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The format of future PNEIG newsletters is being reviewed. Due to costs, the PNEIG executive is considering an electronic newsletter. Please contact PNEIG executive if you have feedback or suggestions about the delivery of the newsletter.

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## PRESIDENT'S MESSAGE

Dear PNEIG Member:

As you read this column, it will be my last submission to the

Newsletter as President of PNEIG. I have sincerely enjoyed the opportunity to serve the membership in this capacity and thank all those who have worked with me as part of the Executive team during my time in office. I'm pleased to be able to report the accomplishments which have transpired during my time as President: the running of the website, establishment of the Newsletter, the ongoing bursary sponsorships and continued NSO support as well as the first Spring symposium held in 2006 and the ongoing plans for our next symposium being held May 2008.

Laurie Clune, as incoming President-elect, will be assuming her new role on April 1st. Our Annual Business Meeting will be held the evening of May 21, 2008 prior to our Symposium which is being held May 22, 2008 in Toronto. I will become Past President and I look forward to supporting Laurie in her new position as best I can. I trust the membership will continue to support Laurie in the months ahead as she brings new energy and ideas to PNEIG.

Once again, it is with sincere appreciation and thanks to my fellow nursing colleagues I have had the pleasure of working with

that I now pass the torch of the organization to Laurie.

Until next time, I remain  
Professionally yours,  
Marianne Cochrane, President/Chair

## MARK YOUR CALENDAR! MAY 21 AND 22, 2008!

Please plan to attend PNEIG's second Spring Symposium, **Sharing Visions of Practice and Possibility**, at Arcadian Court 401 Bay Street (the old Simpson's building) Toronto, ON.

A one-half day pre-conference workshop will take place on Wednesday, May 21, followed by a reception and our AGM.

We have 9 concurrent sessions and a round table time and hope you will consider responding to the call.

Our last symposium was a wonderful time and a great success. This one will be even better! Please plan to join us!

This year the PNEIG Annual Business Meeting will be held Wednesday May 21st, 2008 in Toronto (the evening prior to the PNEIG Symposium). For details, please access our website at [www.pneig.ca](http://www.pneig.ca)

## FINANCIAL REPORT/UPDATE

Your Interest Group continues to stand in a very positive financial position allowing us to invest in the lives of students. We were able to sponsor the NSO for the Model World Health Organization conference held in Toronto January 26th which was intended to introduce nursing students to global health issues. Students attended from across the province.

We continue to sponsor two \$1500 bursaries and one \$5000 bursary (first offered in 2007). Both are available again through RNFOO.

Given the financial strength of the group, we are working with the Centre for Professional Nursing Excellence to plan the May 2008 Symposium at which members and non-members were encouraged to submit abstracts for presentation. It is hoped that this activity will generate some additional funds for the organization.

*Respectfully submitted, Marianne Cochrane.*

## REPORT FROM THE MEMBER AT LARGE EDUCATION - JUDY BRITNELL

*Committee Members: Judy Britnell, Cindy Versteeg, Norma Nicholson, Rhonda Seidman-Carlson, Marianne Cochrane, Roxanne Martin, Carroll Iwasiv, Claire Mallette, Kim Jarvi (RNAO staff support)*

The Education committee has met twice by teleconference since November, 2007. We discussed the education committee's terms of reference in relation to the RNAO ends. We have decided that a major focus for this committee is to inspire every RN and undergraduate nursing student to become an RNAO member. We are continuing to brainstorm ideas and will contribute them to our various constituencies e.g., PNEIG, the COUPN/CAATS/CNO meetings, and the RNAO Board. Members of the Education committee have been invited by



Peel Public Health to deliver a presentation to public health nurses on Moving Towards Preceptorship. This event was held on Thursday January 31, 2008.

Discussions at the Board meeting on January 26, 2008 have led to planning a meeting of the Education committee and the RNAO to discuss how the many Education issues relating to the nursing profession can be addressed by the RNAO. News to follow...

