrage), and overcoming resistance.

Conclusion: The findings bring light to the process professionals go through from seeing beyond the eating disorder to understanding the often subtle subtexts that impede illness identification and treatment. Exploring eating disorder care from an interdisciplinary perspective provides unique insight into common needs and challenges of healthcare providers and may ultimately inform treatment and prevention initiatives.

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POSTER PRESENTATIONS

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Title

Application of the PRECEDE-PROCEED Model to Promote Implementation of Evidence Based Practice by Nurses in New Brunswick.

Abstract

Implementing of evidence based practice (EBP) to provide the best scientific clinical nursing care from well-designed studies with clinicians' expertise is one of nurses' priorities nowadays. Although implementing EBP improves patient outcomes by guiding nurses with specific recommendations, adopting EBP by nurses in many of health care settings in New Brunswick remains a challenge. Given no previous studies nor a planning model could be found regarding the barriers and facilitators of implementing EBP by nurses in New Brunswick, the purpose of this project is to propose the application of the PRECEDE-PROCEED Model as a planning model to promote implementation of evidence based practice by nurses in New Brunswick. The PRECEDE-PROCEED Model is an effective and adaptable program planning framework that has been widely used in the design, implementation and evaluation of health promotion programs. However, modified components of PRECEDE-PROCEED Model will be used to be suitable for the nature and aim of this project. PRECEDE stands for "Predisposing, Reinforcing, and Enabling Factors in Educational Diagnosis and Evaluation": 1) Predisposing factors (e.g., knowledge, attitudes, beliefs, personal preferences, existing skills, and self-efficacy of nurses toward implementing EBP). 2) Reinforcing factors (e.g., factors that reward or reinforce the implementing of EBP). Enabling factors (e.g., psychological/emotional or physical factors that facilitate motivation to implement EBP. PROCEED, which stands for "policy, regulatory, and organizational constructs in educational and environmental development" factors in the effects on implementing EBP including internal administrative structure and policies of health settings, as well as external policies and regulations.

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Titre

La recherche narrative au service de l'amélioration de la qualité de soins aux unités de soins intensifs

Abrege

L'environnement des unités de soins intensifs est particulièrement complexe autant pour les professionnels de la santé que pour les patients et leurs familles. Les patients et leurs familles ainsi que les professionnels de la santé des unités de soins intensifs font face à différentes situations difficiles et problématiques. Les méthodes de recherche qualitative peuvent améliorer notre compréhension de l'expérience vécue par les patients et leurs familles en soins critiques ainsi que les professionnels de la santé. La recherche narrative est une méthode de recherche innovatrice permettant de comprendre le sens accordé par la personne à l'expérience vécue d'un phénomène (Wang & Geale, 2015). Cette méthode est axée sur l'analyse de la narration histoire d'une expérience vécue par un individu ou un groupe d'individus. Ce type de recherche permet d'améliorer entre autre la pratique infirmière ainsi que les soins aux patients. Cette présentation examinera comment la recherche narrative peut améliorer notre compréhension d'un phénomène complexe dans un contexte naturel. Les différentes particularités de la recherche narrative seront abordées. Finalement, différents exemples de recherche narrative applicables en milieu de soins intensifs seront présentés.

Remarques

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Title

Making theory matter: Integration of theory in nursing curriculum

Abstract

The purpose of this poster presentation is to examine the value of teaching nursing theory within nursing curriculum. The poster presentation is representative of a literature review that synthesized current knowledge in hopes to advance nursing academia through providing practical and innovative ways to apply theory in the curriculum. It will highlight the significant role that a theoretical foundation in nursing has on the development of an undergraduate student and how it contributes to minimizing the theory to practice gap. The poster presentation identifies challenges and barriers faced by nurse educators teaching theory. It offers methods to create relevant, meaningful learning opportunities for students through an understanding of adult learning theory. With nurse educators teaching within undergraduate nursing curriculum as the intended audience, the poster presentation will contribute to nursing academia and further identify the importance of teaching nursing theory within the curriculum.

