

2018 & 2019

SCHOOL OF NURSING

CARING TO LEARN. LEARNING TO CARE

QUEEN'S NURSING AND HEALTH RESEARCH

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MESSAGE FROM DR. ERNA SNELGROVE-CLARKE

DIRECTOR, SCHOOL OF NURSING, & VICE-DEAN (FACULTY OF HEALTH SCIENCES)



In research, those that contribute to its production and mobilization play a significant role towards improving health, healthcare quality, and educational initiatives. Since acquiring my role as Vice-Dean (Health Sciences) and Director, School of Nursing, in July 2019, I have been immersed in a research environment of inquiry, learning, and collaboration. I am increasingly impressed by the swirl of research activity and the exciting range of projects throughout the School of Nursing. I am privileged

to work with a talented team of scholars, to be engaged in a truly inspiring environment, and to lead the way into the Queen's School of Nursing's next phase of research growth and development.

With the diligent work and leadership of my predecessor, Dr. Jennifer Medves, the School of Nursing initiated a journey of transformation and growth. Launching the Health Quality graduate programs, hiring new faculty and staff, and realizing numerous strong methodological platforms, Dr. Medves contributed to boost research activities to an unprecedented level. Over the coming years, we will continue this transformative journey to strengthen the School of Nursing's research capacity and to develop relevant, high-impact research programs.

Our journey has already begun. We have held stimulating discussions amongst faculty to chart new directions and to develop a roadmap towards the School's vision for the future. Last November, we organized a research retreat where we re-examined our processes and supports, reflected on the School' strengths and weaknesses, outlined areas of priority, and generated fresh ideas to advance the School of Nursing's research momentum. As we continue to strive for national and international

recognition, initiatives such as these will position our School of Nursing to achieve new levels of success.

We are excited to share with you a showcase of our 2018 and 2019 research activities. In the pages that follow, we present a snapshot of the research activities conducted by the faculty of the School of Nursing. We are proud of our research accomplishments. For example, we have seen an outstanding increase in both the number of publications and the number of awarded grants. We continue to foster and build new partnerships with researchers and practitioners, we have organized and attended a range of events, and we mentor Masters and PhD students as they progress in their academic and research development. In this report, we celebrate our researchers, partners, students and staff for their dedication to high-quality research.

I am excited about the future direction of the School of Nursing and look forward to supporting our many new discoveries and improvement endeavors. Together, through our collaborative and inclusive efforts, we will impact health policy, practice, and education globally.

Erna Snelgrove-Clarke

MESSAGE FROM DR. JOAN TRANMER

DIRECTOR OF THE QUEEN'S NURSING AND HEALTH RESEARCH AND SALLY SMITH CHAIR IN NURSING



I am very pleased to acknowledge the success and continued growth of the research and scholarship activities of faculty involved with the Queen's Nursing and Health Research (QNHR).

While the complexities and challenges of the research landscape continue to exist, we have achieved success. We have continued to optimize the structures and processes previously established within the QNHR program and have increased the research and scholarship capacity of all faculty. One of the strengths of the QNHR program is to provide

support and mentorship for faculty through a number of activities such as internal peer review, formal collaborations and research administrative support. In the past 2 years, as illustrated in this report, our research and scholarship output has grown. There were 70 projects that received peer reviewed funding, 146 publications led or co-led by nurse faculty and a number of presentations. Thus we have contributed new knowledge relevant to Nursing.

We continue to build upon strong methodological platforms through our formal collaborations with ICES and the Queen's Collaboration for Health Care Quality (JBI). Currently there are 10 projects utilizing ICES data and a number of systematic reviews are in progress. We look forward to the development of other methodological platforms. This comprehensive research methodological base provides an attractive research base for graduate students.

We have continued with our bi-weekly Academic Series. This forum allows students, faculty and practice partners to share past,

current or proposed research activities. We look forward to providing other opportunities for knowledge sharing within the School of Nursing and externally. For example, a number of faculty are members of the Health Services Policy Research Institute, which will provide another platform for collaborative research activities for faculty and students.

Research is often perceived as a "solo" venture and journey. While each faculty member is developing their own comprehensive program of research, the QNHR provides infrastructure supports for individual research development within the context of a research and scholarship group. This benefits the individual and the School of Nursing.

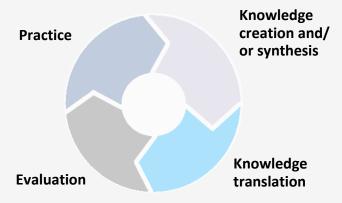
It is with enthusiasm and excitement that I look forward to the next years and the research scholarship and development of the QHNR members. It is a pleasure to work with this dedicated and engaged group.

Toan Tranmer



Faculty composition

The Queen's Nursing and Health Research is home to 18 faculty members of the Queen's University School of Nursing. The School offers an undergraduate Nursing program and graduate programs in Health Quality and Nursing. It is composed of a team of investigators who collectively, and in collaboration with practice and academic partners, lead and facilitate comprehensive research programs embedded within a cycle of practice – knowledge creation and/or synthesis – translation – evaluation.



New Faculty members



Dr. Rylan Egan started in his new position as Assistant Professor in July 2018. His research interests include systemizing grassroots quality improvement at the institutional and provincial level, diagnosis and treatment

of endemic disease, and pain management (p. 21).



Dr. Jacqueline Galica joined the School of Nursing as an Assistant Professor in July 2018. Her research program primarily explores the psychosocial needs of post-treatment cancer survivors and seeks to identify methods

useful to help them (p. 22).



Dr. Mary Smith joined the School as an Assistant Professor in July 2018. Mary's research program focuses on Nursing and Nurse Practitioner experiences in education, mental health care and within First Nation

communities (p. 30).



In July 2019, we welcomed Dr. Erna Snelgrove-Clarke as Vice-Dean of the Faculty of Health Sciences and new Director of the School of Nursing. Erna currently holds a CIHR Embedded Clinician Researcher Salary Award to

explore care management in maternal obesity (p. 31).

Research support, resources and processes



Support staff

Research Facilitators Geneviève Paré Agnès Alsius

Finance manager **Derek Conlon**

Human resources Cindy Palmer

IT support **Ted Girard**

Marketing & **Communications Justine Mayhew**



Research meetings

Regular research meetings facilitate the establishment of collaborations, support the everyday research activities, and provide the opportunity for peer review of funding applications.



Formal mentorship

Scholarly growth of junior faculty members and academic excellence and rigour are nurtured at the School level through formal mentorship by established researchers, and through additional consultation services and facilitation of external peer review of research proposals at the University level.



Research space

The School provides physical space dedicated to Research Assistants within the Cataragui buidling.

Research space is also available at ICES Queen's (Abramsky Hall) and at the Kingston Health Sciences Center.



Internal research funds

The School leverages endowed funds to support faculty in the pursuit of their research programs and projects. Funds are allocated yearly through a peerreview process. Faculty may also apply for funding at the Faculty of Health Sciences (FHS) and Queen's internal competitions.



Each of our individual research programs aligns with three research themes: 1. Populations with complex conditions, 2. Practice environments, and 3. Health Care quality. This thematic approach is based on faculty research interests and strengths, as well as health and national research priorities.

HEALTH CARE QUALITY

Advancing safety, Risk assessment and reduction, Educational and technological innovations, Health system service and delivery, and Health equity

POPULATION WITH COMPLEX CONDITIONS

Optimizing function & wellbeing in older populations, persons with mental health and/or addiction issues, and persons with complex and/or multiple chronic conditions.

PRACTICE ENVIRONMENTS

Models of care, Leadership, Workplace culture, Structure and health, Communication strategies and systems



Methodological platforms

The School has developed comprehensive methodological platforms to ensure extensive and rigorous methods' support for research led by individual investigator faculty. Two well-established platforms are:

- **1.** Health administrative and large databases (Institute for Clinical Evaluative Sciences; ICES)
- **2.** Knowledge synthesis and translation (QcHcQ, SPOR Evidence Alliance)





ICES is an Ontario independent, non-profit research organization that uses population-based health and social data to produce knowledge on a broad range of health care issues. Data is deidentified (it cannot be traced back to an individual) and includes, but is not restricted to, length of hospital stay, number of emergency department visits, age, wait time, primary care enrollment and medical drug claims.