Peel Public Health Nurses Appreciation Day Presenters:

- Judy Britnell, Program Director, Learning and Teaching Office, Ryerson University, MAL Education, RNAO
- Laura Nicholson, Faculty, Ryerson, Centennial, George Brown, Collaborative Nursing Degree Program
- Keri De Ciccio-Ferandes, 4th year Placement Coordinator, Ryerson, Centennial, George Brown, Collaborative Nursing Degree Program



## REPORT ON NURSE EDUCATORS CONFERENCE

*Marianne Cochrane*

I had the privilege of attending, for the first time, the business meeting of CASN (Canadian Association of Schools of Nursing) as a proxy voter in November 2007 when it was held in Kingston. It was interesting to see the workings of this organization and obtain a broader perspective of the issues nursing education is encountering across the province.

The Nursing Educators Conference followed the business meeting and was held over 4 days. I made the most of every concurrent session that was offered. In many instances, there were more sessions I wished I could have attended.

The opening keynote speaker was Sally Thorne who spoke on "Education for Patient Centered Practice: Where we have come from and where are we going?" She identified that currently, in nursing education, there is some theoretical confusion existing between practice and research, art and science, wellness and illness and what these look like. As well, practice education challenges include the areas of health/advanced education sectors, the debate regarding continued clinical competence of faculty, staff shortage and system stresses, various competing interests and as always, costs. She further discussed the issue of aging faculty, the offerings of accelerated programs and the fact we need to further stress and advocate nursing as a practice discipline. Given the various models of undergraduate education being offered across the country, what institution is best suited to what model? There are continuous pressures to compartmentalize by taking out some pieces of nursing and inputting other pieces which causes one to consider what the core of nursing really is? If access to education must be open it raises the question: What is the skill set best for nursing? The 1970's philosophy was for everyone to have access to what they wanted to learn; open means minimum requirements to get in which may not be best for nursing in

general. Now, there are specially funded and targeted resources for specific groups who need to be in nursing. This raises the question: Is this best?

Furthermore, she comments that in Practice education, nursing is "always the guest in the house". Regarding classroom learning there is the increased incidence of plagiarism by students. And finally when advocating career paths for new grads, we target the "brightest and best" to take up research; but we need these individuals in every area of nursing, not just the research field. Therefore we are left to ponder "What is the best education for what the nurse wants to do in his/her career?" As it was for me, I too, leave you with these questions to think about.

The 2008 Registered Nurses' Foundation of Ontario Awards and Scholarship Brochure is now available for downloading at [www.rnfoo.org](http://www.rnfoo.org). PNEIG offers 2 scholarships worth \$1500 each for Registered Nurses who wish to pursue education at the graduate level related to the practice of nursing, nursing education or a related program. As well, for the second year, one Research Scholarship of \$5000 is offered to a Registered Nurse who is pursuing education at the Graduate or Doctoral level related to nursing education in the academic or clinical setting. Both scholarships require applicants to be members of PNEIG (not awarded consecutively).

## SPIRITED NURSING

CNSA 2008 National Conference

*Patricia Patterson*

Who really wants to go to Winterpeg in January? I do, that's who, although I was beginning to wonder when the pilot announced there was a wind-chill of -48 there, when we left Toronto on January 23. It was my great pleasure and privilege to attend the Canadian Nursing Students Association (CNSA) 2008 National Conference along with Irene Koutsoukis. We were invited to do two Healing the

Learning Environment workshops, which are known to the students as the Student Abuse workshops. To date we have given six of them, and it all started with the one we did at the PNEIG symposium in May 2006. I'll be writing about the workshops themselves in the next newsletter but right now I want to tell you about the convention. The frosty air outside was a sharp contrast to the warm welcome we received from Erin, a third year student from "U of M" (Manitoba.) Erin met us at the airport and gave us a running commentary during the drive to our hotel. She offered bits of Winnipeg history, pointed out landmarks and started our acquaintance with the schools and system in Manitoba. She accompanied us to our room and made sure we found the registration desk and got to opening ceremonies on time. I have been to many conferences over the years and do not recall such a considerate and courteous reception.

