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Land Acknowledgement:

Queen's University is situated on the territory of the Haudenosaunee and Anishinaabek. Ne Queen's University e'tho nonwe nikanónhsote tsi nonwe ne Haudenosaunee tánon Anishinaabek tehatihsnónhsahere ne óhontsa.

Gimaakwe Gchi-gkinoomaagegamig atemagad Naadowe miinwaa Anishinaabe aking.

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MESSAGE FROM THE DIRECTOR (SCHOOL OF NURSING) AND FROM THE SCIENTIFIC DIRECTOR (QNHQR) & SALLY SMITH CHAIR IN NURSING

I am thrilled to share our 2020 research report. Despite a year of challenges, the faculty in the School of Nursing have successfully demonstrated tremendous commitment to scholarship and research. In 2020 faculty and students collectively achieved 5.4 million dollars in peer-reviewed funding as principal investigators and team members. In the pages that follow, we present a snapshot of this year's research activities, from pilot projects and studies to community outreach endeavours and student successes. While each snapshot details the wonderful scope of research activities taking place at our School, they also highlight the value and impact nursing research has on health care and our communities.

Research activities in the School of Nursing continue to grow with new faculty and new collaborative endeavours. I look forward to continuing to welcome new faces and new research projects to our halls, particularly as we work collectively to realize the goals of the School's new strategic plan, which will guide us into 2022. As we continue to work together, I strongly believe the contributions of Queen's nursing research will enable scholarship, bridge gaps, and most importantly—improve health outcomes for our communities.

Dr. Erna Snelgrove-Clarke, RN, PhD

Director, School of Nursing and Vice Dean (Health Sciences)

Once again, I am pleased to celebrate the continued research and scholarship achievements of all faculty involved with the Queen's Nursing and Health Quality Research Group (QNHQR). While the COVID-19 pandemic has presented challenges, QNHQR achieved tremendous success in 2020: we obtained 5.4 million dollars in peer-reviewed funding as principal investigators and team members, and published over 100 journal articles, books, and book chapters. We provided—and continue to provide—a comprehensive research environment that supports our undergraduate and graduate students' learning and growth.

As you will read in this report and on <u>our website</u>, QN-HQR research is innovative and our faculty are committed to addressing important health priorities for both individuals and communities. We continue to build upon our current health services research methodological platforms (implementation science and population health) and have further strengthened our collaborations with the Health Services and Policy Research Institute. We welcome the new faculty researchers who joined us this year and as their research programs evolve, we envision the development of other platforms to support further individual and community partnership and engagement.

With the addition of new faculty and the growth of our research programs, we have taken time in 2020 to reflect upon the strategic direction and goals of the QNHQR group. This will ensure we continue to support a vibrant research environment within the School of Nursing, that complements activities internal and external to the Faculty of Health Sciences.

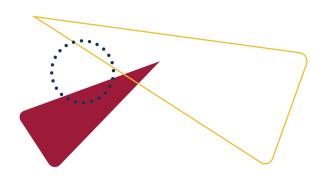
I would like to personally congratulate everyone on their commitment and persistence to scholarship. We are well positioned to lead within our respective areas of expertise and to be valued partners within the Faculty of Health Science and at Queen's University. I look forward to the future as our programs evolve and we continue to welcome new researchers in 2021.

Dr. Joan Tranmer, RN, PhD

Scientific Director, Queen's Nursing and Health Quality Research Sally Smith Chair in Nursing



Dr. Joan Tranmer and Dr. Erna Snelgrove-Clarke



BY THE NUMBERS: QUEEN'S NURSING AND HEALTH QUALITY RESEARCH HIGHLIGHTS



FACULTY AND RESEARCHERS



Joan Almost PhD, RN

Nursing workforce policy, work environments and workplace relationships Joan.Almost@queensu.ca



Pilar Camargo Plazas PhD, RN

Understanding health equity in vulnerable groups using emancipatory and interpretive approaches

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Lenora Duhn PhD, RN

Advancing health and safer health care as informed by bioethical principles and centred on client/ patient/family engagement duhnl@queensu.ca



Rylan Egan PhD

Innovative approaches to quality improvement research eganr@queensu.ca



Jacqueline Galica PhD, RN

Supporting the psychosocial concerns of those affected by cancer

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Christina Godfrey PhD, RN

Integrating various levels and types of evidence to provide the best available evidence for practice

