



UNIVERSITY OF CALGARY
FACULTY OF NURSING



Nursing Research:

Promoting health
across the lifespan



Message from

Karen Benzies

Associate Dean, Research

The Faculty of Nursing at the University of Calgary is one of 19 research-intensive nursing schools in Canada. Between 2016 and 2017, our research ranking moved us from seventh to fifth place in the country. A cadre of early- and mid-career nurse scientists drives this trajectory by focusing on research impact for populations across the lifespan. Research impact is a change or benefit to health, quality of life, environment and society beyond academic research outcomes. Our Faculty's culture of collaboration, interdisciplinarity, accountability and transparency is critical for achieving this impact.

To provide clear direction, the Faculty of Nursing Strategic Plan outlines two research priority areas where we have nationally and internationally recognized leadership: Child and Family Mental Health and Living Well with Chronic Conditions. Conducting research in these areas with populations across the lifespan, often in partnership with Alberta Health Services, Covenant Health and a wide range of community agencies, is producing not only meaningful impact, but a milieu for evidence-infused education for undergraduate and graduate students.

We will continue our focus on enhancing research capacity, advancing skills and expertise and expanding into key emerging areas. We gratefully acknowledge the leadership and paths paved by our senior nurse scientists whose work facilitated our steep rise to research productivity. We look to our early- and mid-career scientists for the vital intertwining of research and practice that will significantly advance the excellence and impact of our research in Alberta, Canada and across the globe.

Thank you for taking the time to read this report. Please accept our invitation to engage with us in research and innovation to improve the health and quality of life for citizens across the lifespan.

Sincerely,

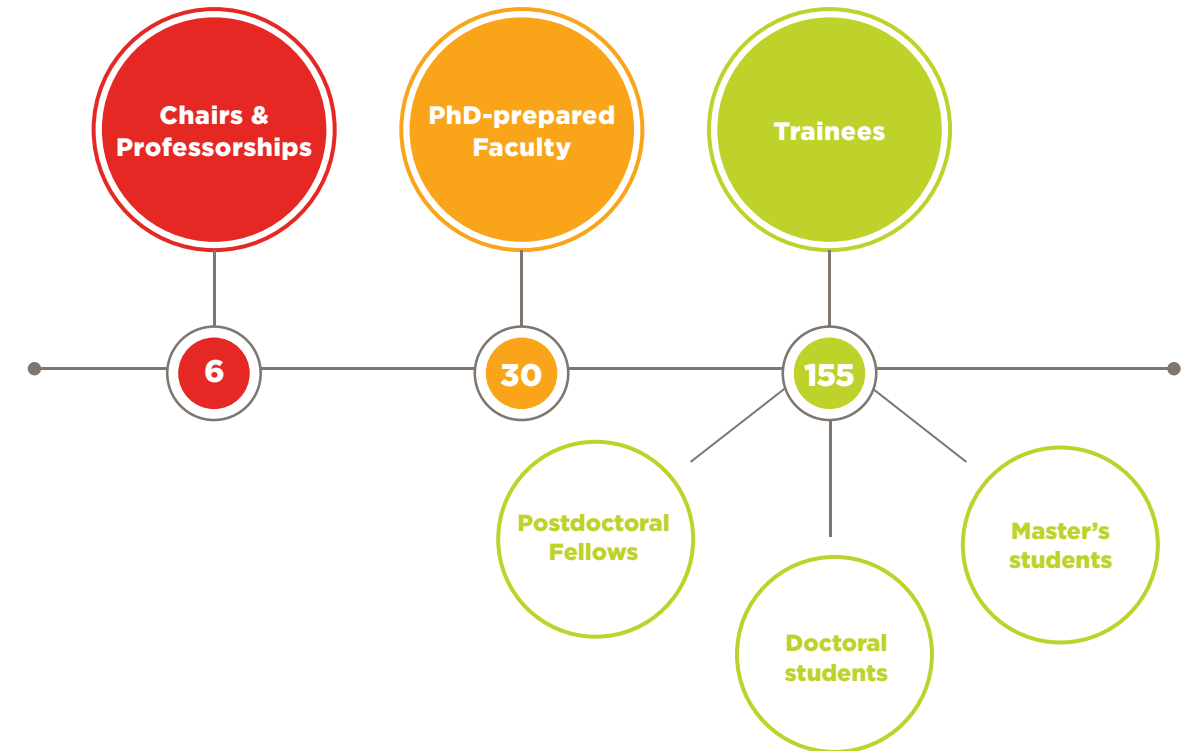
Karen Benzies, BSc'94, MN'96, PhD'01
Professor and Associate Dean, Research

September 2018

All photos by Colleen De Neve, except Linda Duffett-Leger photo on pg. 11, photo by Adrian Shellard