I was impressed with the entire conference. Over 400 nursing students from across Canada attended as well as some international students. There was a representative from Japan and one student representing the United Kingdom and Europe. I received this bit of information in a buffet line from the representative himself. Although I did not catch his name I will not forget his charming manner and fashionable outfits which reminded me of styles from the 1920s. The executive of CNSA and student volunteers from the host province planned the conference and seemed to have thought of everything. It was as professional and well run as any I have attended and much better than most. Kari Hamblin, another University of Manitoba student, was coordinator of the presenters and had been in touch with us before hand. She checked with all of us frequently, and expedited our every request.

The name of the conference was Spirited Nursing and it could not have been more apt. The opening ceremonies were preceded by a wine and cheese reception with lots of great food and the friendly high energy networking that took place throughout the whole convention. It was such fun to be part of all that. Those young people talking and laughing and carrying on would bring a smile to anyone. One of the

things I love about being a nurse is the fellowship of other nurses. I love all kinds of meetings because of that, and here were these students, some having their first taste of "nurse-power," that affirmative feeling of being part of a smart and important group. The ceremonies began with O Canada, accompanied by a beautiful video of images from across the country. It was a touching and fitting start to this national convention. The two days that followed were filled with guests and workshops during the day and special social events in the evening. You can read about the conference on the CNSA web site [www.cnsa.ca](http://www.cnsa.ca)

I left that conference feeling very proud of those Canadian nursing students. I have seen the future and it is bright, smart, professional, and knows how to have a good time!

## STUDENT INVOLVEMENT IN THE RNAO

*By Tim Lenartowych*

*(Tim is a third year nursing student at the University of Western Ontario and is a student representative on the PNEIG executive.)*

Undergraduate nursing students from all across Ontario are encouraged to become basic student members of the Registered Nurses Association of Ontario (RNAO). When a student becomes a member she or he joins hundreds of other students who are currently members. The nursing students of today embody the future of the nursing profession in Ontario. As such it is greatly important to encourage student activism within issues having influence on the nursing profession and those issues influencing the health of Canadians.

When joining the RNAO students also become members of the Nursing Students of Ontario (NSO), which is a student governed interest group. The mission statement of the NSO is to: "... [Represent] nursing students from all over Ontario, promoting nursing, addressing health policies and issues that are student related, and empowering and supporting full participation of nursing students in Ontario to act as one unified voice". The unique feature of the NSO is that it is

student governed, allowing all students from across Ontario to have a say in both the operation of the group and decisions that are made. Furthermore the NSO advocates on behalf of students while promoting leadership and activism within the nursing profession.

The NSO plans many different events throughout the year aimed towards encouraging a sense of empowerment among students within the nursing profession. NSO awareness campaigns are held at schools throughout Ontario on an annual basis. The goals of these events are to provide students with an opportunity to learn more about the RNAO and the NSO. An example of this occurred on November 19, 2007 when students gathered at the University of Western Ontario for an awareness campaign. Students had the opportunity to hear from London-Middlesex RNAO Chapter President Aric Rankin; Provincial Nurse Educators Interest Group Representative Pat Patterson; Complementary Therapy Interest Group Representatives Diane Jamieson & Kelly Peterkin and London-Fanshawe Member of Provincial Parliament Khalil Ramal. Through this awareness campaign students were



*Back Row: Emily Duncan, Elizabeth Heelam, Bonita Aphan, Adnan Ziendien, Khalil Ramal (MPP), Tim Lenartowych (NSO Regional Director), Aric Rankin (President London-Middlesex Chapter)*

*Middle Row: Pat Patterson, Jeanne Li, Anne Matheson, Michelle Porch, Erika Sergeant*

*Bottom Row: Megan Kroeker, Amy Kosinski, Caitlin Houselander, Lindsay Vanravenstein, Diane Jamieson, Kelly Peterkin*

able to hear about how the RNAO functions and the benefits of becoming a member. The event was a true success prompting many students to become members of the RNAO, as well as motivating current student members to take on an active role.