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Katie Goldie PhD, RN

Measuring health service outcomes using population-level administrative data

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Marian Luctkar-Flude PhD, RN, CCSNE

Advancing nursing knowledge through the development and evaluation of educational interventions including virtual simulation games

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Conducting collaborative research to understand and improve global experiences of birthing care

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Development and implementation of clinical pathways in primary care and hospitals

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Monakshi Sawhney PhD, NP

Evidence-based management of pain and adverse symptoms and advanced practice nursing roles

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Kim Sears PhD, RN

Advancing quality care, reducing risk and improving patient safety

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Mary Smith PhD, NP-PHC

Indigenous kidney health through strength-based approaches Mary.Smith@queensu.ca



Erna Snelgrove-Clarke PhD, RN

Advancing women's health through implementation of evidence

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Joan Tranmer PhD, RN

Health services research focused on nursing contribution to quality care

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Deborah Tregunno PhD, RN

Professional identity formation and delivery of compassionate care by healthcare professionals

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Rosemary Wilson PhD, RN(EC)

Closing practice gaps for vulnerable persons with complex care needs

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Kevin Woo PhD, RN

Using innovative technologies to enhance chronic disease self-management

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Aleksandra Zuk PhD, RN

Multifaceted research – Environmental and Indigenous Health. Using artificial intelligence deep learning to strengthen healthcare systems and improve clinical care. amz4@queensu.ca



An Opportunity to Move Policy Forward: Surveying the Landscape of Regulated Nursing in Canada



Dr. Joan Almost

As we collectively work to advance Canada's health system—especially in the wake of COVID-19—determining how to effectively tackle the complex policy challenges that health professionals continue to face will be a significant task. Nurses, the country's largest group of regulated health professionals, are crucial to the success of any meaningful solution. It is one of the reasons why policymakers must work together with nurses to optimize the scope, safety, satisfaction, and productivity within nursing practice.

For Dr. Joan Almost, the Canadian Nurses Association (CNA)'s Scholar in Residence since 2018, the way forward requires a clearer understanding of Canada's four regulated designations of nursing and a living document that would not only describe the landscape of nursing in Canada, but also inform future work on intraprofessional practice. "By exploring the structures and practices surrounding health care in Canada," says Dr. Almost, "we can ensure we are no longer limiting the ability of health care providers to give the quality of care that patients deserve."

"...it may be that a more intraprofessional approach - that overcomes the restrictions of our traditional hierarchy - will ensure better care for patients and a better functioning health care system overall."

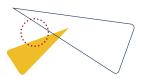
Written and compiled by Dr. Almost, the CNA-sponsored sentinel report, *Regulated Nursing in Canada: The Landscape in 2021*, is the culmination of 2 years of work. Released in February 2021, the report has garnered significant attention across the country, and is serving as a critical resource for the profession and others to understand the internal dynamics of nursing. It speaks methodically and extensively to the history, structures, regulatory requirements, roles, education, and

scopes of practice of the four regulated designations of nurses in Canada, and touches on advanced practice nursing, specialty nursing practice and nurse midwives. The report also describes the roles of physicians' assistants and unregulated care providers who work with nurses and whose roles overlap with nursing. The extensive menu of tables provides rapid access to detailed information about each designation of nurses and all the support structures around them at provincial, territorial and federal levels.

Highlighted within the report are several areas of concern for the profession: rigidly segregated education, guarded approaches to scopes of practice, and a lack of understanding of other regulated nurses' roles. However, one major issue that Dr. Almost identifies as present throughout these concerns is the traditional hierarchies found throughout nursing education, organizations, and scope of practice. "The best-educated generation of nurses in history is locked in roles and functions defined decades ago that underuse the intellectual capital of the entire nursing workforce," writes Dr. Almost, "to be effective in 21st century health care, it may be that a more intraprofessional approach - that overcomes the restrictions of our traditional hierarchy - will ensure better care for patients and a better functioning health care system overall."

Dr. Almost is currently working with CNA to develop practical tools and user resources based on the report and collaborating with CIHI (Canadian Institute for Health Information) on their 'Regulated nurses' scopes of practice' project. Watch Dr. Almost's presentation regarding this work at the Queen's School of Nursing Academic Series at:

https://stream.queensu.ca/Watch/MJRTKRIW



Co-creating Access Solutions for Improving Women's Well-being



Drs. Pilar Camargo Plazas and Lenora Duhn

As social determinants, gender and income can significantly influence women's access to health and social services. Understanding what these determinants mean as lived, personal experiences is critical to supporting women involved with these systems and resources. Using a participatory action research (PAR) approach, Drs. Pilar Camargo Plazas (lead investigator) and Lenora Duhn (co-investigator) have partnered with St. Vincent de Paul Society of Kingston (SVDP) to engage with women living on a low income to learn more about their experiences accessing health and social services.