- There are currently **10** active projects utilizing ICES data led by School of Nursing faculty, and **2** led by School of Rehabilitation Therapy faculty with Nursing collaborators.
- Increasingly, graduate students, in collaboration with their supervisor, are actively engaging in ICES projects that support their theses.
- Expertise in the analysis of large administrative datasets is further developed with mentorship by **Dr. Joan Tranmer**, Site Director for ICES- Queen's and with participation by Dr. Katie Goldie in the ICES Fellow program.



Methodological platforms



The Queen's Collaboration for Health Care Quality (QcHcQ) is a Canadian centre within the international Joanna Briggs Institute (JBI). The JBI is an independent, international, not-for-profit research and development organization that prepares researchers and clinicians to develop, conduct and report robust, high quality systematic reviews, in order to provide the strongest possible evidence to inform decision making or clinical guideline development in healthcare.

- Leadership is provided by School of Nursing faculty Christina Godfrey, Kim Sears, Rosemary Wilson, and Andrea Tricco.
- A large proportion of School of Nursing faculty are core members of the QcHcQ and use and support the JBI methodology.
- For more information visit https://www.queensu.ca/qjbc/





Founded in 2017, The Strategy for Patient-Oriented Research initiative (SPOR Evidence Alliance), is a partnership between researchers, patients, healthcare providers, policymakers, and other decision-makers to build a Canadian health system that uses best available evidence and innovations uncovered by the health research community. It is funded by CIHR.

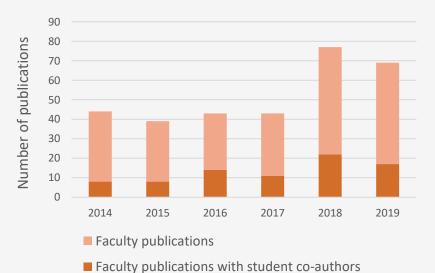
- School of Nursing faculty are core team members of the Alliance: Christina Godfrey as a co-principal applicant, and Kim Sears, Rosemary Wilson, Marian Luctkar-Flude, Thomas Rotter, Kevin Woo and Erna Snelgrove-Clarke as co-applicants.
- Additional faculty members participate as collaborators.
- For more information visit https://sporevidencealliance.ca/

RESEARCH METRICS

Number of publications

70%

Increase in the number of publications in 2018 and 2019 (relative to the previous reported period of 2016 and 2017)



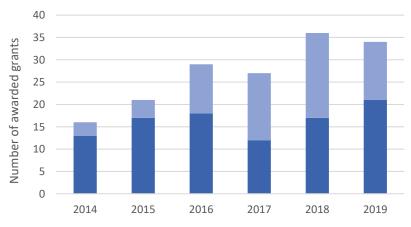
Queen's University School of Nursing ranked # 1 for its field weighted citation impact[^] in Macleans 2019 'Canada's best university nursing programs'

> ^The field weighted citation impact is the ratio of the total citations received by a publication and the total citations that would be expected based on the average of the subject field

Number of awarded grants

25%

Increase in the number of awarded grants in 2018 and 2019 (relative to the previous reported period of 2016 and 2017)



- Awarded grants with SON faculty as Co-applicants
- Awarded grants with SON faculty as Principal Applicants

RESEARCH METRICS

Grant revenue

> \$8.0 M

Total revenue in awarded grants by School of Nusing faculty in 2018 and 2019



increase revenue for grants awarded to Queen's SON faculty as principal applicants*

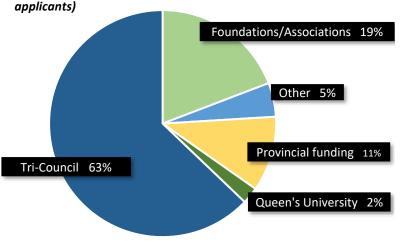


increase revenue for grants awarded to Queen's SON faculty as co-applicants*

Funding sources

In a landscape of limited and highly competitive research funding, SON faculty secured funding from a variety of sources, with CIHR and SSHRC providing over 60% of the dollar value of research funding to SON faculty (either as principal applicants or coapplicants).

Source of funding for grants awarded in 2018 and 2019 for Queen's University School of Nursing faculty (as principal applicants or co-



NEW RESEARCH APPOINTMENT: SALLY SMITH CHAIR

In November 2019, Dr. Joan Tranmer was appointed as the new Sally Smith Chair in **Nursing**, after the first appointed Chair Dr. Elizabeth VanDenKerkhof.

The Sally Smith Chair in Nursing was created as part of a \$10-million donation to Queen's by A. Britton **Smith**, a continuing supporter of the university. The chair is named after his wife Edith "Sally" (Carruthers) Smith, who died in June 2012 after a courageous battle with cancer. The funding also helped create the Smith Chair in Surgical Research and the Britton Smith Chair in Surgery, as well as to support the revitalization of Richardson Stadium. It represents the largest donation to the School of Nursing in its 74-year history.



A. Britton Smith, funder of the Sally Smith Chair in Nursina

The foundation of Dr. Tranmer's success as a prolific researcher and academic rests upon nearly three decades of service to Kingston and Ontario-at-large in a variety of clinical and leadership roles.

Dr. Tranmer is an active researcher with a focus on optimizing care for individuals with chronic illness and the relationship between work-related factors and women's health. She has been an investigator on more than 60 funded research studies and is currently involved in three studies on the effectiveness of interdisciplinary teams, integrated care, and patient-centric care communities for senior adults with complex healthcare needs.

Dr. Tranmer's previous research has earned awards including the Ontario Ministry of Health and Long-term Care Career Scientist Award and the Ontario Women's Health Council and Canadian Institute of Health Research Mid-Career Investigator Award. Her research findings have received international media attention, and she is a frequent scientific presenter at both national and international conferences.

Dr. Tranmer joined Queen's as a full time faculty member in 2005 and has since earned the title of full professor and served as Scientific Director and Senior Scientist, School of Nursing Queen's Nursing and Health Research; Margaret B. Vogan Fellow, and Site Director, Institute for Clinical Evaluative Sciences-Queen's.

[excerpt from the announcement of the new Sally Smith Chair appointment; Faculty of Health Sciences website



Dr. Joan Tranmer and Dr. Erna Snelgrove Clarke after Dr. Tranmer' speech at the Sally Smith Chair Reception.

QUEEN'S NURSING AND HEALTH RESEARCH GROUP

Research initiatives, knowledge translation and collaborations

In 2018 and 2019, we have engaged in numerous initiatives to develop and share high-quality and impactful research. See some examples below.

Research initiatives

The Health Quality (HQ) Research Committee, established in 2018, organizes a quarterly book/journal club for faculty, alumni, students and community partners.

Knowledge translation activities

We have participated in and hosted local research conferences and meetings

Kingston Nursing Research Conference (March 2018 & March 2019) The annual conference offers a dynamic program of nationally recognized speakers and poster presentations that enhances awareness of nursing research, promotes dialogue and transforms practice.

Health Quality Research Forum. After the success of the inaugural Health Quality Research Forum in 2017, the 2019 Forum featured keynote speaker Dr. Andrew Carson-Stevens (School of Medicine, Cardiff University), who provided insights into how health and social care organisations can maximize learning from unsafe care experienced by patients and families. Dr. Carson-Stevens' visit was supported with a Queen's Principal's Development Fund award, that aims to support international travel of outstanding scholars to visit Queen's University.



Drs. Kim Turner, Kim Sears, Joel Parlow, Jennifer Medves, Andrew Carson-Stevens and Lenora Duhn during the 2019 Health Quality Research Forum

We have also continued our biweekly **Academic Series**. Recordings of the presentations for the 2019-2020 Academic year are now available at: https://stream.gueensu.ca/Playlist/SON Acad emicSerie

Two international visitors participated in the 2019 Academic Series:

Mrs. Margaret Murphy, External Lead Advisor for Patients for Patient Safety, World Health Organization (WHO), presented on "The Meaning and Scope of 'Patient Engagement'.