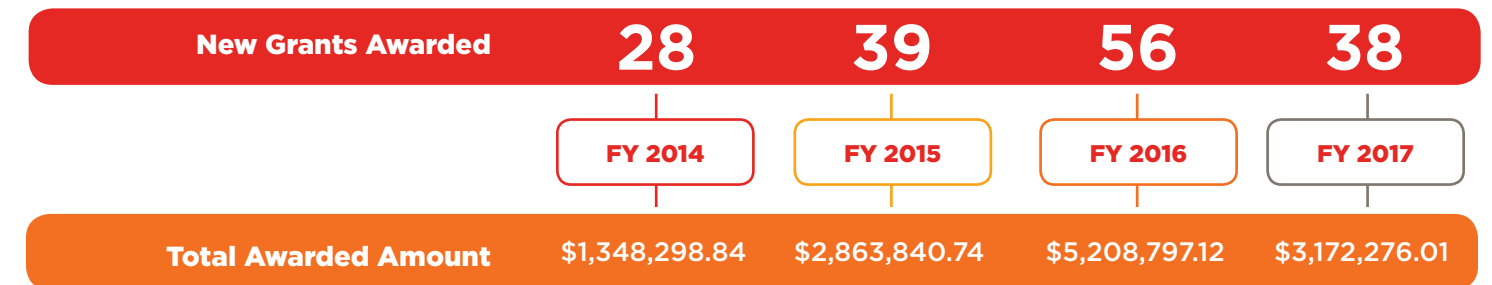
Research statistics

Research Capacity



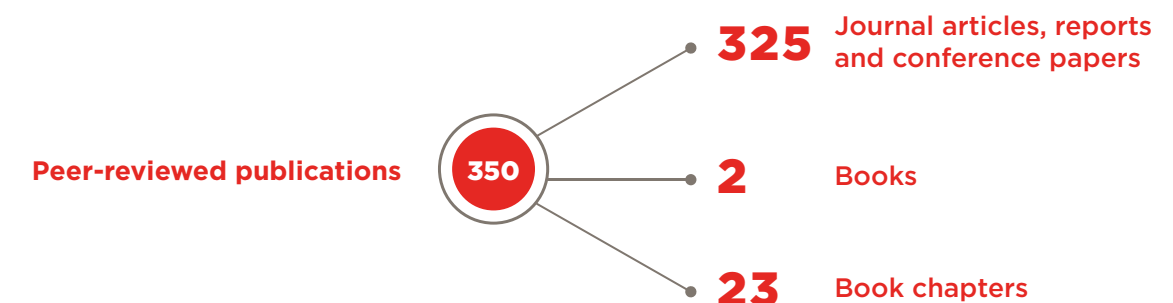
Research Funding

(not including donated funds)



Research Publications

January 2016-June 2018



Research to promote health across the lifespan

As a leading research-intensive Canadian nursing school, we advance nursing practice and transform health systems by incorporating research processes and results into all of our activities.

Specifically, we have established pillars of strength in our research capacity that cross the entire lifespan:

Thriving families and communities

Focusing on improving mental health for all children and families

Living well with chronic conditions

Focusing on health outcomes and service delivery for people living with chronic conditions

Aging and end-of-life care with dignity

Focusing on best practices for quality, compassionate care



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Today's nursing research is tomorrow's nursing practice.

Research Areas

Karen Benzies , AD-Research; Professor	Parenthood interventions; Early childhood development; Preterm birth
Eloise Carr , Professor <i>pg 15</i>	Pain management; Pet therapy
Sandra Davidson , Dean; Professor	Chronic disease and aging; Undergraduate student socialization to the care of older adults; Teaching and learning; Simulation
Aniela dela Cruz , Assistant Professor <i>pg 14</i>	HIV/AIDS; Health of migrants; Pre- and post-migration experiences; Cultural safety
Tam Donnelly , Professor	Cross-cultural health; Mental health
Linda Duffett-Leger , Assistant Professor <i>pg 11</i>	Health technology; e-learning tools
Andrew Estefan , Associate Professor	Gender, sexuality, self-harm and suicide
Carol Ewashen , Associate Professor	Youth mental illness; Body image; Eating disorders
Carla Ginn , Assistant Professor <i>pg 8</i>	Health of low-income and Indigenous peoples
Sandra Goldsworthy , AD-Teaching, Learning & Technology; Associate Professor <i>pg 13</i>	Simulation and technology in nursing education
Suzanne Goopy , Associate Professor <i>pg 6</i>	Health, built environment and culture
Sandra Hirst , Associate Professor	Abuse in older adults; Long-term care
Kathryn King-Shier , Professor	Cardiac health, gender and ethnic diversity
Dawn Kingston , Associate Professor <i>pg 7</i>	Perinatal mental health and e-technology interventions
Catherine Laing , AD-Undergraduate Programs; Associate Professor	Pediatric oncology and story-telling; Social return on investment
Nicole Letourneau , Professor <i>pg 9</i>	Parent and infant mental health; Attachment disorder
Candace Lind , Associate Professor	Youth health promotion
Cynthia Mannion , Associate Professor	Nutrition in pregnancy and early postpartum
Graham McCaffrey , Associate Professor	Mental health nursing and Buddhism
Gwen McGhan , Assistant Professor <i>pg 16</i>	Caregivers of older adults with dementia
Nancy Moules , Professor	Pediatric oncology and palliative care
Shelley Raffin Bouchal , AD-Graduate Programs; Associate Professor	Palliative care and grief
Janet Rankin , Associate Professor	Hospital restructuring and health-care reform
Jim Rankin , Professor	Adult bone and joint health
Gudrun Reay , Assistant Professor <i>pg 12</i>	Nurses' decision-making in emergency departments
Sandra Reilly , Associate Professor	Community development and health promotion
Shane Sinclair , Associate Professor <i>pg 18</i>	Measurement of compassion in health-care providers
Jacqueline Smith , Assistant Professor <i>pg 10</i>	Mental health, addictions and cannabis use in post-secondary students
Dianne Tapp , Past Dean / Professor	Family health; Leadership in nursing education
Karen Then , Professor	Adult cardiac health in critical care and emergency
Lorraine Venturato , Associate Professor <i>pg 17</i>	Workforce development for the care of older adults with dementia