Team collaboration is essential to participatory action research. Research assistant Ms. Martha Whitfield emphasized: "This study gives us the chance to engage in a meaningful way with women who live and work in Kingston - this work has an impact locally." By collaborating with SVDP's clients, the research team strives to offer a platform for women to convey their insights, by using a method called 'photovoice'. This visual method gives participants the freedom to express their 'voice' by capturing photographs that reflect their experiences of access to health and social services. Research assistant Ms. Jennifer Waite shared that the study is being well received by the women who use SVDP's services: "Many have expressed how they've built resilience from a place of vulnerability." These compelling voices will significantly contribute to the overall study aim of providing evidence to policy makers at the local and national levels, to build strategies to improve women's access to health and social services.

Dr. Camargo Plazas acknowledges that finding the right community partner was key to the project's success: "With Executive Director Ms. Judy Fyfe and the staff at SVDP, we have found a working partnership and a shared passion for wanting to support those who are affected by health and social inequities in Kingston. Our goal is not only to shine a light on the experiences of the women who use their services, but to amplify what matters most to them and, as we work together, to create change."

"This study is essential for system improvement, but equally important in validating the experiences of these women who often feel they have not been heard or respected."

It's a partnership that Ms. Fyfe is also excited about: "Many of our clients have expressed a hesitancy in accessing health services, sometimes as the result of a bad experience or a lack of self-care stemming from a lack of self-worth. This study is essential for system improvement, but equally important in validating the experiences of these women who often feel they have not been heard or respected."

Providing practical assistance and support for individuals and families residing in the Kingston area, the pandemic has significantly impacted the work of SVDP staff, with requests for meals increasing by close to 50% during 2020. The increased demand has highlighted their need for a new, larger building – a dream that will become a reality in the near future. Drs. Camargo Plazas, Duhn and the research Advisory Committee members are also thinking ahead to continued collaboration. "Our goal is to continue creating spaces for engaging community members in Kingston as needed" says Dr. Duhn, sharing that a second study about the experiences of men who use the SVDP services is in the planning stages, where they can voice their health and social issues and together develop an action plan to carry forward.

*This study is funded by the Social Sciences & Humanities Research Council (Insight Development Grant).

COVID-19 from the Perspectives of Older Adults Who Have Completed Treatment for Cancer



Dr. Jacqueline Galica

In Spring 2020, a team of researchers led by Dr. Jacqueline Galica was collecting survey data to assess levels of psychosocial distress (e.g., anxiety, depression, fear of cancer recurrence) among cancer survivors who had been discharged from the Cancer Care of South East Ontario (CCSEO) in the preceding 12 months. At the time, Ontario was just entering the first wave of the COVID-19 pandemic and as a result, the rapidly evolving policies and restrictions were new to the province. Scientists were still learning about how the virus spread and affected different populations, but it soon became clear that older adults and those with comorbid conditions were the most at-risk to suffer serious or deadly outcomes if they contracted COVID-19. As those most at-risk included Dr. Galica's survey participants—who had already consented for the team to approach them for further research—the team planned a new study to examine how older adults (≥60 years), who had been recently (≤12 months) discharged from the care of their cancer team, were coping with their health-related concerns during the pandemic.

It became obvious quickly that that older adult who had completed treatment for cancer were using a variety of strategies that – overall – were helpful for them to cope with their health-related concerns during the pandemic. They drew upon their lived experiences from work, life, and illness, applying them to the global health crisis.