Dr. Lenora Duhn and Margaret Murphy, following her presentation in the School 's Academic Series (November 2019)

Dr. Leigh Kinsman, Joint Chair, Professor of Evidence Based Nursing in the University of Newcastle, presented on "The evidence for evidence based practice: an international journey".

Special guest lecture. Dr. Megan Aston, Professor and Associate Director Research and International Affairs, and Director of Centre for Transformative Nursing & Health Research at Dalhousie University, visited the School in November 2019. The title of her talk was "On the Edge: The everyday practices of poststructuralism in nursing research".



Dr. Megan Aston (left) before her lecture and Geneviève Paré. Research Coordinator.

Guest presentation by Dr. Nicole Harden. Dr. Harder, a nurse educator from the University of Manitoba with extensive experience in

clinical simulation, visited the School and talked about educational research and simulation.



Dr. Nicole Harden shares her work on simulation with members of the Queen's Nursing and Health Research group.

New collaborations

We have fostered new collaborations within and across departments, schools and faculties; locally, nationally and internationally.

Health Services Policy Research Institute (HSPRI). Approved by the Queen's Senate in 2018, the new HSPRI was formed. Members of the group include active health services research groups within the Faculty of Health Science, such as the QNHR, QcHcQ, School of Rehabilitation Therapy, ICES and Center for Health Services and Policy Research (CHSPR). School of Nursing faculty members took on

leadership roles of many of the research nodes within the HSPRI: Joan Almost (Models of care); Christina Godfrey (Knowledge synthesis and translation); Joan Tranmer (ICES Queen's); Mona Sawhney (Complex Patients). For more information visit

https://healthsci.gueensu.ca/research/hspri

With funding from a Social Sciences and **Humanities Research Council of Canada** Institutional Grant, Pilar Camargo Plazas and Lenora Duhn initiated a new collaboration with Judy Fyfe, Executive Director St. Vincent de Paul Society of Kingston to investigate access to healthcare and social services for women with low income.

Marian Luctkar-Flude and Deborah Treguno are collaborating with **Dr. Jane Tyerman** (University of Ottawa, School of Nursing) to develop and evaluate a sexual orientation and gender identity nursing education toolkit featuring virtual simulation games (see p.25 for more information).

Katie Goldie collaborated with Dr. Sandra Lauck, a Clinician-scientist at the University

of British Columbia and St. Paul's Hospital to establish a joint Cardiovascular Research Fellowship. Evan Keys, who recently completed his Masters in Nursing Science at Queen's University, was the inaugural recipient.



Dr. Katie Goldie with Evan Keys

Rosemary Willson is collaborating with Dr. Rachael Bosma at the Toronto Academic Pain Management Institute and other investigators across Canada to examine the feasibility of an online program designed to enhance readiness for change and selfmanagement of patients waiting for care at a chronic pain clinic (see p.34 for more information).

Kim Sears further strengthened her collaborations with Safe Assured, SafetyNET-**Rx**, a provincial research entity set up by regulators of the Nova Scotia College of Pharmacists, to study error reporting in the province's community pharmacies. The important work of Safe Assured was recently featured in the Dalhousie University gazette in an article titled "Safe Assured: Positioning Nova Scotia as the North American leader in community pharmacy safety".

In addition, Kim has begun collaborating with experts from Canada, the UK, and the US to examine patient safety in Canadian community pharmacy practice (see p.29).

Kevin Woo is collaborating with researchers from Sao Paulo, Brazil to investigate the relationship between pain, infection, and stress on wound healing (see p.35).

Pilar Camargo Plazas and Deborah Tregunno initiated a collaboration with Ms. Maggie Black, Executive Director and Ms. Laura Baldwin, Program Manager of Sharbot Lake Family Health Team to formulate the research process to develop, implement and evaluate an educational program in self-care management for seniors with diabetes (p.33). In addition, Pilar Camargo Plazas is collaborating with research experts from Canada and Colombia to develop a theoryinformed intervention to increase awareness and willingness to uptake Pre-Exposure Prophylaxis (PrEP) in HIV clinics in Colombia.

As the Scholar in Residence at the Canadian Nurses Association (CNA), Joan Almost is collaborating with CNA's leadership and board members across Canada on several policy initiatives. She is also leading an initiative to inform national policy on intraprofessional practice in nursing, including an in-depth report on the current state of nursing in Canada (p. 18)

A GLIMPSE OF RESEARCH RECOGNITIONS AND AWARDS

Recognitions

Joan Tranmer was listed by the Journal of Advanced Nursing (Feb. 2019) in the top 25 Canadian Nursing Faculty based on number of career citations for all published journal articles, with total citations of her research numbered at **2,516**.

Thomas Rotter was listed by the Journal of Advanced Nursing (Feb. 2019) in the top 25 most highly cited articles 1st-authored by Canadian Nursing Faculty, for his study "Clinical pathways: effects on professional practice, patient outcomes, length of stay and hospital costs" (Cochrane Database Syst Rev. 2010, 3). Dr. Rotter is currently working on an update of this highly cited study.

Awards

Kevin Woo received the Ostomy Canada WOC-EP Award (2018) that acknowledges academic advancement in wound, ostomy and continence Nursing research.



Left to right: Ann Ivol, Dr. Kevin Woo and Dr. Kimberly LeBlanc at the Academic Chair of the Wound Ostomy and Continence Institute at the NSWOCC Conference

Kevin Woo received the Journal of Wound Care's Best Diabetic Foot Ulcer Intervention Award (2018)

Jacqueline Galica received the Early Career Investigator (ECI) New Principal Investigator Award, sponsored by the Canadian Institutes of Health Research-Institute of Cancer Research (CIHR-ICR) & Ontario Institute for Cancer Research (OICR) to attend the ECI meeting and the Canadian Cancer Research Conference in Ottawa in November 2019.

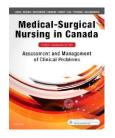
Marian Luctkar-Flude received the CASN Pat Griffin Nursing Education Research Scholar Award (2019). This award honours a researcher and scholar who has contributed significantly to the scholarship of nursing education in Canada.



Dr. Marian Luctkar-Flude (right) with Dr. Cynthia Baker at the 'Pat Griffin Annual Lecture' at the 2019 CASN Council meeting.

Marian Luctkar-Flude and Deborah Tregunno received the Queen's University's Principal's Educational Technology Award (2019), that recognizes and encourages the innovative use of technology to enhance teaching and learning at Queen's.

A GLIMPSE OF PUBLISHED BOOKS, BOOK CHAPTERS AND GUIDELINES



In 2018 Marian Luctkar-Flude published a chapter in the 4th edition of *Medical-Surgical* Nursing in Canada. The chapter is titled "Nursing assessment: Visual and auditory systems".



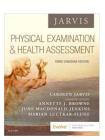
In 2019, Thomas Rotter was an author of "Clinical Pathways as a quality strategy", a chapter in the book *Improving healthcare* quality in Europe: Characteristics, effectiveness and implementation of different strategies.



Kevin Woo was the author of the Polit & Beck Canadian Essentials of Nursing Research (2018).



Mona Sawhney published Pain Management Guidelines in the first edition of the book Canadian Family Practice Guidelines (2019).