Keywords: teaching, nursing theory, curriculum, education

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Title

Lessons learned by piloting a collaborative, longitudinal investigation of the transition from hospital to home

Abstract

BACKGROUND: During the transition from hospital to home, patients and their families may confront unanticipated challenges which can jeopardize health outcomes and precipitate unplanned re-entry into the acute care system. We are planning a longitudinal, mixed-methods investigation of patient and family caregiver experiences during hospital discharge and the early post-discharge period to unravel the factors contributing to transition success - or to its failure. A clearer understanding of factors associated with transition success is required for the development of targeted interventions.

PURPOSE: Currently we are piloting the proposed protocol for participant recruitment and retention, and for the collection and analysis of quantitative data.

APPROACH: Participant recruitment is being conducted on inpatient medical and surgical units. Demographic information and measures of readmission risk and perceived readiness for discharge are collected prior to hospital discharge. Post-discharge coping and the use of healthcare and supportive services are measured during the 1st, 3rd, and 5th weeks post-discharge.

RESULTS: This pilot work is yielding information that will help refine the study protocol and support the hypothesis that problems during the transition from hospital to home are not limited to the elderly.

CONCLUSION: Conducting this work has reinforced our belief in the value of the pilot study. This pilot work will be used to strengthen a future CIHR grant application.

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Title

Student's Perception of the Impact of Curricular Design on Mental Well-being:
Setting the Stage

Abstract

In response to the call for transformation in nursing education, many undergraduate nursing program are undertaking curriculum modifications to improve student outcomes. Much of the research related to the enhancement of undergraduate nursing competencies has focused on cognitive and psychomotor elements of professional development. To ensure enhanced clinical outcomes, students also need to be prepared for the strenuous emotional demands of their profession. Nursing literature related to student mental health has primarily focused on the individual student, including research to explore what student factors place them at risk and interventions to decrease stress and anxiety. There is a need to move beyond preoccupation with the individual and examine the contribution that the educational culture and curriculum has had on either promoting emotional resilience or conversely putting student cohorts at risk for establishing self-care patterns that over the long-term are detrimental to professional, as well as personal, well-being. This presentation will discuss the work to date of a pilot project to establish a baseline of the perceived mental well-being of nursing students and explore their perceptions of how their undergraduate nursing program influences their mental well-being and resiliency. Additionally, the collaboration with mental health services and the establishment of an inter-disciplinary research team to address the study's purpose will be shared.

Notes

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Title

Measuring the Effectiveness of High Fidelity Simulation in Interprofessional Education to Foster Teamwork Among Undergraduate Nursing, Medicine and Pharmacy Students: A Pilot Study

Abstract

Background: Nursing, medicine and pharmacy students have limited opportunities during their undergraduate programs to learn and practice together as an interprofessional team. This has prompted faculty to explore to use of high fidelity simulated interprofessional education to help students learn about their roles on the team. Medicine and nursing have been using high fidelity simulated uniprofessional education for many years in their respective education activities to foster critical thinking, engage learners, improve confidence, and enhance psychomotor skills. However, the impact of high fidelity simulation interprofessional education on teamwork in undergraduate nursing, medicine and pharmacy students has not been established.

Approach: This pilot study will measure the effectiveness of a high fidelity interprofessional education module based on the care of a deteriorating patient experiencing anaphylaxis. A pretest posttest experimental design will be used to assessing the impact of participation on nursing, medicien and pharmacy's knowledge of teamwork and team roles, teamwork collaboration and communication behaviors, and learner satisfaction.

Results: The findings of this pilot study will lay the foundation for a larger study in the Fall of2017 to assess the effectiveness of high fidelity simulation as a teaching learning approach in undergraduate interprofessional education. This poster will discuss the findings from the pilot study and explore implications for further research.