However, being a cancer survivor during the pandemic wasn't without its challenges and patient interviews and question-naires brought to focus the concerns about cancer recurrence, the stress of managing side-effects from cancer and the impact of social isolation on their well-being. To alleviate their concerns, patients had four recommendations for future care delivery, when traditionally offered cancer-related resources aren't available:

- For patients to receive enhanced baseline information from their care team (e.g., a written summary of follow-up visits, symptoms to watch for and who to call)
- · For health providers to facilitate caregiver support and

- engagement (e.g., consider how support persons can attend appointments), and promote supportive resources [e.g., peer support]
- For health providers to integrate technology for varying aspects of follow-up care
- For patients and the general public to sustain the use of personal protective equipment when feeling unwell so as to protect the public

From this study, Dr. Galica and team gained an appreciation about how older adults were coping during the pandemic. Their recommendations offered valuable insight into how health professionals could best address future care – during and beyond the COVID-19 pandemic. While a portion of the study is ongoing and the additional information will sharpen our understanding, it is clear that the continuing nature of the pandemic has become increasingly challenging for these older adults. Therefore, the longitudinal nature of this study will be useful to inform future models of cancer follow-up care and support the long-term coping of persons affected by cancer.

For further details, visit Dr. Galica's study <u>webpage</u>, the <u>Faculty of Health Sciences</u> and read the following manuscripts:

Galica, J., Liu, Z., Kain, D., Merchant, S., Booth, C., Koven, R., Brundage, M., & Haase, K. R. (2021). Coping during COVID-19: a mixed methods study of older cancer survivors. Supportive Care in Cancer. https://doi.org/10.1007/s00520-020-05929-5

Haase, K. R., Kain, D., Merchant, S., Booth, C., Koven, R., Brundage, M., & Galica, J. (2020). Older survivors of cancer in the COVID-19 pandemic: Reflections and recommendations for future care. Journal of Geriatric Oncology. https://doi.org/10.1016/j.jgo.2020.11.009

A Special Infection Prevention and Control Team to Tackle COVID-19 Outbreaks



Dr. Mona Sawhney

Coronavirus disease (COVID-19) has resulted in significant outbreaks in long-term care (LTC) facilities across Ontario and worldwide in 2020. In Canada, approximately 90% of all COVID-19 related deaths in 2020 occurred in individuals over the age of 70 years (Government of Canada, 2020). In response, the government of Ontario capitalized on hospitals' expertise in infection prevention and control (IPAC) to provide assistance to LTC facilities, Retirement Homes (RHs), and other congregate care settings.

One such team, from the North York General Hospital (NYGH), consisted of 11 members including 8 registered nurses, 2 physicians, and Queen's University nurse practitioner Dr. Mona Sawhney. Prior to their deployment into the community, the team received in person IPAC training, COVID-19 education, and were provided with all the necessary personal protective equipment (PPE).

The strategies implemented to discuss and help manage COVID-19 infection were multifaceted and were aimed at mitigating transmission of the SARS-CoV-2 virus or outbreak prevention. The assistance provided by this IPAC team was tailored to the facility's needs and included in-person formal education or training to all available staff regarding COVID-19, hand hygiene, mask and eye protection, personal protective equipment donning and doffing, and cleaning of shared medical equipment. Furthermore, education was provided to environmental services staff regarding disinfection practices. In addition to onsite visits, regular virtual 'huddles' were conducted with each facility, and included members from the hospital IPAC team, Toronto Public Health, and administrators at the LTC facilities or RH. Huddles focused on relationship building, as well as outbreak prevention and management.

The team was deployed to 7 LTC facilities and 10 RHs and managed 10 out of the 13 active COVID-19 outbreaks between April 28 and June 30, 2020, and the mean number of visits per facility was 6 (range 1-20). Length of outbreaks at 3 LTC facilities that were assisted by the North York General Hospital team were matched and compared with the length of out-

break of 6 LTC facilities of a similar size and similar number of residents diagnosed with COVID-19. The mean length of outbreak in the 3 LTC facilities that were assisted by the North York General Hospital team was 10 days shorter than the 6 matched LTC facilities that did not receive the support of the team.

The North York General Hospital Infection Prevention and Control team realized that many LTC facilities and RHs in Ontario did not have the resources to manage COVID-19 outbreaks. However, the creation and implementation of an interprofessional IPAC outreach team, assisted by administrative staff, was a successful health system initiative to manage outbreaks and promote preparedness through education and training.