Marian Luctkar-Flude was an author of the 3rd edition of the book *Physical Examination* and Health Assessment published by Elsevier in 2019



Jennifer Medves was the author of the chapter "Health profession regulation: Improving the prospects for innovation", published in the book A Canadian Healthcare Innovation Agenda: Policy, Governance, and Strategy (2018)



Mona Sawhney was an author of a chapter titled "Pain assessment and management", published in 2018 in the book Canadian **Fundamentals of Nursing**



Kim Sears, Thomas Rotter and Jennifer Medves were authors in 2019 of the chapter "Improving patient and nurse safety: Learning from past experiences" in the book Fundamentals: Perspectives on the Art and Science of Canadian Nursing, 2nd Edition

INTERNATIONAL IMPACT

Map of ongoing research collaborations, conference attendance, oral and poster presentations for the QNHR faculty members in 2018 and 2019



Dr. Joan Almost



Intraprofessional practice in Nursing: Informing national policy

Identifying the issue

Policymakers and healthcare leaders are continually challenged with how to optimize an evolving workforce of healthcare professionals to provide value-based healthcare. This includes aligning the composition, distribution, competencies, and accountabilities of healthcare professionals,

including the four regulated nursing designations (registered nurses, nurse practitioners, registered psychiatric nurses and licensed practical nurses (registered practical nurses in Ontario)). However, after a decade of significant changes within the nursing profession, there is much confusion about the differences and similarities across these designations. In order to move forward with meaningful change, an overview of the current state of nursing in Canada is necessary to provide clarity about the optimal use of all regulated nurses, a questioning of traditional hierarchies, and an understanding of how to create the best conditions to deliver accessible, high-quality care for all Canadians.

Research in a snapshot

In my role as Scholar in Residence with the Canadian Nurses Association, I am writing a report to inform national policy based on a fulsome understanding of regulated nurses and nursing structures in Canada. Specifically, the report will provide an overview of regulated nurses in Canada, the structure and organization of nursing

(regulators, professional associations, educational associations, and unions), educational preparation, scope of practice, differentiation from unregulated health workers, and recommendations to move forward. Preliminary results were presented at the Canadian Nurses Association Annual General Meeting in Vancouver in 2019, and the final report will be released in 2020.

Implications

The information in this report will create a deeper understanding of nursing structures and regulated nurses in Canada, enhance intraprofessional practice within the nursing profession, and guide national policy as we strive to optimize the role of all regulated nurses.



2019 Canadian Nurses Association Annual General Meeting, Vancouver, British Columbia

Dr. Pilar Camargo Plazas



Identifying the issue

My research work to date has focused on vulnerable populations and has also involved the study of healthcare practices with these populations. The devastating effects of social and health inequities and how severely they affect the health of vulnerable populations has been a recurrent theme. The unfair lack of access to timely treatment for people with chronic illness and the health inequities of minority groups reflect gaps in care. As such, my research questions

coalesced into investigating and addressing practice gaps that prevent vulnerable populations from achieving optimal health. Approaching health as a myriad of diverse elements is integral to the development of a responsive research program in health equity for vulnerable populations. By focusing on health equity, my research program is oriented not only toward the identification of research needs, but also toward the development of strategies for sustainable change and action. The evidence overwhelmingly shows that health inequities are real and that they are affected by social, economic, political and environmental conditions.

Research in a snapshot

Investigating the gaps that affect the health status of the vulnerable population with a high burden of disease in Canada and Colombia has been one of the primary focuses of my research program. People with chronic illness, immigrants and refugees, seniors, indigenous people,

women, and low-income individuals have been shown to be especially vulnerable to differential experiences in the health system. These populations may experience increased burden of poor health, difficulties accessing health services, or potentially reduced quality of health services. While some of these experiences may arise from unfavorable social determinants of health (e.g. education level, race, gender, income, geographic location), other factors can also come into play.

Implications

My research program addresses not only the underlying sources of vulnerability, but it also addresses the development of targeted strategies to reduce health and social inequities in vulnerable populations. Notably, populations vulnerable to healthcare quality problems, such as the lack of access to appropriate healthcare, need to be involved in the design of more efficient systems for healthcare delivery.

Dr. Lenora Duhn



A 5-Facet Framework to describe patient engagement in patient safety

Identifying the Issue

Health care remains error prone. As we consider all strategies and interventions to reduce errors, one approach has been to actively include the patient and their family as partners in harm prevention, yet much remains to be known about the patients' preferences and opinions in engaging in their own safety.

Research in a Snapshot

We interviewed patients and used qualitative descriptive methods to gain insight into their' perspectives about their knowledge, comfort level, and behaviours in promoting their safety while receiving care in the hospital. Some described a health-care error(s) that they or someone in their families had experienced. Notably, all participants described a safety-related activity they engaged in while in hospital, whether they realized it as such or not (e.g. noticing care routines and questioning when there was a change). The findings indicate that although participants' beliefs about their involvement in safety measures and the actions taken to promote their safety varied across interviewees, a number of factors influencing patient's engagement in safety were common between them. Their narratives were used to identify five main overarching themes of the factors that might impact the degree and type of health-care safety engagement by the patient: Personal Capacity, Experiential

Knowledge, Personal Character, Relationships, and Meaning of Safety.

Implications

Based on the findings of this study, we developed a 5-Facet Framework to describe patient engagement in healthcare safety. The framework shows that there are dynamic, multifaceted reasons and beliefs why some patients can be more willing to engage in safety in healthcare settings. The future work for researchers, policymakers, providers, patients, and patient advocates must be to focus on assessing the level of involvement that is right for each patient some will want a more passive role, others will want to be actively engaged. The key is talking with patients about safety throughout their care experiences. The ongoing research on this topic includes clinical application of the framework, collection of care provider's informal and formal perspectives related to patient engagement in safety, and establishment of system supports for patient engagement.

Dr. Rylan Egan



Educational intervention to enhance and maintain practitioners' CPR Skills

Providing CPR training at the institutional level can be both expensive and ineffective. Courses often run on an annual or bi-annual basis, and there is limited opportunity for ongoing practice. This project has three key goals; 1) establish CPR mannequins and software to collect depth, recoil, and frequency of CPR trials to create an effectiveness profile, 2) based on performance, implement supplementary training and further spaced

CPR trials, 3) conduct qualitative research to understand the experience of nurses using this program, and 4) evaluate functional improvement in CPR using Quality Improvement methods.

Evaluation of internal medicine residents' knowledge skills and attitudes related to quality improvement and patient safety

Quality Improvement and Patient Safety (QI/PS) are identified resident competencies across 5 of the 7 CanMeds *Roles* in the Royal College of Physicians and Surgeons of Canada Competency by Design framework. However, there has been little research as to the effectiveness of QI/PS residency training programs. The goals of this research are to qualitatively evaluate the current QI/PS program in the Internal Medicine specialty program, and to enhance the QI/PS program within Internal Medicine based on study results.

A national research network on Lyme disease

Funded in the Summer of 2019, the Canadian Lyme disease Research Network works to improve the diagnosis and treatment of Lyme disease. As co-lead of the education and knowledge translation pillar of the program, Dr. Egan, PhD student Madison Robertson and team have conducted reviews on evaluations of training/ education for both healthcare practitioners and the general public. They are also preparing national interviews with healthcare practitioners regarding approaches to diagnosis and treatment.

A related project, lead by Masters student Emilie Norris-Roozmon, involves a survey-based cluster analysis of the publics' reported symptoms to identify geographic clusters of unique tick-borne pathogens/expressions.

CBME Implementation

Several studies have been recently published investigating best approaches to assessment and evaluation within competency-based medical education.

Studies have been carried in collaboration with Medical Oncology, Radiation
Oncology, Ophthalmology (x2), General Internal Medicine, Internal Medicine, Emergency Medicine (resuscitation), and at the program administration level.

Dr. Jacqueline Galica



Research Program

Cancer survivors want professional help to cope with their post-treatment psychosocial concerns; however, many survivors never get the help they need, signaling an important topic for research. The overall aim of Jacqueline's research program is to support survivors and their caregivers through their transitions around the end of cancer treatment and beyond.

Stream 1: Supporting cancer survivor preparedness to transition out of primary cancer treatment

Cancer survivors express a need for improved support to transition out of primary cancer treatment; however, a more fulsome awareness about the psychosocial concerns of cancer survivors as well as methods useful to meet their unmet needs are warranted. To fill these gaps, Jacqueline has assembled a patient-clinician-researcher partnership to embark in a series of research projects guided by the Knowledge to Action Framework and principles of patientoriented research. The overall goal of these projects is to develop a greater understanding about the needs of posttreatment cancer survivors discharged from the Cancer Centre of South Eastern Ontario, and to use this information to develop a framework to facilitate their preparedness out of primary cancer treatment and into the surveillance period.