Highlighting cultural, social and everyday health experiences to help us better understand how to create healthy and sustainable cities



Dr. Suzanne Goopy, associate professor

Dr. Suzanne Goopy

Imagine what it would be like to come to Canada as a refugee from Syria; you have no knowledge of English, you're learning to cope with winter, you have no driver's license or vehicle and must rely on public transit. Now imagine adding in additional challenges: you can't find a job. You don't know how to access services such as the food bank. Your spouse and children are ill.

For the past few years, Suzanne Goopy has been exploring barriers to walking and mobility for people who are new to Canada. "Knowing that active transportation can have significant positive effects in reducing the incidence of the 'big four' chronic diseases, it is important that we look for ways to give people more real choices," says Goopy, adding that she wasn't surprised to hear participants say they felt "you aren't a Calgarian until you own a car."

Empathic Cultural Mapping is an online interactive tool Goopy's team developed which visually presents big data from sources like Statistics Canada, the Calgary Police Service and other published research findings alongside personal vignettes and stories of six individuals who've settled into Calgary. It allows users to navigate geographical maps on the interactive pages and discover data ranging from walkability scores in Calgary neighbourhoods to immigration rates across the globe. It also presents audio interviews, scanned journal entries and stories about the new immigrants to Calgary and their

personal anecdotes. The juxtaposition encourages users to see links across data which might not always be traditionally evident. The goal? Users can make connections and see key facilitators, blockers or constraints relevant to health.

Collaborators/Partners

- Cumming School of Medicine, UCalgary
- Faculty of Environmental Design, UCalgary
- School of Languages, Linguistics, Literature and Culture, Faculty of Arts, UCalgary
- Werklund School of Education, UCalgary
- Faculty of Nursing, UCalgary
- City of Calgary
- Calgary Immigrant Education Society
- Libraries and Cultural Resources, UCalgary
- Funded by The Andrew W. Mellon Foundation

WHAT'S NEXT

The ECM platform can evolve as new data sets are added, helping to inform actual or future city planning as well as offering other researchers across disciplines access to an educational tool.



Dr. Dawn Kingston, associate professor

Dr. Dawn Kingston

From her years as a neonatal nurse, Dawn Kingston knows stress, depression and anxiety in pregnancy could have an effect on the baby as well as the mum. So, beginning in October, several sites across Alberta will partner in the HOPE Digital Mental Health Platform, a weblink that pregnant women and new mothers can access to support their emotional health.

"Studies show that less than 10 per cent of women prefer face-to-face mental health screening," says Kingston, the Lois Hole Hospital for Women Cross-Provincial Chair in Perinatal Mental Health. "With our e-platform package, it becomes very individualized and women are more likely to take advantage of e-screening and e-therapy."

Kingston has been studying the mental health of women considering pregnancy and those who are pregnant, discovering a "cycle of non-disclosure and under-treatment."

"Patients don't always feel comfortable asking for help and health-care providers often don't have the time or the experience to ask," she explains. "But with one in four women struggling with anxiety or depression, the need is there."

And so, now, is the help. Kingston and her team have developed this comprehensive e-platform comprising e-screening, e-referral and e-therapy so that women can get help whenever they need it, wherever they are.

Increasing the less than four per cent of women who currently receive any kind of pre-natal mental health care

"The majority of women want to self-manage; they prefer not to take medication or to leave home to see a counsellor. There is advice on the platform about ways to assess your mental health and to identify what is going on, but the platform is also paired with telephone coaches so that is an option."

Kingston is confident that embedding this e-platform within the Alberta health-care system will help both patient and provider.