<u>Watch Dr. Sawhney's presentation</u> regarding this work at the Queen's School of Nursing Academic Series

Read more about the work of the North York General Hospital COVID-19 IPAC-SWAT team in the following publications:

Lamb MJ, LaDelfa A, Sawhney M, Adams D, Abdel-Shahied K, Belfer T, Schembri J, Katz K. (2021). Implementation and evaluation of an IPAC SWAT team mobilized to long-term care and retirement homes during the COVID-19 pandemic: A pragmatic health system Innovation. Journal of the American Medical Directors Association, 22(2), 253-255. https://doi.org/10.1016/j.jamda.2020.11.033

Sawhney M, Lamb MJ, LaDelfa A (2021). Outcomes associated with the mobilization of an interprofessional IPAC-SWAT team to long-term care facilities in Ontario, Canada during the COVID-19 pandemic: A prospective descriptive study. Canadian Nurse, January 25, 2021 https://canadian-nurse.com/en/articles/issues/2021/january-2021/mobilizing-an-interprofessional-ipac-swat-team-to-long-term-care-during-covid-19



Charting the New Normal in **Canadian Community Pharmacies**



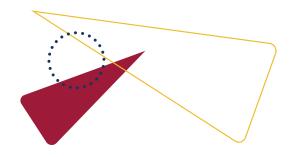
Dr. Kim Sears

Canada's community pharmacists, as with most health care professionals, have found themselves at the front-line of the COVID-19 crisis. At the national, provincial, and local levels, the scope of community pharmacy practices has expanded to include increased patient services (such as broader vaccination capacities), medication hoarding mitigation, and monitoring and prescribing of controlled substances - all while managing disease control and public safety measures. For Dr. Kim Sears, the changes signal that the pandemic may push community pharmacies to a 'new normal', with a permanently enhanced set of practices that expand the role these health professionals play in our overall health care system.

The rapid implementation of many of these changes to the profession, paired with varying provincial regulations and the absence of pan-Canadian guidelines, makes understanding the lasting impact of these changes on community pharmacy practices complicated but nevertheless critical to how we navigate the 'post-pandemic' future. In response to an inquiry by the Safe Assured Pharmacy Safety Research Consortium and supported by the SPOR Alliance Network, Dr. Sears and her multi-institutional research team have undertaken a Canada-wide scoping review of the implications of practices and regulations that have emerged to keep community pharmacies safe during the COVID-19 crisis.

This year Dr. Sears received additional funding from CIHR to bring together community pharmacy research experts from Canada, the UK, and the US, along with key industry, policy, and patient safety stakeholders, to foster a new research agenda. The aim of this collaboration is to build on previous Canadian research by Dr. Sears' team, while creating substantive and sustainable improvements in community pharmacy safety practices. The international coalition will establish a research strategy and work plan that systematically examines the use of existing electronic data sources and regulatory quality improvement practices. From there, they seek to identify practice mechanisms that advance the safe delivery of medications and other patient services in community pharmacies. The overall goal of the research is 1) to reduce the burden of drug-related patient harm through the application of quality improvement strategies with a primary focus on electronic data, 2) to inform community pharmacists about strategies available to reduce the prevalence of medication incidents within Canada and 3) to demonstrate how continuous quality improvement (CQI) principles can be used to achieve this.

The findings generated from the proposed synthesis and stakeholders meeting will be relevant to other healthcare organizations and systems using electronic data. Dr. Sears and her team are excited to explore the findings' further potential to be applied across the continuum of care.



Optimizing Nursing Contribution and Leadership to Primary **Healthcare System Transformation**



Dr. Joan Tranmer

In the past two decades, governments have invested substantially in strengthening primary healthcare, both at the federal and provincial/territorial levels. At the centre of many of these reforms is the introduction and support for inter-professional primary healthcare teams. However, despite these investments and system changes, compared to many other peer countries, Canada's primary care performance lags.

While nurses comprise the largest proportion of non-physician healthcare providers on these teams, current evidence suggests that primary care nursing roles are not optimized. Dr. Joan Tranmer, in collaboration with a national team of investigators, is exploring how to optimize nursing contributions within the context of primary healthcare system reforms.

Dr. Tranmer and her team are currently conducting a number of CIHR-funded projects to: 1) better define family practice nursing competencies (project led by Dr. J. Lukewich, Memorial University), 2) explore the impact of funding models on integration of family practice nurses in primary health care teams (project led by Dr. M. Mathews (Western University) and Dr. J. Lukewich), and 3) determine the short-, medium-, and longterm effectiveness of interdisciplinary teams and other primary care reforms in Ontario (project led by Dr. K. Aubrey-Bassler, Memorial University). The findings from these projects will inform system level changes for the planning of primary healthcare team-based care.