Stream 2: Advancing understanding about fear of cancer recurrence measurement and intervention

One of the most common concerns among cancer survivors is their fear of cancer recurrence (FCR). As a member of local and international communities of clinicians and researchers, Jacqueline has led or contributed to research toward advancing the overall understanding of FCR assessment and interventions. Notable projects have contributed to the debate about the dimensionality of a well-established FCR measure, and a systematic review and meta-analysis of FCR interventions.

Implications

The first year after treatment is the most challenging for cancer survivors' changing psychosocial concerns, some of which are associated with poorer quality of life and greater use of health care resources. Given the negative impacts of these concerns for cancer survivors and the greater health care system, meeting the needs of cancer survivors is an important area for research.

Dr. Christina Godfrey



Knowledge acquisition, assimilation and use at the organizational level in healthcare settings

Identifying the issue

In today's fast-evolving global environment, healthcare organizations are challenged with adapting their traditional ways of doing to incorporate new knowledge and processes, in order to remain competitive and current. Adjusting to new approaches and operating methods requires changes both at the individual and system-wide levels. At an

individual level, a large body of literature has examined aspects such as awareness of and access to knowledge, knowledge gain, adoption of new knowledge, and the implementation of new knowledge. At the organizational and system level, however, indicators that reflect the adoption of new knowledge and the implementation of new practices are less well-articulated.

Research in a snapshot

In a scoping review, Dr. Godfrey aims to investigate the concept of absorptive capacity and explore its application in healthcare.

Absorptive capacity has been defined as "an organization's ability to recognize the value of new knowledge and information, assimilate it, and then apply it to make decisions. The concept of absorptive capacity has been associated in the health services literature with an organization's ability to assimilate innovations such as best practices and it has been linked to organizational performance" (Innis J, 2016). The research question guiding the review is: How is absorptive capacity conceptualized and measured in adoption and/or uptake of innovations in health? This review will consider grey and peer reviewed literature, include quantitative and qualitative evidence, and report on measured outcomes relevant to indicators of change, innovation, diffusion, adoption or implementation at an organizational level, health service of health-related intervention.

Implications

Absorptive capacity has traditionally been explored within business or industry; exploring absorptive capacity in healthcare organizations represents an opportunity for the management literature to inform knowledge translation in healthcare. By assessing the factors of the organizational profile that are more adaptable to change initiatives, and those that constitute barriers, Dr. Godfrey and team will better support organizations as they incorporate new knowledge into their processes.

Dr. Katie Goldie



Research program

In 2018-19, Dr. Goldie's program of research focused on two lines of inquiry that were furthered by utilizing health administrative data from the Institute of Clinical Evaluative Sciences (ICES). Dr. Goldie is developing her expertise utilizing ICES data through a fellowship program and collaboration with established scientists.

Stream 1: Cardiovascular risk reduction

Sex-based differences of depression before acute myocardial infarction: A retrospective cohort study of Ontario patients from 2011-2016

Biological sex plays a key role in how and when cardiovascular disease develops. Younger women (≤50 years) with established cardiovascular disease exhibit more evidence of ischemia with mental stress than men of a similar age. Research investigating the relationship between depression and cardiovascular disease is needed to better inform approaches to prevention and treatment.

Funding source: Queen's Health Sciences Internal Grant Competition- Garfield Kelly Fund.

Stream 2: Outcomes associated with access to early palliative care

Early palliative care for non-small cell lung cancer: A population-based study of quality end of life outcomes and real-world costs

Non-small cell lung cancer is the leading cause of cancer-related death in Canada. Traditionally, palliative care consultation was delivered late in the course of the disease, when it became evident that disease modifying treatments were unsuccessful. Recent studies have suggested that palliative care services should be provided earlier in the disease trajectory, close to the diagnosis of life-threating cancer. The efficacy of early palliative care interventions to improve end-of-life quality outcomes are poorly understood, especially in real-world population-based samples. Furthermore, the potential cost savings compared to no early palliative care have not been described in a Canadian context.

Funding source: Canadian Institutes of Health Research Operating Grant: Secondary Data Analysis for Cancer Prevention and Control.

Dr. Marian Luctkar-Flude



Dr. Luctkar-Flude's research program falls under two themes: Educational innovations to enhance learning in nursing education and Clinical innovations to enhance the lives of cancer survivors following cancer treatment. Additionally, she is currently serving as the VP Research for the International Nursing Association for Clinical Simulation and Learning (INACSL), and was the recent recipient of the Canadian Association of Schools of Nursing (CASN) Pat Griffin Nursing Education Research Scholar Award.

Educational innovations to enhance learning in nursing education

Education is needed for nurses and nursing students related to the unique health care needs of gender diverse individuals, and the application of cultural safety and cultural humility during healthcare interactions with this population. Dr. Luctkar-Flude's nursing education research project is focused on the development and evaluation of authentic educational tools to support sexual orientation and gender identity (SOGI) education for nurses and nursing students. The SOGI Nursing Toolkit features a website with curated resources and a series of virtual simulation games involving nursing encounters with LGBTQI2S individuals, in which learners apply principles of cultural humility to make clinical decisions. Learning outcomes assessment rubrics and feedback are integrated into the virtual simulation games to support self-regulated learning.

Clinical innovations to enhance the life of cancer survivors following cancer treatment

Postcancer cognitive impairment (PCCI) and fatigue are adverse effects that often persist following cancer treatment and impact quality of life. Effective therapies are needed for the management of these persistent and debilitating symptoms in cancer survivors. Dr. Luctkar-Flude recently completed a pilot study evaluating the feasibility and effect of a 10-week neurofeedback protocol on PCCI and fatigue in a sample of 16 breast cancer survivors. Neurofeedback is a non-invasive, drug-free form of brain training administered in a clinic. Measurements were taken at the time of enrollment. immediately prior to the start of the neurofeedback protocol and at the end of the 10-week intervention. The protocol proved to be feasible and resulted in significant decreases in perceived cognitive deficits, fatigue, sleep and psychological symptoms. Neurofeedback may be an effective, non-invasive, complementary, and alternative therapy for PCCI in breast cancer survivors. Further research is needed to determine the optimal timing, frequency and number of neurofeedback sessions to alleviate persistent debilitating symptoms.

Dr. Jennifer Medves



Designing real-life solutions to healthcare issues through a hospitalacademia collaboration

Identifying the issue

Recruitment and retention of healthcare professionals, including nurses, remains a struggle worldwide. This difficulty is also experienced at a national and provincial level, where nurses may be more inclined to work in larger urban centres, teaching hospitals or

specialized units. The ensuing staff turnover has been linked to decreased quality of care, low staff morale, poor worker's engagement, work overload, increased organizational costs and loss of knowledge.

Research in a snapshot

To address the difficulties in maintaining an appropriate workforce at the local level, Dr. Jennifer Medves and Dr. Kim Woodhouse partnered with Mrs. Carol Smith Romeril at Quinte Health Care (QHC) to better understand what draws healthcare professionals to work at the QHC hospitals, why staff may later choose to move on either within or outside of the organization and invite participants to share recruitment and retention strategies that appeal to them. Dr. Medves and team will rely on interviews and focus groups with healthcare professionals, in addition to recruitment and departure data collected within the organization, to design and implement solutions that will reduce staff turnover, improve care delivery and minimize the costs of frequently replacing staff.

Implications

Through pro-active actions and engagement of staff, Quinte Health Care will foster workforce stability and improve employee satisfaction with their workplace.

Improving care of patients living with **Chronic Obstructive Pulmonary Disease** (COPD)

The initial step of this project utilizes health services utilization data held at ICES to understand the patterns and characteristics of primary and specialist care of adult patients who visit the emergency room or hospital for COPD care. The results from this study may support the idea that patients cared for by a comprehensive network of healthcare professionals (nurses, family medicine physicians, specialists) fare better than those receiving intermittent care from various health care professionals at time of exacerbation of symptoms. This information will help enhance system level integration of care for patients with COPD, to better meet the needs of this population.