"We are moving prenatal mental health out of the shadows and building a culture of acceptance and support."

Collaborators/Partners

- Alberta Children's Hospital Research Institute
- Alberta Health Services
- Alberta Innovates
- Canadian Institutes of Health Research
- Faculty of Nursing, UCalgary
- Max Bell Foundation
- Norlien/Palix Foundation
- Royal Alexandra Hospital Foundation
- Women and Children's Health Research Institute

With upcoming funding, we may be able to expand the platform to men and truly build a culture of emotional wellbeing.

WHAT'S NEXT

Improving school readiness for kids who have faced adverse childhood experiences (ACE) through a two-generation approach



Dr. Carla Ginn, assistant professor

Dr. Carla Ginn

Can a two-generation early intervention make a difference to children and their families trying to navigate living with low income, mental health challenges, addiction and social isolation? Assistant Professor Carla Ginn believes it can. Since 2001, a research-based partnership between Dr. Karen Benzies (Ginn's doctoral supervisor) at the Faculty of Nursing and Calgary Urban Project Society (CUPS) Health Education Housing has followed low-income children and their caregivers.

"In this longitudinal research, there were originally 134 children and their caregivers who attended a two-generation preschool program at CUPS One World Child Development Centre," says Ginn. "Their caregiver/parent had six-week parenting classes and, after that, caregivers/parents were encouraged to sit in with children for classes."

The goal, Ginn explains, was to determine if this intervention strengthened the children's home environment with their caregiver and their readiness for school. The main evaluation tool was the Peabody Picture Vocabulary Test, which measures receptive vocabulary, a well-accepted global measure for school readiness. Not surprisingly, scores were below the Canadian average on intake, but there have been multiple successes as students have moved on. Ginn is now visiting the approximately 40 to 60 families that remain in touch at age 15 years and conducting the same vocabulary testing

as well as additional assessments such as risk for child maltreatment, depression and adverse childhood experiences (ACEs).

While the study is a long way from completion, Ginn believes it is pivotal to a greater understanding of the root causes of resiliency. "This two-generation approach will really help CUPS develop policies and make recommendations to meet the educational needs of families they serve."

Collaborators/Partners

- Calgary Urban Project Society
- Faculty of Nursing, UCalgary
- Max Bell Foundation

WHAT'S NEXT

Next steps are to work with these families as their children are graduating from high school, helping them access bursaries for post-secondary education.

Addressing mental health in new mothers and improving the parent-child relationship



From left: Dr. Nicole Letourneau, professor and graduate student Elena Ali

Dr. Nicole Letourneau

Depression undermines the quality of relationships and nowhere is this truer than the beginning bond a mother has with her baby. "When mom is down and distracted, the baby knows - they are unable to engage with a mother who is not responsive to their cues for interaction," says Nicole Letourneau, professor and ACHF Chair in Parent-Infant Mental Health. This "serve and return" is crucial to the brain development in these early years.

Letourneau's VID-KIDS (video interaction feedback for mothers with postpartum depression and their infants) project aims to address this issue by educating mothers on recognizing cues from their babies, what they may mean and how they can respond. The two-year, nurse-administered randomized control trial will recruit between 150 and 200 mothers, screened by public health nurses in Calgary for postpartum depression, who have agreed to take part in the study. The women are shown a series of images of babies' facial expressions and body language and what they might mean. The mothers are then videotaped interacting with their child and watch the playback with a trained RN who offers positive feedback on the interaction and suggests ideas and social supports for mothers who may be struggling.

"It has the potential to be a very do-able program that can easily be incorporated into any well baby/child clinic," Letourneau says. "And the program involves only three home visits from a trained RN."

Two of Letourneau's graduate students, Julia Imanoff and Elena Ali, are nurse facilitators for VID-KIDS and are learning valuable research skills in participant retention, questionnaire administration and data management, biological sample collection and working on a research team. "VID-KIDS focuses on the unique assessment and support skills of RNs in our capacity to support and potentially offer a treatment for women experiencing postpartum depression and their babies," says Imanoff.

Collaborators/Partners

- Alberta Health Services
- Barnard Center of the University of Washington
- Canadian Institutes of Health Research
- Faculty of Nursing, UCalgary

An epigenetics study pre-and post VID-KIDS intervention to see if there are changes in a baby's genetic expression would be a fascinating next step.

WHAT'S NEXT

Informing existing or new student wellness initiatives on UCalgary campus, particularly in the area of mental health and addictions



From left: Team member Joel Mader and Dr. Jacqueline Smith, assistant professor

Dr. Jacqueline Smith

The good news: UCalgary students are engaging in discussions about their use of marijuana, evidenced by a recent UCalgary survey of 4,000 students with a 55 per cent response rate. The concerning news: about 11 per cent reported using medicinal cannabis to relieve anxiety, depression and insomnia, a treatment that lacks evidence to support its therapeutic value.