Another event that the NSO spearheaded was coordinating the first annual Model World Health Organization Conference which occurred on January 26, 2008 at Ryerson University. Nursing students had the opportunity to learn more about leadership and global health issues by engaging in an interactive simulation. The students each represented a nation and debates were held surrounding the issue of bioterrorism. In the end, a draft resolution on behalf of all the countries was created addressing this issue. The overall goal of the event was to provide students with an opportunity to develop leadership skills, while providing them with an outlet to learn more about global health issues impacting Canadians.

Students are both welcomed and encouraged to become student members of the RNAO. Membership fees are very nominal (currently \$20/year) which includes a complimentary membership kit containing many valued resources for the students to utilize. It is important to educate students and make them aware of the importance of advocacy and involvement within the nursing profession. Joining the RNAO enables students to facilitate an active role within current issues being faced within nursing. But most of all it is hoped that by joining the Registered Nurses Association of Ontario, students will feel more empowered and better prepared to become the future leaders of tomorrow.

To learn more about the NSO please visit [www.nso-eio.ca](http://www.nso-eio.ca)

## REFLECTING ON YOUR TEACHING PHILOSOPHY

*By: Fabiola Longo RN, BScN, MN  
DC-UOIT Collaborative BScN program*

Reflection has traditionally been an integral part of nursing.

Johns (1999) expresses the importance of the reflective process in empowering nurses to sustain competence and excellence in nursing care. Most BScN programs include a requirement of reflective notes from students throughout the four years of nursing school. In these reflective notes we ask students to reflect on their practicum experience and document how they are progressing towards achieving the CNO entry to practice competencies. As a registered nurse, the CNO requires all registered nurses to participate in reflective process annually. When entering the field of teaching in nursing, all new teachers are encouraged to continue to practice clinically and seek opportunities to expand their knowledge in teaching and learning theories. In addition, I recommend that new nursing teachers reflect on their teaching practice and take time to develop their own unique philosophy towards teaching. This philosophy can help teachers understand the theory behind their actions and identify areas for growth. Chism (2003) and Sweitzer (2003) describe excellent examples to aid teachers in developing their philosophy of teaching. Some questions for thought include: What does teaching and learning mean to you? What are your beliefs about student's learning methods? How do you view students? What teaching methods do you use and why? The following is an example of my teaching philosophy:

#### My Personal Teaching Philosophy

- I believe that teaching and learning are best guided by a pluralistic view of the pedagogies.
- I value dialogue, cooperation, collaboration and empowerment of students.
- I view a teacher as an expert, mediator and a learner.
- I value enthusiasm, organization and stimulation.
- Fun must be an integral part of my teaching methods.
- I view students as active learners building on previous knowledge.

This philosophy has helped direct my teaching activities in class and clinical as well as created an environment that is focused on student success. I encourage every nursing teacher to take time out to reflect on his/her practice of

teaching and develop their own teaching philosophy.

#### References

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## NINTH ANNUAL OPTIONS FOR DIABETES CONFERENCE

**When:** Friday, April 11 and Saturday, April 12, 2008

**Where:** Holiday Inn, Kingston, Ontario, Canada

**Who should attend:** Healthcare professionals interested in increasing their knowledge of diabetes

**Topics to include:** update of clinical practice guidelines (2008), United Nations resolution on diabetes, identification of risk populations, metabolic syndrome, chronic disease management, disordered eating, female sexual dysfunction in diabetes

**For more information, contact:**  
Margaret Little (613) 547-3438 or  
email: [hartwork@kingston.net](mailto:hartwork@kingston.net)  
Joan Ferguson (416) 239-0551

## WORKING SOFTER

*By Pat Patterson*

When I started back to work for my final year of teaching nursing students in September/07 I had resolved to work softer. It seemed I had been working harder and harder as the years went by and now it was time to take it easy. How

does one work softer? I wasn't sure, but started with a three point plan. I would not volunteer for things, do a good job, not a perfect job, and redraw my boundaries in that I would not work on weekends.