Dr. Thomas Rotter



Evaluation and implementation of Clinical Pathways

Identifying the issue

One of my research streams focuses on the development and implementation of Clinical pathways in hospitals and in primary care settings. Clinical pathways are structured, multidisciplinary care plans used by health services to detail essential steps in the care of patients with a specific clinical problem. They aim to translate evidence into practice by detailing the local structures, systems, and timeframes to implement general

clinical guidelines recommendations. Clinical pathways are a promising tool to optimise clinical outcomes and maximise clinical efficiency.

Research in a snapshot

To date, I have worked on several pathway implementation projects in Ontario, Saskatchewan, Germany, Alberta, the Netherlands, and Australia, including a Clinical pathway for chronic obstructive pulmonary disease (COPD) and Clinical pathways for cancer patients. This past year, I have been working on updating a highly cited Cochrane review published in 2010: "Clinical pathways: effects on professional practice, patient outcomes, length of stay and hospital costs". Since the original review was published, there has been a gradual rise in the uptake of Clinical pathways in hospitals. In this update, we identified 27 new studies that focused on the change in outcome measures following the implementation of a Clinical pathway (or a clinical pathway combined with other interventions) compared to usual care. The

review, which has now 54 studies, includes a broad range of clinical conditions and procedures across numerous ward settings and countries.

Implications

Generally, all of my research has a common aim – to cut down the time it takes for a new treatment recommendation (e.g., clinical practice guidelines) in health care to arrive at the patient's bedside and to reduce variability in patient treatment. The findings of this Cochrane review update will provide more information on the potential impact of Clinical pathways on professional practice, patient outcomes, length of stay and hospital costs. Further, they will improve our understanding of implementation strategies that may contribute to the effectiveness of Clinical Pathways in various practice settings.

Dr. Mona Sawhney



From Morphine to Marshmallows: **Examining the impact of summer camps** for children with Sickle Cell Disease on the children and their families

Identifying the issue

Sickle cell disease (SCD) is one of the most common severe monogenic blood disorders; it affects 1 in every 500 infants of African American ancestry born in the United States. Having a complex chronic illness has a significant psychological impact on children with SCD. Chronically ill children may suffer

social deprivation as a result of prolonged hospitalizations. Children with SCD have decreased school attendance, decreased participation in school and social activities, and poor adaptation compared to non-SCD peers. Many children with SCD have low self-esteem and are worried about looking different than their peers.

Camp Jumoke is a fundraising organization in Ontario, Canada, with a mission to enroll children with SCD to Camp Wenonah, which has the only residential summer camp for children with SCD in Canada. Therapeutic recreation camps offer children the opportunity to remove the strains of the home and hospital life, and provide children with a safe and inclusive environment where they can interact with peers who are experiencing similar challenges. Currently, there is very little research regarding the impact of SCD camps on children with SCD and their families.

Research in a snapshot

The purpose of this study was to determine the impact that attending summer camp has on the self-reported quality of life, self confidence, social acceptance and independence of children with SCD. Children with SCD who attended camp in the summer of 2019 completed a modified version of the Pediatric Camp Outcome Measure, a validated questionnaire that has been used in studies of other chronic disease camps.

Implications

The results of this study have the potential to advance the qualitative literature describing the therapeutic value of SCD recreation camps, as well as facilitate the provision of quality camp experience to maximize their potential benefits. Growing the body of evidence supporting the role of SCD camps may allow for camps to gain more funding, expand, and provide more children with a residential summer camp experience that WENONAH can improve their wellbeing.

Dr. Kim Sears



Advancing quality care, reducing risk and improving patient safety

Identifying the issue

While services and quality of health care delivery differ substantially between countries, health care systems worldwide face some common challenges, including the need for higher quality and safer care. Lessons can be learned from the different healthcare system's

approaches - both at a regional and global level - to address some of these common challenges and improve quality and efficiency of care. Dr. Sears conducts a program of research in health services with a focus on advancing quality care, reducing risk and improving patient safety. She works with international partners and utilizes systematic review methodology and large databases to understand patterns of healthcare delivery and areas for improvement.

Research in a snapshot

Over the last year, Dr. Sears fostered collaborations with leaders in quality and safety to survey best practices and assess gaps. Her recent research aims at collecting, assessing and interpreting errors and near misses in community pharmacies, to identify and reduce contributing factors for errors, and improve the safe delivery of medications. Furthermore, she is working with the World Health Organization to develop a platform to house and share best practices globally for the advancement of a safer higher quality health system.

Kim is also an active member of the Queen's Collaboration for Health Care Quality: A JBI Centre of Excellence (QcHcQ), providing comprehensive systematic review training to students, faculty members, librarians and clinicians. She further contributes to the science of evidence synthesis through the development of the methodology, specifically that of systematic reviews of association. Association studies, also referred to as correlational studies, aim to summarize identified associations between an exposure and an outcome.

Implications

The findings generated from the evidence synthesis and research activity carried by Dr. Sears has provided valuable information to advance safety in Canada and worldwide. Her collaborations with community pharmacy research experts from different countries have the potential to greatly reduce the burden of drug-related patient harm through the application of quality improvement strategies.

Dr. Mary Smith



Incorporating Indigenous Reconciliation calls for action into the Nursing Education curriculum

In 2015, the Truth and Reconciliation
Commission (TRC) released a report that
included 94 'calls to action' to further
reconciliation between Canadians and
Indigenous peoples. In 2019, and launched
in response to one of the TRC calls for
action, a final report from the National
Inquiry into Murdered and Missing
Indigenous Women and Girls (MMIWG) was
released. This report delivers 231 Calls for

Justice directed at governments, institutions, social service providers, industries and all Canadians.

The goal of Dr. Smith's research is to map the recommendations from the TRC and from the MMIWG reports into the Ontario Primary Health Care Nurse Practitioner Curriculum. The investigation will first identify how each course in the Ontario Primary Health Care Nurse Practitioner Program addresses the specific TRC Calls for action, MMIWG report recommendations and the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), and will then make recommendations regarding how to integrate recommendations into curriculum.

This research will enhance cultural safety in education. The initial curricular mapping activities will foster ongoing developments towards students learning effective strategies as future health care providers in addressing Indigenous health.

Kidney Health in the First Nation community

Indigenous people in Canada have Chronic Kidney Disease (CKD) and End Stage Renal Disease (ESRD) up to four times more often than the non-Indigenous Canadian population, yet they receive fewer kidney transplants. Indigenous communities face numerous challenges in managing and treating kidney disease.

Dr. Smith's research builds upon strength-based approaches of the Indigenous knowledge systems that seeks solutions towards an improved care for Indigenous people living with CKD and ESRD. The goal is to build partnerships with Indigenous peoples, stakeholders and community representatives to identify culturally-safe approaches to foster kidney health and prevention of kidney disease, promote kidney donation and transplantation and increase accessibility to dialysis services.

This research is funded by a Kidney Foundation of Canada's Allied Health Grant (Circles towards Indigenous solutions for kidney health: A strength-based approach).

Dr. Erna Snelgrove-Clarke



Identification of successful strategies for translating research evidence into maternal and women's health care

Knowledge translation - the synthesis, dissemination, exchange and ethically sound application of knowledge to improve health - has had varying impacts on maternal and newborn care. Despite efforts to use best

evidence in practice, adherence to evidenceinformed practice fluctuates.

Erna's translation research involves changing provider behaviour and improving patient outcomes. She explores the transfer of knowledge through multiple methods and focuses on a person centred approach to improving health outcomes for women, their infants and their families.

Erna's interdisciplinary research concentrates on the relationships of health care professionals, organizations, and decision-makers. She is interested in these various networks and their effects on health care professional's uptake and use of research evidence in their daily practice.

In her research, Erna complements the PARIHS (Promoting Action on Research Implementation in Health Services) framework with the Theoretical Domains Framework to understand processes associated with provider behaviour and align the most appropriate theory driven

interventions. Examples of these research include fetal health surveillance. breastfeeding support, second stage management, and caring for women that live with obesity during pregnancy, birthing and postpartum.