“Our students are mirroring the trend we are seeing overall in the province,” says assistant professor Jacqueline Smith, principal investigator for the University of Calgary’s Campus Experience with Cannabis Survey. “Albertans are among the top users of medical marijuana in Canada and while we do know that cannabis holds therapeutic value for some illnesses, we don’t know enough about its long-term effects.”

The first phase of the three-part study, supported by the Campus Mental Health Strategy and Calgary Police Service, focused on pre-legislation. “We are very encouraged by the number of students who responded to the survey; with legislation looming, the perceived risk of talking about personal use decreases and there is probably more of a willingness to share,” says Smith. “That feeling of lessening risk that comes with legalization may also increase use — not just recreational, but also medicinal to help mitigate the effects of some prevalent student issues, like stress.”

That is concerning to Smith. “Young adult brains are still in development and the Canadian Family Physicians prescribing guidelines (2018) are cautioning against cannabis use for mental health issues until more is known.”

She adds, however, that the results have been a catalyst for an educational intervention that will be conducted in the fall. “We know that education is often not enough, but it will form the backdrop for an initiative planned with the Wellness Centre on campus.”

Collaborators/Partners

- Calgary Police Service
- Faculty of Nursing, UCalgary
- UCalgary Campus Mental Health Strategy

WHAT'S NEXT

Creating a larger Canadian longitudinal prospective study and following a cohort of students across several Canadian campuses during this important shift in Canadian drug policy will help inform cannabis campus policy across our country.



From left: Team members Sylwia Ciezar Andersen, Fazeela Mulji, Dr. Linda Duffett-Leger, assistant professor, Mari Ardila and Amy Beck

Dr. Linda Duffett-Leger

Did you know that nurses experience more back injuries on the job than construction workers? According to Linda Duffett-Leger, back injury costs the health-care system over a billion dollars a year, many nurses their careers and contributes to a worldwide shortage of nurses. Her interdisciplinary PAIN study (Protecting Against Injury in Nurses) explores how wearable technologies can be used to help reduce the risk.

“As a nurse, I often see in clinical settings or community settings, health-care problems that can be addressed with a technological solution,” she says. “What we’re seeing is that back injuries are occurring as a result of nurses not using proper body mechanics.”

In the multi-phased pilot study, 236 undergraduate nursing students shared baseline information with the PAIN team about their history of musculoskeletal injuries. The researchers examined the use of a wearable posture device with students as they performed lifts and transfers in the lab. The device provided haptic feedback, buzzing when the user was not in the correct posture, and recorded data like steps taken in a day and time spent in good posture. A team of computer science students then worked with the students and PAIN team to develop a working iOS app prototype for the wearable device.

By investigating how wearables can be used across the spectrum, Duffett-Leger aims to provide nursing students and new nurses a learning tool to help prevent back injuries; offer health-care administrators information about the health of their employees in order to target early interventions; and guide injured nurses safely back to the workplace without incurring further injury.

“Nursing has this culture of self-sacrifice. What we want to do with the technology is to empower nurses to better monitor and maintain their back health, mitigating back injury before it happens.”

Collaborators/Partners

- Dr. Reed Ferber, Faculty of Kinesiology/ Faculty of Nursing, UCalgary
- Dr. Christian Jacob, Faculty of Science/Cumming School of Medicine, UCalgary
- Alberta Health Services
- Faculty of Nursing, UCalgary
- UCalgary Office of the Vice-President (Research) STiMM Program
- UCalgary Biomedical Engineering research strategy

Students will pilot software to explore that transition period from nursing education to practice and are looking at using social media campaigns to disseminate research findings.

WHAT'S NEXT

Improving patient safety by exploring and supporting optimal decision-making processes by emergency registered nurses and first responders



Team members Dr. Tak Fung, Dr. Alix Hayden, Dr. Gerald Lazarenko, Dr. Eddy Lang, Dr. Gudrun Reay, assistant professor, Jill Norris, Lorraine Smith-MacDonald and Reilly Campbell

Dr. Gudrun Reay

When assistant professor Gudrun Reay attended a conference where physicians presented research about emergency department (ED) triage, it prompted her to think about her own 20-year experience as an ED triage RN. “I wanted to know how nurses make decisions in complex areas, like triage, where patients’ lives can be at stake. I was not so much interested in acuity scales; I wanted to know what choices RNs are considering when they are triaging patients,” she says.

Reay’s curiosity is now her research emphasis as an academic. “In my first study, the results showed that triage RNs spend a large amount of time shuffling patients. It is not just a question of how sick a patient is — nurses know sick: decisions are all around managing space, anticipating needs and creating space while all the while determining acuity.”

Reay then moved on to paramedics and how they make decisions in the field. “Paramedics operate in a very fluid environment,” she explains. “In many cases, they are going into environments where the scene dictates what they can and can’t do. They also have access to lots of rich information from that environment. The triage nurses don’t have the same access. When the patient arrives in the ED and transitions into the care of the hospital, there needs to be an accurate exchange of information between the paramedics and nurses to ensure the safety and continuity of patient care.”