I wasn't far into the semester before I realized that, determination and resolution aside, one cannot learn to work softer all at once. I found I was serving on more committees, (so much for keeping that hand down when the call came) doing more in my interest groups and still finishing work on weekends. So I have this advice to all of you educators, whether you are in your first or close to the last year of your career, this work can consume you if you let it. Start learning to work softer NOW.

The turning point came for me by way of a student, in one of those little gifts of insight that switches your perception in such a meaningful way that it changes you forever. One day in my clinical conference my students were discussing the thoughts for the week that I post on my web site, sharing which they liked best and why. Cassy, the picture of youthful free spiritedness, which I now view as the picture of wisdom, offered her choice, a quote from George Carlin. **"Don't sweat the petty things and don't pet the sweaty things."** She went on to say that, though she knows better, she continues to fret over little things. I thought she would stop there, because I had not really given much thought to the quote. I took it as just a clever play on well-known words designed to make people laugh. So, when Cassy explained what "petting the sweaty things" meant to her, the light dawned and I realized how superficial my understanding had been. I cannot recall exactly what she said, but the message I got was this: when you dwell on your grievances or hurts or what shoulda-coulda-woulda happened, or rage about things you cannot control, you are petting sweaty things. And on some level this is reinforcing.

She said "you can work yourself into a hole." An image popped into my mind of a bunch of distasteful little mud-coloured, jello-like creatures with bad tempered expressions that rooted for my hand to touch them in the

manner of my lovely sweet little dog Reeta. And when I responded, they grew! Bigger and drippier. Ick! Ick! Ick! The image came and went in a second, but returns to me frequently. That is when I smile and they vanish. The whole process reminds me of Jean Watson's words about the quality of our light. She says: "By choosing our thoughts and awakening to our consciousness we reinforce and determine the quality of our light. We can determine the nature of the experiences of our life" (1999, p.113). A thought is energy, or light, that has been shaped by consciousness (1999, p. 111). Different thoughts create different emotions. "Thoughts of vengeance, violence and greed or thoughts of using others for example, create emotions such as anger, hatred, jealousy and fear. These are low low-frequency currents of energy, and therefore they lower the frequency of your light or consciousness. Creative or loving caring thoughts invoke higher-frequency emotions and raise the frequency of your system" (1999, p.112). I can tell you that the "petting sweaty" thoughts are low energy and it feels much better to decline their invitation and opt for high-frequency thoughts.

Not long after this epiphany, I was reading "The Secret Life of Bees," by Sue Monk Kidd. Lily, the 14 year old protagonist muses: "In a weird way I must have loved my little collection of hurts and wounds. They provided me with real nice sympathy, and with the feeling I was exceptional" (Kidd, 2003, p.278) And so it is. If we pet those sweaty things enough we can become quite attached to them.

So here I am, more than half way in the year toward my retirement date, finally working softer. Thanks George! Thanks Cassy! My thoughts of you are full of warm gratitude, and those are the highest frequency currents of all.