Dr. Joan Tranmer



Chronic cardiovascular disease prevention and management: Through an organizational lens

Prevention and management of chronic diseases is a healthcare priority. As a health services researcher, I examine these issues from an organizational or system lens. I have 2 broad areas of focus: 1) the effect of the work environment on women's health, and 2) optimizing care and transitions for older

persons living with complex health conditions. In collaboration with my coinvestigators and students, we are involved in a number of projects related to these two areas.

Determining the health risks associated with shift work

In collaboration with Dr. K. Aronson and others, we have conducted several studies that explored the effects of circadian disruption on biomarkers associated with increased risk for cardiovascular disease or cancer. Building upon this research, we are now exploring if circadian gene methylation, a marker for circadian disruption, is associated with new or worsening cardiometabolic risk biomarkers. This research will inform strategies to mitigate the risks associated with shift work.

Funding: Queen's Health Sciences Garfield Kelly Cardiovascular Research & Development Fund and Canadian Cancer Society

Optimizing primary healthcare management of chronic diseases

Our team continues to explore, at a health system level, strategies within primary healthcare to support chronic disease management. In collaboration with practice partners, we are currently using health administrative data housed within ICES to determine the patterns of care for persons living with chronic obstructive pulmonary disease (COPD). As well, we are engaged in several projects exploring how to best optimize the nursing role in primary care. Within the context of provincial healthcare reform, we anticipate that these findings will contribute to the development and evaluation of primary care-based strategies that are relevant to the needs of persons within our health regions.

Funding: Ministry of Health and Long-Term Care Applied Health Research Questions (AHRQ), CIHR, Canadian Lung Association

Dr. Deborah Tregunno



Improving patient safety

Patient safety is the central focus of my research and teaching activities. Over the past 18 months, I have co-chaired the Canadian Patient Safety Institute Steering Committee which was charged with the important work of revising and updating the Safety Competencies Framework, originally published in 2008. In addition to co-leading

the process, I conducted a modified delphi consultation process to obtain and integrate expert stakeholder feedback on the revised competencies. The revised framework is scheduled for release in Spring 2020.

Patient safety competencies also underpin the educational research I am engaged with in my collaborations with Dr. Marian Luctkar-Flude and other colleagues in the Canadian Simulation Network. For instance, patient safety competencies are one of the basic building blocks for the development of the clinical simulation scenarios associated with our research. In 2019, Dr. Luctkar-Flude and I were awarded the Queen's University Principal's Educational Technology Award in recognition of our innovative use of technology to enhance teaching and learning at Queen's.

Improving patient safety outcomes is also a key motivation for my collaborative research with Dr. Pilar Carmargo Plazas, and our work with Sharbot Lake Community Health Centre focused on improving self-care management for seniors with diabetes. Through funding from the Canadian Institutes of Health Research, and in collaboration with Sharbot Lake Community Health Centre, we will gain insight into ways to help seniors improve health outcomes in their local context.

I continue to collaborate with a group of colleagues in the Faculty of Health Sciences whose work focuses on compassionate care (originally funded by the Associated Medical Services Phoenix Project). We are currently examining and addressing burnout among health sciences faculty and students, and are exploring ways to explore this issue through medial humanities and narrative methods.

Dr. Rosemary Wilson



Actively waiting for interdisciplinary chronic pain care

Identifying the issue

Patients wait between six months and two and a half years to access many of the pain management programs in Canada. Lengthy wait times for treatment lead to deterioration in patients' health, functioning, and quality of life. In addition, once the patient starts on a treatment

pathway, there is poor uptake of behavioural self-management programs for chronic pain. Although evidence has shown that self-management support can help patients manage their symptoms more effectively, engagement of patients depends on their readiness for behavioural change.

We require pre-interventions that successfully move patients along the continuum of change and enhance their self-efficacy and acceptance of chronic pain, thereby increasing the likelihood of fully engaging in behavioural self-management.

The time patients spend waiting to access the pain management programs could be leveraged as a window-of-opportunity to examine the feasibility and usefulness of an intervention aimed at enhancing readiness for change and behavioural selfmanagement.

Research in a snapshot

The aim of the study is to develop and test the feasibility of an online Active Waiting

program designed to enhance the readiness for change and self-management of patients with chronic pain who are currently on the wait list for care at an interdisciplinary chronic pain clinic. This program will follow a motivational interviewing approach and will be comprised of self-directed modules and exercises partnered with coaching support.

Potential Impact

The intervention integrates novel features which will synergistically enhance both the care and access for chronic pain patients, including: 1) introducing "active waiting" in preparation for chronic pain specialist care; 2) integrating motivational interviewing approaches with teach-to-goal selfmanagement resources; and 3) leveraging technology to overcome barriers to access to care and ensure scalability of the intervention. These interventions may reduce health care use and facilitate a stepped-care approach, which has the potential to see a large proportion of patients receiving the right treatment (including right intensity), at the right time, and by the right provider.

Dr. Kevin Woo



The relationship between pain, infection, and stress on wound healing

Identifying the issue

According to our analysis of administrative data in Ontario, approximately 13% of patients have evidence of pressure injuries, one of the most common chronic wound types. People describe the experience of

having a chronic wound as devastating, with pain being one of the most common symptoms that significantly impacts on daily functioning and quality of life. Our research had validated the relationships between wound related pain, anxiety, and stress. Unremitting pain and increased psychological stress levels play an important role in triggering and perpetuating a cascade of prolonged and excessive inflammatory responses. Increasing attention is now placed on biofilm and its relationship to wound healing. The complex interplay between bacteria, pain, inflammation, and healing, in chronic and acute wounds remains unclear.

Research in a snapshot

We have completed a pilot study following 32 patients for four weeks to evaluate their stress, pain, and wound healing trajectories. Wounds fluid was obtained for the analysis of inflammatory mediators such as elastin and matrix metalloproteinases. We found a trend suggesting a relationship between pain and some of the inflammatory biomarkers. Next, we plan to implement a

larger scale study involving patients from Canada and Brazil. I have received funding from Emerging Leaders in the Americas Program Faculty Mobility Program (Global Affairs Canada) to develop this program of research in collaboration with researchers at the University of Sao Paulo. Under my supervision, a doctoral student from Brazil spent 6 months in 2019 at Queen's University sponsored by the Emerging Leaders in the Americas Program.

Implications

Pain is a complex biopsychosocial phenomenon affecting quality of life in people with chronic wounds. Wound healing draws on art and science to treat wound etiologies, address patient-oriented outcomes, and select local treatment. Results of this study will shed light on the risk of infection due to stress and pain. We hope that this research project will help guide the development of best practice for the management of pain and stress to promote better healing.

STUDENT RESEARCH

Undergraduates

SWEP program

The Queen's Nursing and Health Research group welcomed undergraduate Nursing students through the Queen's University Summer Work Experience Program (SWEP) since 2017. In the past 3 years, this program has provided the opportunity to 8 students to participate in research under the supervision of faculty members. Students assisted in advancing faculty research objectives and projects, while at the same time learning about research-related activities such as data analysis, literature reviews, framework development and report writting. Across the past 2 years, SWEP students took the lead on writing and publishing a manuscript highlighting their experience in the program and the impact on potential future nursing careers (currently under review).



"As a SWEP student, I had the opportunity to collaborate on a number of exciting research projects and be mentored by faculty members in the process. I was able to learn and apply research skills through a meaningful work experience and developed a greater appreciation of nursing research."

Year 4 BNSc, 2018 SWEP Student

Masters of Nursing science (thesis-based) and Nursing PhDs completed in 2018 and 2019

2018

Nadia Abdullah, MNSc. Investigating the Predictors of Women's Future Intentions to Accept and Use Smartphone Applications for Type 2 Diabetic Self-Management in the Kingdom of Saudi Arabia. Supervisor: Joan Almost

Somayah Alabdallah, MNSc. *Instructing* Nursing Students on Early Identification and Screening for Postpartum Depression Using Simulation Training. Supervisor: Dana Edge

Benjamin Carroll, MNSc. Cultural Humility and Transgender Clients: A Study Examining the Relationship Between Critical Reflection and Attitudes of Nurse Practitioners. Supervisor: Rosemary Wilson

Idevania Geraldina Costa, PhD. The Journey Toward Engagement in Self-Care Management of Diabetic Foot Ulcer: A Constructivist Grounded Theory Study.