Reay and her research team just wrapped up the analysis of data from a number of focus groups and will develop a questionnaire that measures how triage RNs make decisions using factors that nurses themselves have identified. Eventually the questionnaire will be distributed nationally to triage professionals.

“I am hopeful the results can be used to think about how we need to design ED triage areas — how waiting rooms need to be set up with clear sightlines, for example — and what sort of software we need to better communicate within the team.”

Collaborators/Partners

- Faculty of Nursing, UCalgary
- Emergency Medical Services, Alberta Health Services and Alberta Health Services

WHAT'S NEXT

Can we develop a streamlined handover between paramedics and ED nurses to ensure patient safety? How can we design triage areas that support decision-making processes that nurses use, as opposed to the nurses, for example, creating work-around processes?



Dr. Sandra Goldsworthy, associate professor and team members Dave Patterson and Krista Wollny

Dr. Sandra Goldsworthy

How does simulation save lives? How can simulation be utilized to recognize and respond to a deteriorating patient? How can we reduce the incidence of medication errors? For Sandra Goldsworthy, the answer to some of these research questions starts and ends with building competence and confidence among practitioners and students. Her program of research explores the impact of simulation education and the most effective ways to integrate simulation and technology in the classroom and in the lab, which ultimately helps to save lives.

“In terms of medical errors in acute care settings, number one is medication error. In addition, ineffective communication between health-care practitioners and failure to recognize a patient who is deteriorating are key areas we want to focus simulation strategies on,” she says.

Goldsworthy’s simulation interventions use a blended approach of modalities such as high-fidelity human simulators, standardized patient actors or virtual simulation technologies. Her research team measures students’ competence, teamwork skills and confidence in approaching specific situations before and after they encounter simulation.

“What I have found is that students have significant increases in knowledge and confidence in responding to critical patient situations such as a patient with no pulse, one who isn’t breathing or one having a major hemorrhage,” she says. “It’s all about preparing our students for transition and readiness for practice. The ultimate outcome is preparing practitioners (new nurses) to provide the safest and highest quality of patient care in practice.”

Goldsworthy and her team are designing and leading national and international multi-site collaborative simulation research projects. She is also collaborating with nurse educators and researchers from across Canada and abroad to integrate the newest evidence-based findings into the UCalgary nursing curriculum.

Collaborators

- University of Brighton
- Bournemouth University
- Edinburgh Napier University
- Birmingham University
- CLPNA
- University of Gothenburg
- Griffith University
- World Federation of Critical Care Nurses
- University of Alberta
- Queen’s University
- University of Manitoba
- Alberta Health Services
- KidSim, Alberta Children’s Hospital
- Cumming School of Medicine and Faculty of Veterinary Medicine, UCalgary; Taylor Institute for Teaching and Learning grant and Teaching Scholar grant; Eyes High doctoral scholarship
- Faculty of Nursing, UCalgary
- SAIT

Partners

- Laerdal
- Wolters Kluwer Publishing
- CAE
- Lifecast Body Simulation

Next steps for simulation research are to focus on the impact of simulation related to improving specific patient outcomes.

WHAT'S NEXT

Reducing health and social inequities among immigrants who are living with HIV in Canada



Dr. Añiela dela Cruz, assistant professor and team member Jillene Richter

Dr. Añiela dela Cruz

As part of the Canadian immigration application processes, mandatory HIV screening has been in place since 2002. While Añiela dela Cruz started her research career examining how the perception of HIV/AIDS changes as people cross borders and implications for transmission and infection, she is now exploring the impact this policy has on people living with HIV.

dela Cruz is part of the Newcomer, HIV, Immigration, Treatment Engagement and Stigma in Canada (NewHITES) Community-Based Research Team, leading a national study looking at internalized stigma experienced by African and Caribbean immigrants living with HIV and the experience of this mandatory HIV screening. Using a mixed-methods approach, the NewHITES team collected data from 123 participants and conducted interviews with 34. Preliminary results show inconsistencies in the areas of informed consent, pre-HIV test counselling, post-HIV test counselling and referral to health-care services or follow-up care. The study also found that nearly half of respondents learned about being HIV positive for the first time during the medical exam.

“It appears that many people we worked with were experiencing stigma during the mandatory HIV screening process of immigration exams and not consistently getting connected to services during the migration and settlement process,” says dela Cruz.

dela Cruz says the long-term aim of her team’s research is to explore new approaches in providing HIV prevention, care and support services for this particular newcomer population. “We’re looking at HIV stigma in the context of migration and settlement, and the other layer is immigration process and policies,” she says. “Once we have that info, we can start planning for an intervention. The goal is to have programs that better support people and newcomers who are living with HIV in Canada.”