Dr. Tranmer is also exploring how to best achieve care that is coordinated between practitioners, as well as integrated across multiple settings (hospital, specialist clinics, primary care, home care), through three studies. "Working with the College of Family Physicians Canada, we determined that the Patient Medical Home (PMH) - a promising primary care model that provides easily accessible care centered on the patients' needs at every stage of their life and with seamless integration with other health services - was associated with more appropriate utilization of health services, with relatively minimal long-term cost impact." says Dr. Tranmer. In a second study based on a review of published literature, Dr. Tranmer found that the main components of effective integrated care include strategies such as planned care coordination (typically led by a nurse), active physician involvement and information sharing mechanisms. The third study, using health administrative data (ICES), showed that high levels of continuity of care - receiving most of one's care from a stable health provider or team of providers - is consistently associated with better clinical and health system outcomes for patients with chronic conditions (i.e., COPD). The findings from these projects are currently used to inform integration strategies, which will have a strong nursing component, within the Frontenac Lennox Addington Ontario Health Team.

"Primary health care transformation will improve care to our community, with nurses remaining crucial contributors to these transformations and care."

With strong evidence to support the importance of nurses in creating a positive impact on integrated care, and with her national network of collaborators, Dr. Tranmer is well positioned to lead further health system movements. "Primary health care transformation will improve care to our community, with nurses remaining crucial contributors to these transformations and care."

The Empowered Management Study

Actively waiting for interdisciplinary chronic pain care: A multi-site feasibility study investigating clinical support and an internet-delivered psychotherapy treatment for individuals on wait-lists for chronic pain clinics



Dr. Rosemary Wilson

The detrimental impact of chronic pain on quality of life is well known. However, wait times for chronic pain patients to receive treatment in Canada can range from six months to two and a half years, depending on the program or referred service. Such lengthy periods of waiting to receive care can lead to a deterioration in patients' health, functioning and quality of life.

While reducing wait times is critical to improving chronic pain management and care, the team led by Drs. Rosemary Wilson and Rachael Bosma decided to turn this wait time into an opportunity to implement accessible interventions that improve psychosocial function and encourage patients' readiness and ability to actively manage their condition.

"The ultimate goal is to equip our patients with the knowledge and the motivation they need to engage fully and reap the benefits of their care plan"

"The ultimate goal is to equip our patients with the knowledge and the motivation they need to engage fully and reap the benefits of their care plan" says Dr. Rosemary Wilson, one of the project's co-leads.

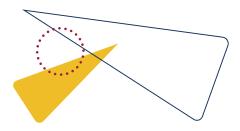
The aim of the "Empowered Management" project is to get a better sense of how feasible and acceptable it is for patients living with chronic pain to follow an online program, designed to enhance readiness for change and build the self-management skills they will need to work with multidisciplinary teams at the chronic pain clinics. The program is comprised of self-directed modules and learning activities with coaching support. The coaching sessions, which are delivered virtually by health providers with Motivational Interviewing training, focus on increasing motivation and commitment to change by exploring and resolving ambivalence.

Fifty patients are being recruited from the waitlists one of two Ontario chronic pain clinics: one in Kingston and one in Toronto. Patients take part in either the educational modules only or coaching-enhanced groups. These online educational modules were developed and reviewed by patients living with chronic pain and clinical experts. Outcomes will be assessed pre- and post-intervention and will guide the implementation of this program at a larger scale.

The treatment of chronic pain requires a multi-pronged approach that incorporates medication but also self-management activities, such as modified exercises, mindfulness, lifestyle modification and pain education. Self-management is widely recognized as key to improving self-efficacy and functional outcomes and reducing healthcare costs. "When we know that fewer than 50% of patients report that they are ready to change their behaviours, capitalizing on the wait time to improve readiness just makes good sense. We are excited to trial this virtual method of delivering the program to prepare persons for interdisciplinary chronic pain care" says Dr. Wilson.