Supervisor: Deborah Tregunno

Kathryn Roka, MNSc. *Income, Patient* Enrolment Model, and Cervical Cancer Screening Uptake within the Central East Local Health Integration Network. Supervisor: Dana Edge

2019

Eid Aldossary, MNSc. The Impact of a Pain **Educational Intervention on Nursing** Students' Knowledge, Attitudes and Self-Efficacy Regarding Pain Management. Supervisor: Mona Sawhney

Randal Booth, PhD. An Advanced Practice Physiotherapy Spine Triage Service for Adults with Neck and Back Pain: A Feasibility Study. Co-Supervisors: Rosemary Wilson, Dana Edge

Arlene Burla De La Rocha, PhD. The Relationship Among Attachment, Empathy, and Caring in Baccalaureate Nursing Students. Supervisor: Kevin Woo

Kathryn Allwright, MNSc. *Testing a* Measurement Tool for Assessing the Implementation of Sexually and Gender Diverse Positive Spaces in Ontario Public Health Units. Supervisor: Katie Goldie

Rachel Ellingson, MNSc. Towards a Better Understanding of Chronic Pain Management among Emerging Adults. Supervisor: Katie Goldie

Sandra Filice, PhD. Developing and Use of a Formative Assessment and Feedback Process in Clinical Nursing Education. Supervisor: **Deborah Tregunno**

Katherine Gregory, MNSc. Examining Nurses' Perceptions of Hospital Orientations and *Their Transition to Practice.* Co-Supervisors: Marian Luctkar-Flude, Kim Sears

Kathryn Halverson, PhD. A Narrative Approach to Understanding the Experience of Becoming and Being a Nurse: Professional Identity Formation Among New Nurses. Supervisor: Deborah Tregunno

Jennifer Kasaboski, MNSc. A Prospective Non-Inferiority Randomized Controlled Trial to Evaluate the Effectiveness of a Five-Layer Polyurethane Foam Dressing for Wound Healing. Supervisor: Kevin Woo

Evan Keys, MNSc. The Integration of Virtual Simulation Gaming into Nursing Resuscitation Education: A Pilot Randomised Controlled Trial. Co-Supervisors: Marian **Luctkar-Flude, Kim Sears**

Suzanne Poldon, MNSc. Exploring How Sexual Assault Nurse Examiners Practice Trauma-Informed Care. Co-Supervisors: Lenora Duhn, Joan Tranmer.

Jessica Smith, MNSc. Does Gerontologic Nursing Education and Personal Attitude Toward Older Adults Influence New Nurses' Intention to Work in Aged Care Settings? Supervisor: Mona Sawhney

Lisa Willing, MNSc. Examining Predictors of Compassion Fatigue in Intensive Care Nurses. Supervisor: Joan Almost

Jennifer Wilson, MNSc. Healthcare Utilization Among Children with Asthma. Co-Supervisors: Pilar Camargo, Joan Tranmer



Dr. Katie Goldie with MNSc student Kathryn Allwright during convocation



(left to right) Dr. Marian Luctkar-Flude, Dr. Deborah Tregunno, Dr. Judy Duchcher (screen), Dr. Kathryn Halverson, Dr. Erna Snelgrove-Clarke and Dr. Heather Aldersly, in Dr. Halverson's thesis defense.

PUBLICATIONS AND FUNDING

Publications

School of Nursing faculty members / Student trainees

- 1. Almost J, VanDenKerkhof EG, Strahlendorf P, Caicco Tett L, Noonan J, Hayes T, Van hulle H, Adam R, Holden J, Kent-Hillis T, McDonald M, Paré G, Lachhar K, Silva e Silva V. (2018). A study of leading indicators for occupational health and safety management systems in healthcare: A study protocol. BMC Health Services Research, 18, 296.
- 2. Anissimova V, Brittain M, Loundes DA, Woo K. (2018). Scoping review of clinical outcomes related to advanced training in wound care. Surgical Technology International, 33(01):67-73.
- 3. Beeckman D, Van den Bussche K, Alves P, Arnold Long MC, Beele H, Ciprandi G, Coyer 5. Camargo Plazas P. (2018). Understanding F, de Groot T, De Meyer D, Deschepper E, Dunk AM, Fourie A, Garcia-Molina P, Gray M, Iblasi A, Jelnes R, Johansen E, Kradag A, Leblanc K, Kis Dadara Z, Meaume S, Polorna A, Romanelli M, Ruppert S, Schoonhoven L, Smet S, Smith C, Steininger A, Stockmayr M, Van Damme N, Voegeli D, Van Hecke A, Verhaeghe S, Woo K, Kottner J. (2018).

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- 4. Camargo Plazas P. (2018). Aprendiendo del Trabajo de Paulo Freire: Una reflexión sobre mi proceso de concientización [Learning about Paulo Freire's Work: My Journey toward Conscientization]. Paper published as a part of a book chapter in an upcoming book around the influence of Freire's work in Nursing Education.
- the space of nursing practice in Colombia: A critical reflection on the effects of health system reform. Nursing Inquiry, 25(3): 1-8.
- 6. Camargo Plazas P, Cameron BL, Milford K, Hunt LR, Bourque-Bearskin L, Santos Salas A. (2018). Engaging Indigenous youth through popular theatre: Knowledge mobilization of Indigenous peoples'

- perspectives on access to healthcare services. Action Research, 17(4):492-509.
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- 10. Chumbley L, Tyerman J, Luctkar-Flude M. (2018) Virtual simulation games template user manual. Canadian Alliance of Nurse Educations using Simulation, Kingston.
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- 14. Costa I, Camargo Plazas P, Tregunno D, VanDenKerkhof E, Edge D. (2018). The journey toward engagement in self-care management of diabetic foot ulcer: A constructivist grounded theory study. Notes on Nursing Scholarship, 1(3); 6-7
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- 4- Brennan E, Egan R, Walker M. Bridge
 Funding for Educational Intervention to
 Enhance and Maintain Practitioners' CPR
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- 14- Lukewich J, Allard M, Ashley L, Aubrey-Bassler K, Bryant-Lukosius D, Klassen T, Magee T, Martin-Misener R, Mathews M, Norful A, Poitras M, Roussel J, Schofield R, Tranmer J, Wong S. Dissemination of a national set of family practice nursing competencies to support the integration of family practice nurses within primary care. CIHR, Planning and Dissemination grant
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- 28- Tyerman J, Luctkar-Flude M. Exploring the effect of technology-assisted meditation on nursing student stress and anxiety: A pilot feasibility study. Trent University VP Research and Innovation Strategic Initiative Fund
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- **31-** van Wylick R, Dalgarno N, Soleas E, Harle I, Zevin B, De Sousa M, Bright A, Braund H, Luctkar-Flude M, Szulewski A. Mastering Debriefing: Simulating the Experience of Competency-based Medical Education Academic Advising, Preceptorship, and Competence Committee Decision Making. Royal College of Physicians and Surgeons of Canada Assessment Activity **Development Grant**
- **32-** Woo K Coordination for the Improvement of Higher Education Personnel. Print-CAPES
- 33- Woo K, Etemad A. Computer aided diagnostic system for the evaluation of dry skin: a pilot study. Queen's University School of Nursing Research Development Fund
- 34- Woo K, Santos VL. Emerging Leaders in the Americas Program. Global Affairs Canada Faculty Mobility Program

SCHOOL OF NURSING CONTACT INFORMATION AND CREDITS



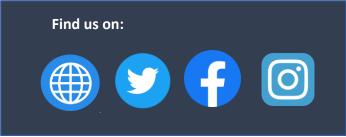






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