Collaborators/Partners

- Afro-Canadian Positive Network of BC
- Council for the Advancement of African Canadians in Alberta
- Canadian HIV/AIDS Black, African & Caribbean Network
- HIV Edmonton
- HIV Community Link
- Public Health Agency of Canada
- University of Lethbridge
- University of Saskatchewan
- University of Alberta
- San Patten and Associates
- Faculty of Nursing, UCalgary

WHAT'S NEXT

NewHITES’s next project will focus on designated panel physicians overseas who conduct mandatory HIV testing during the Canadian immigration medical exams.



Dr. Eloise Carr, professor and team members Pamela Pyle and Robert Pyle

Dr. Eloise Carr

Nearly 25 years ago, Pamela Pyle shattered her ankle in a motorcycle accident and now lives with chronic pain. Her dog Willow, a two-year-old shepherd-lab cross, assists her with moving around but more importantly, is helping to ease her pain.

“When my pain is extreme, she’ll lay on my feet and stay there until I can feel my pain start to drop,” she says. Pyle is a patient member of the HAPI (Human Animal Pain Interaction) study at UCalgary, led by Eloise Carr, which examines the experience of dog owners who live with chronic pain. Carr’s team is made up of experts in nursing, social work, veterinary medicine, sociology and community health sciences across Alberta.

“The human and animal world have some of the same questions when it comes to pain management,” says Carr. “But veterinarians are way ahead of us in terms of ways to manage it for their canine clients.”

An earlier study showed that living with a dog helps individuals coping with chronic pain related to their mental, physical and social well-being. A feasibility study surveyed dog and non-dog owners to measure different aspects of their health and wellness and found dog owners reported significantly less severe pain. They give people motivation to get out of the house and socialize. Dogs also provide distraction, along with listening and emotional support. Respondents in the study mentioned they experience benefits from talking to their dog and offloading their concerns to a non-judgmental figure.

“People with chronic pain become very isolated; their relationships with other human beings disappear because people get tired of talking about pain with other human beings, or listening to people talking about pain,” says Carr. “That doesn’t happen with dogs.”

Collaborators/Partners

- Alberta Health Services
- Colorado State University
- Faculty of Nursing, UCalgary
- Cumming School of Medicine, UCalgary
- Department of Sociology, Faculty of Arts, UCalgary
- University of Alberta
- University of Lethbridge
- PaCER (Patient & Community Engagement Research) grant and a Catalyst Grant, O’Brien Institute for Public Health, UCalgary

The HAPI team is applying for grants to develop a self-care intervention for people who have chronic low back pain and live with a dog.

WHAT'S NEXT

Improving the lives of people living with dementia and their family caregivers



Dr. Gwen McGhan, assistant professor

Dr. Gwen McGhan

Gwen McGhan wants to improve outcomes for caregivers and the older adults for whom they provide care in various settings, including the community. Working with UCalgary nursing instructor Kimberly Shapkin and Kinesiology’s Jessica Power Cyr as her co-investigators, she believes their 12-week feasibility study, which began in July, will shed light on what the person living with cognitive impairment and the family caregiver need to promote the best quality of life possible.

“The study is made up of two components for the person living with dementia – one is cognitive; the other is physical,” explains McGhan. “For two hours a day, two days a week there will be a series of activities in a group setting. A recreational therapist will examine what happens to the mood, for example, and a certified exercise psychologist will study fitness and measure it throughout the 12-week period. During the same time period, we will also be examining the family caregiver’s perception with the program.”

Understanding that “one size doesn’t fit all,” volunteers will help individuals in the group based on their level of comfort with various exercises, says McGhan.

Based out of the Glencoe Club in southwest Calgary with a pre-existing group that is already part of that community, McGhan is hopeful that results will prove such a program is valuable and that it can be adapted for many diverse communities. “After the three

months are over, we will bring everyone together for a focus group to discuss the acceptability of the program from the perspective of the participants. Was this a resource for them? Was it helpful in their daily lives? We need to capture the experience and see if it was beneficial.”

Collaborators/Partners

- Carewest
- Glencoe Club
- Faculty of Nursing, UCalgary
- Department of Community Health Sciences, Cumming School of Medicine, UCalgary
- The Pennsylvania State University



We would like to develop a toolkit or guide that can be used in many different areas of a city, for different kinds of groups to boost that quality of older adults’ and their caregivers’ lives.



Dr. Lorraine Venturato, associate professor

Dr. Lorraine Venturato

The Faculty of Nursing’s Chair in Gerontology wants to greatly improve the conversations health-care teams have around end-of-life. Lorraine Venturato is currently working on her third funded study on improving palliative care; this national project (across four provinces) is trialing evidence-based interventions to improve the quality of care and the quality of life for those in long-term care.

“We are mostly focused on staff development and education,” says Venturato, who is co-principal investigator of the study and the Alberta lead. “Staff in long-term care centres are often anxious about having conversations with residents and families about death.”