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## NURSES AND STUDENTS WITH (DIS)ABILITIES: THINKING ABOUT PRACTICE DIFFERENTLY

By Laurie Clune RN, PhD(c), Assistant Professor, Ryerson University

Canadian federal and provincial disability legislation mandates accessibility and the inclusion of people with (dis)abilities into all aspects of social life. Nurses support this social justice mandate. But what if the person with a (dis)ability wants to be a nurse or is a nurse? Does the nursing profession still support this approach? These questions have led to much informal professional debate. For nurse educators we now must consider: Can people with (dis)abilities be nurses?; Do we need to have certain physical requirements for admission into nursing programs?; or Should we limit the licences of graduates with (dis)abilities? These questions are beyond the scope of this brief article. My intention here is to stimulate some critical thought about nurses and students with (dis)abilities by providing a very brief account of some published literature that is available and may act as a resource for nurse educators.

A systematic search of the literature reveals that since the mid 1990's there has been some information published about (dis)abled nurses and nursing students. A comprehensive database of resources is available from an American advocacy organization called the National Association of Nurses with Disabilities (NOND). The mandate of this organization is to promote the full inclusion and acceptance of people with disabilities and chronic health conditions into nursing careers. NOND and other sources reveal that nurses with (dis)abilities are active and practicing in diverse practice settings: nurses with hearing impairment are practicing in critical care settings and academia (Maheady, 2003b; NOND, 2005); nurses with limb and mobility differences are practicing in hospital and community settings (Clune & Wilkinson, 2005; Maheady, 2005); and nurses with visual and hearing impairments are working in home care, counselling, rehabilitation and telephone consultation practice (NOND, 2005; Evans, 2005;

Maheady, 2003b). In fact some literature highlights how nurses with (dis)abilities are not a hindrance in practice but rather they can "demonstrate insights into patients' situations" (Carroll, 2004, p. 210) and act as an inspiration for patients with similar (dis)abilities and chronic illnesses. For example, some patients in a rehabilitation setting found that having a nurse with limb (dis) ability caring for them was not only encouraging but also quite helpful due to their distinct knowledge of mobility challenges. The (dis)abled nurse was able to describe strategies to deal with mobility and dexterity issues from a real life perspective, which patients found valuable (Clune & Wilkinson, 2005).

Donna Maheady (2003a), in her National League of Nursing award winning book called *Nursing students with disabilities: Changing the course* clearly identifies that while an increasing number of students with (dis)abilities are being admitted into university and college programs, nursing faculty lack preparation and experience in working with students with (dis)abilities in laboratory and practice settings (Maheady, 2005; Evans, 2005; 2004b; Sowers & Smith, 2004a; Magilvy & Mitchell, 1995). Magilvy & Mitchell (1995) in a survey of Schools of Nursing found that while some faculty were familiar with in-classroom accommodation strategies such as using films with closed captioning, preferential seating and providing extra time for tests, they were less familiar with how to translate these strategies into the practice setting (Watson, 1995). As well many on campus resources who support students with (dis)abilities within the traditional university setting had no experience providing accommodations in practice settings.

Nursing educator Bronwynne Evans (2005) provides a descriptive account of her experience of preparing for the start of a student with a (dis)ability in a practice setting. She indicates that while nursing faculty spent large amounts of time preparing and strategizing on how best to support a newly admitted nursing student in a wheelchair, in actuality, most strategies proved to be unnecessary. This student performed in the same manner and experienced the same challenges as her peers. Evans goes on to tell how

the student needed only to wear an extra pair of gloves and lower (instead of raise) the bed when performing a dressing change. The student, upon washing her hands in preparation for the procedure, donned gloves, wheeled to the bedside, removed the gloves that had touched the chair wheels, and began the procedure in the same manner as other students. As well, advancements in health care equipment technology also support the success of (dis)abled nurses in practice. Amplified stethoscopes, pager call bell systems, digital blood pressure, thermometers and glucometers machines, voice activated computer software for documentation and scooters are but a few devices that can be used by all nurses including those with (dis)abilities to enhance practice. RNAO president, Mary Ferguson Pare, confirms the use of scooter devices by some in-hospital nurse managers who are challenged to travel long distances between units in European health care centres.