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Title

What are the Experiences of Aging Nurses Who Live and Work with a Chronic Illness: A Phenomenological Study

Abstract

The aging of the baby boom generation has accelerated not only the growth of older adults, but also the number who continue working beyond the traditional age of retirement. Of concern is the lack of nurses to meet existing and future health care needs (Canadian Federation of Nurses Union [CFNU], 2012). This concern is justified given the fact that in 2011 the CFNU (2013) reported that 28.4% of nurses were over 55 years of age and 13.4% were over 60 years of age. In Canada, the average age of a nurse is 46 (CNA, 2012). There is a dearth of literature that examines how working and living with a chronic illness impacts nurses' ability to manage their own health and that of their patients (Gabrielle, Jackwon, & Maxxix, 2008; Levak, 2009; Nahm, Warren, Zhu, An, & Brown, 2012). Little is known about the preventative health care behaviors of aging nurses within the context of their work place environments. This knowledge is critical if employers are to retain a healthy group of nurses who can remain in the workforce longer.

The purpose of this study was to gain a greater understanding of what life is like for aging nurses to live and work with a chronic illness as well as strategies nurses use to maintain their health while working. Results of this study will be shared along with recommendations for employ to facilitate healthy work place environments reflective of aging nurses' health care needs.

Notes

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Teaching Nursing Students to be Communicative & Collaborative (Creatively!):
Moving from 'Talking the Talk' to 'Walking the Walk!'

Abstract

Bachelor of Nursing students are immersed in a collaborative program among three schools of nursing (Memorial University, 2017). The purpose of this poster is to illustrate how nurse educators at Western Regional School of Nursing creatively teach and implement fundamental concepts of communication and collaboration. Specific courses in communication and developing therapeutic relationships, community health, leadership and management will be highlighted, as well as the clinical placement process. Nursing students have a desire to learn core concepts in meaningful and memorable ways. Incorporating creativity promotes retention and synthesis of knowledge that learners value and apply to professional nursing practice now and in their careers (Herrman, 2016). Students evolve into critical thinkers and critical reflectors through these teaching and learning strategies. Theory is supported by interactive seminars, case study presentations, and clinical practice, which lead to discussion and synthesis of core concepts. These courses, among many others, provide students the opportunities to transition from novice learner to confident and competent senior nursing students and later, graduates. Examples of teaching strategies, student work, faculty, and student feedback are presented to share successes and areas to build on for the future. As schools of nursing are gravitating towards enhanced critical inquiry, relational practice, and strengths-based nursing practice, nursing faculty need to acquire innovative strategies for teaching and learning. The presenters are keen to learn about creativity from others in their classrooms, seminars, and clinical areas.

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Notes

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Title

Survive or Thrive? Entering Nursing Academia

Abstract

Background: Nursing schools are experiencing a shortage of qualified faculty. These shortages threaten the capacity to educate future nurses. Novice nurse faculty lacking formal teaching preparation face unique challenges in transitioning to academia.

Purpose: To analyze current literature on nurses entering nursing academia to identify the challenges and possible effective transition strategies to aid in recruitment and retention efforts of nursing faculty.

Approach: Searches of Proquest Nursing & Allied Health Source, CINAHL, Pubmed, Medline, Scopus, and Academic Search Premier databases for peer-reviewed articles from 2013-2017 were conducted using key terms novice nurse and educator transition, and academic nurse role transition. Perusal of article titles and/or abstracts yielded 32 articles for inclusion.

Results: Common themes were identified and included unique educator challenges of time management, education challenges, and culture challenges. Common themes identified for effective transition strategies included setting boundaries and limiting self-sacrifice, attend orientation sessions, elicit student feedback, and peer support.

Conclusion: The challenges encountered in transitioning to academia can be difficult for novice faculty and result in many leaving academia to go back to the clinical environment and the more comfortable role of expert nurse. Using effective transition strategies can help novice faculty thrive in their new role and address current faculty shortages impacting both the recruitment and retention of nurse educators.

Notes

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