So far, Venturato has observed over 25 conversations with patients, families and health-care providers in the study.

“We have had some issues recruiting families when we tell them it is ‘palliative’ research,” she admits. “When people think of palliative, they are usually referring to an immediate lead-up to death. In actual fact, a palliative approach has a focus on quality of life within the context of chronic and life limiting illness. Frailty and dementia are not something you are going to be cured of although you may live for a number of years. That is why we call it a ‘palliative’ approach. We know what the ultimate end is, but it may take some time to get there. Until that time, we want to provide the best quality of life we can.”

Equipping staff at long-term care facilities with better communication skills and confidence when speaking with patients and families about end-of-life care

Venturato also holds monthly ‘palliative champions’ sessions with people who have a particular interest in the area. These champions, she feels, will greatly assist in the success of implementation of recommendations once the study is complete. Funding for this phase of the study ends in 2020.

Collaborators/Partners

- Brock University
- McGill University
- McMaster University
- University of Manitoba
- University of Regina
- University of Saskatchewan
- Faculty of Nursing, UCalgary
- Co-funded by CIHR; Alberta Innovates – Health Solutions; Manitoba Health Research Council; Ontario Ministry of Health and Long Term Care; and Saskatchewan Health Research Foundation

I am interested in the nurse management role in long-term care and exploring the skillset that leads to a high performing long-term care team.



Implementing a routine measure in clinical care to evaluate and improve compassion



Front row: Shane Sinclair, associate professor, and Carolyn Campbell
Back row (left to right): Katie Webber, Priya Jaggi, Reilly Campbell, Lorraine Smith-Macdonald, Shaista Sajan

Dr. Shane Sinclair

Shane Sinclair knows compassion is different for everyone, but in The COMPASS Study, his CIHR-funded project to develop a measure of compassion, he is determined to come up with something that can help improve compassion for all patients.

“We have spent a lot of time on the wording of survey questions to accurately and comprehensibly measure experiences of compassion,” he explains.

“Previous studies have not actually done necessary foundational work so that was the first thing: getting people to define compassion. Now, we are at a stage of asking 54 questions of our subjects, based on the patient model of compassion we developed, in four clinical settings: acute care, hospice, home care and long-term care. We will then analyze those answers, consolidate the questions and test them on another 300 patients in the next round.”

Sinclair’s team, located in Winnipeg and Calgary, has included long-term care patients, some with dementia. “This population has been excluded without warrant from a lot of studies. We found from speaking to doctors and nurses that while patients with early to mid-onset may not be oriented to time and place, they can tell you about their care experience,” he says.

At the end of the project, Sinclair hopes to get a measurement tool into clinical practice that will help patients receive more compassionate care.

“It is my hope that one day family members will be able to pull up long-term care facilities ‘compassion scores’ for the year as they determine which facility they want to entrust the care of their loved one to. The compassion scale will tell them that.”

Collaborators/Partners

- Office of Patient-Centred Measurement, British Columbia Ministry of Health
- College of Nursing, Rady Faculty of Health Sciences, University of Manitoba
- Faculty of Nursing, UCalgary
- College of Nursing, University of Victoria

WHAT'S NEXT

Wouldn't it be cool for anyone to go online and, in addition to seeing waitlist times, choose a health-care facility based on their compassion scores?

Honours & Awards

Year	Honours / Awards	
2018	Sandra Goldsworthy	CNA Order of Merit for Education
	Catherine Laing	Association of Pediatric Hematology / Oncology Nurses Writing Award
	Shahirose Premji	CARNA Nursing Excellence in Research Award
	Sandra Reilly	Order of the University of Calgary
	Shane Sinclair	Palliative Medicine, Paper of the Year
2017	Sandra Hirst	150 Nurses for Canada
	Catherine Laing	CARNA Award of Excellence in Nursing Research
	Nicole Letourneau	CASN 2017 Excellence in Nursing Research Award
	Nicole Letourneau	CAMH Difference Makers — 150 Leading Canadians for Mental Health Award
	Nancy Moules	150 Nurses for Canada
	Shahirose Premji	150 Nurses for Canada
	Sandra Reilly	150 Nurses for Canada
2016	Shane Sinclair	Canadian Institutes of Health Research, Institute of Cancer Research New Investigator Award
	Jacqueline Smith	Calgary Police Service Chief's Awards - Community Service Award
	Karen Benzies	CAPWHN Leadership Award
	Kathryn King-Shier	Fellow, European Society of Cardiology
2015	Kathryn King-Shier	CNA Order of Merit for Nursing Research
	Nicole Letourneau	2016 Alberta Inspiration Awards in Family and Community Safety
	Shahirose Premji	CNA Jeanne Mance Award
	Shane Sinclair	International Psycho-Oncology Society New Investigator Award
	Shane Sinclair	International Psycho-Oncology Society New Investigator Award



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