While some sceptics may be afraid that students and nurses with (dis)abilities are a liability and may jeopardize patient safety if in practice, Beth Marks (2000) maintains "...patient safety is an issue for *all* nursing students' not just students with disabilities" (p. 209). Maheady (1999; 2003a; 2005) offers nurse educators a vision of how to include students with (dis)abilities in nursing programs by focusing beyond traditional technical/skill standards approach to nursing education. She suggests nurse educators and health care practice environments must consider and focus on (dis)abled students' abilities, expertise and distinct perspective (rather than their disabilities). Rhodes and colleagues (1999) support the value of having students with (dis)abilities in nursing programs. They spoke about the life changing experiences as educators when working with a profoundly deaf student:

*Educating this student was probably one of the most rewarding accomplishments that faculty members had ever experienced. She taught us more about overcoming adversity, being goal directed, and positively inspired others than we could ever have taught her about nursing. She also*

*broadened our conception of what kind of person can be a good nurse. In the final analysis, everyone agreed that this exceptional young woman was not only our student but also our teacher (pp. 48, 51).*

As nursing educators should we not be advocates supporting students with (dis)abilities entering the nursing profession?

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## WESTERN-FANSHAWE COLLABORATIVE BSCN PROGRAM YEAR 1 INAUGURAL CEREMONY

On January 14, 2008 the University of Western Ontario and Fanshawe College held an inaugural ceremony for the Year 1 nursing students to mark the beginning of their first clinical experience with clients. Since the class is split between Fanshawe and Western for the first 2 years of the program, this ceremony provided an opportunity to bring the entire Class of 2011 together.

Another goal of the ceremony was to begin to socialize the year 1 students to the role of the Registered Nurse in the health care system to enable them to identify with the professional and ethical responsibilities of Registered Nurses. The theme of the ceremony was "Nursing ... A Light to the Future." After greetings from Dr. Paul Davenport, President of Western, and Dr. Howard Rundle, President of Fanshawe, Mary Anne Krahn, Acting Coordinator of the Collaborative Program at Fanshawe College, spoke about the

importance of caring in Nursing. Karen Ferguson, Chair of Under-graduate Programs in Nursing at Western, spoke about the significance of light to Nursing. Year 1 faculty members Susan Anthony and Sharon Whitfield then lit the "Collaborative Program candle". This candle was lit before the ceremony with a flame from the candle lit by Dr. Jean Watson during her visit with Western and Fanshawe College nursing faculty in 2005. By observing this ritual, we hope that the symbolism of relighting the candle will radiate the meaning of "nursing's caring and healing light in the world" (Watson, 1999, p. 275) to our students.

Watson, citing Bradshaw (1999), states that "nursing is about 'relighting the metaphorical lamp' and helping nursing to reintegrate, reconnect and provide continuity to its wholeness, wholeness that has been wounded during nursing's modern era" (p. 269). In 2005 Dr. Watson explained to the faculty that, since 1992, she has been lighting a candle and sharing the "light" with students and nursing colleagues around the world. We are honoured that she shared this light with the Western and Fanshawe nursing faculty. We hope that, by adopting this ritual, our faculty will in turn share the "light" with our students as they prepare to embark on their first opportunity to care for clients in a clinical setting.

Leanne McAuley, the 2007 Gold Medal graduate from the collaborative program, eloquently spoke about her experiences as a beginning Registered Nurse. She shared



*Students reciting Nightingale Declaration*

her fear that she lacked adequate experience with practical skills yet how, given her educational preparation, she was able to quickly learn new skills in her specialized area of practice. She also reflected about the importance of critical thinking when making decisions regarding her clients' well-being. Most of all, Leanne emphasized the importance of caring for the people who trust us with their lives at a time when they are most vulnerable. After Leanne's speech, each student received a pin with the collaborative program crest and their year of graduation. Students and faculty were then invited to recite the Nightingale Declaration, developed by the Nightingale Initiative for Global Health (NIGH) to commit to the accomplishment of a healthy world by the year 2020.

Feedback from the students was very positive. This ceremony could not have happened without the participation of all of the BScN faculty members at Western and Fanshawe College. We would like to express our sincere gratitude to the Organizing Committee for the Year 1 Western-Fanshawe Collaborative BScN Program Ceremony: Lorena Harvey, Fanshawe co-chair; Nancy Platt, Western co-chair; Judy McKale-Waring, Faculty Fanshawe; David Reid, Faculty Western; Karen Ferguson, Faculty Western; Ina Pakkert, Team Support, Western; Pam Skinner, Dean, Faculty of Health Sciences and Human Services, Fanshawe and Jim Weese, Dean, Faculty of Health Sciences, Western. Student volunteers who assisted with the planning were Siobhan Carrick, Western; Erin Boogaart, Fanshawe; Kevin Downey, Fanshawe and Meaghan Wheeler, Western. A special thank you is extended to John Sing, Photographer/Digital Media Centre at Fanshawe College and Matt Quinn, Communications Specialist, Faculty of Health Sciences, Western for their invaluable assistance.

*Submitted By:*

*Lorena Harvey, RN, BA, BSN, MN, Professor, Fanshawe*

*Nancy Platt, RN, BScN, MScN, Year 1 Coordinator, Western*

*Judy McKale-Waring, RN, BScN, MEd, Year 1 Coordinator, Fanshawe*

*Karen Ferguson, RN, MHSc(N), Undergraduate Programs Chair, School of Nursing, Western*

*Mary Anne Krahn, RN, BScN, MScN, Acting Coordinator, School of Nursing, Fanshawe*

**References:**

Watson, J. (1999). *Postmodern nursing and beyond*. Churchill Livingstone: Edinburgh.

For further information about the Nightingale Initiative for Global Health (NIGH) and to sign your name please visit: [www.nightingaledeclaration.net](http://www.nightingaledeclaration.net)



*On the picture from your left to right, bottom row: Lorena Harvey (Professor, School of Nursing, Fanshawe); Leanne McAuley (RN, 2007 Gold Medal recipient, School of Nursing, Western-Fanshawe Collaborative BScN Program) and Karen Ferguson (Undergraduate Programs Chair, Nursing, Western).*

*From your left to right, top row: Judy McKale-Waring (Year 1 Coordinator, Collaborative BScN Program, Fanshawe); Mary Anne Krahn (Acting Coordinator, Collaborative BScN Program, Fanshawe); and Nancy Platt (Year 1 Coordinator, School of Nursing, Western).*



### **Provincial Nurse Educators Interest Group (PNEIG) Research Award (\$5000)**

To provide an opportunity to a Registered Nurse who is pursuing research focused on education at the Graduate or Doctoral level in an academic or clinic setting. Applicants must be members of PNEIG.

### **Provincial Nurse Educators Interest Group (PNEIG) Award (2 x \$1,500)**

To provide an opportunity to Registered Nurses who wish to pursue education at the Graduate level related to the practice of nursing, nursing education or a related program. Applicants must be members of PNEIG.

RNFOO will be offering 37 Awards & Scholarships for a total of \$69,500 in 2007! Application deadline: Friday, March 14, 2008 at 4:30 pm. EST. Visit our website [www.rnfoo.org](http://www.rnfoo.org) for application information.



Registered Nurses' Association of Ontario  
L'Association des infirmières et infirmiers  
autorisés de l'Ontario

#### **WEBSITE STATISTICS**

*Data provided by Ron Foreman, PNEIG Webmaster.*

The site had 117 unique visitors in the last month, 80% of which were new visitors. The average time on the site was 1min 7secs. 62% found us by searching in Google, 11% came from the RNAO site. 16% of the searches were for 'pneig', 6% for 'nurse educator'. The home page is the most popular page by far.

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