Watch Dr. Wilson's and patient partner Lynne Cooper's presentation regarding this work at the Queen's School of Nursing **Academic Series:**

https://stream.gueensu.ca/Watch/IAPAEOWJ



Educational innovations in response to the COVID-19 pandemic – Dr. Marian Luctkar-Flude

In response to eager demand for COVID-19 educational resources by nurse educators across Canada, Dr. Marian Luctkar-Flude co-led a collaboration between the Canadian Association of Schools of Nursing (CASN) and the Canadian Alliance of Nurse Educators using Simulation (CAN-Sim) to develop virtual simulation games (VSGs) that strengthen the capacity of graduating nursing students and practicing nurses providing care during the global health crisis. The initial VSG, which focused on COVID-19 assessment and appropriate use of personal protective equipment, was created in less than 14 days and launched in early April 2020. It has since been accessed over 2.5 million times worldwide. A series of 5 additional VSGs were funded by Health Canada, with the objective of developing to provide essential skills training related to COVID-19. These include care of a ventilated patient, multiple organ dysfunction, and respiratory disfunction. Results of a user survey demonstrated the six VSGs contributed to perceived knowledge gains and improved readiness for practice related to infection prevention and control measures, correct use of PPE, and practice modifications required by the pandemic. A formal evaluation of project outcomes is underway. The VSGs are freely available at: www.can-sim.ca/hc

Adapting mental health resources to support frontline workers who provide care to homeless and street-involved communities affected by COVID-19 – Dr. Joan Almost

The COVID-19 pandemic has amplified the crisis of drug overdoses and deaths taking place in homeless and street-involved communities. Frontline workers working with these communities are experiencing acute mental health issues that include secondary trauma and compassion fatigue as they respond to the complex trauma being experienced by their clients. Frontline workers include health providers (i.e., nurses, social workers, personal support workers) and peer support workers. In partnership with Ottawa Inner City Health - an organization that provides integrated health care services to street communities - the lead researchers Drs Wendy Gifford, Joan Almost, Craig Phillips and Ms. Wendy Muckle will interview frontline workers to ask about their experiences during the past year. Based on the interviews, the content and delivery of current mental health supports will be adapted to the pandemic context then implemented and evaluated to assess the impact of the adapted supports on frontline workers' mental, social, and emotional wellbeing. The final stage will include the development of a framework for adapting and scaling the delivery of mental health supports for organizations serving homeless and street-involved communities. The goal is to address the secondary trauma, compassion fatigue and burnout frontline providers are experiencing so they can continue to provide effective care to the most vulnerable and marginalized members of society.

Factors associated with practitioners Lyme disease prevention, diagnosis, and treatment decision making - Dr. Rylan Egan

Lyme disease (LD) is the most diagnosed tick-borne disease in North America. The number of reported cases has increased dramatically in recent years and there remains many unanswered questions about the disease's clinical presentation, detection and treatment, as well as the prevention of long-term adverse effects. Through his involvement in the Canadian Lyme Disease Research Network - a multidisciplinary, patient-centered research program - Dr. Rylan Egan and collaborators are tackling the challenge of providing evidence-based and timely education to healthcare providers, to improve their awareness and understanding of Lyme disease. The team has begun conducting national interviews with primary care practitioners who diagnose and treat LD, and have conducted systematic and grey literature reviews on educational interventions related to Lyme disease. They have also begun consultation on developing a national LD information and translation portal. The ultimate goal of the Research Network and of Dr. Egan's program of research is to reduce the impact of Lyme disease on the health of Canadians.

Strength-based approaches towards improving kidney health in Indigenous communities – Dr. Mary Smith

Indigenous people in Canada are up to four times more likely to have chronic kidney disease (CKD) and End Stage Renal Disease than the general Canadian population. In addition to receiving fewer kidney transplants, Indigenous communities face numerous challenges in managing and treating kidney disease, such as distance to dialysis treatment centres and associated travel costs. Dr. Mary Smith and team, funded by the Kidney Foundation of Canada, are co-creating solutions aimed at addressing these issues, including identifying culturally safe approaches towards fostering kidney health, increasing the prevention of kidney disease, boosting kidney donation and transplantation, and promoting accessible dialysis. Benefiting from the tremendous research engagement of the North Simcoe Muskoka (Ontario) community, Dr. Smith has completed interviews with First Nation members in North Simcoe Muskoka and has held multiple advisory committee meetings. Through growing community partnerships, Dr. Smith is thrilled with the multiple connections her team is making with broader research and patient advocacy groups on the topic of kidney health.



SELECTED AWARDS, DISTINCTIONS AND RECOGNITIONS

Dr. Joan Tranmer was awarded the Canadian Association of Schools of Nursing (CASN): Nursing Research Excellence Award, in recognition of her significant contributions to the growth of nursing as a science discipline and her strong commitment to mentoring students and colleagues during the research process. Currently Director of the Queen's Nursing and Health Quality Research group, Site Director of ICES Queen's and Sally Smith Chair in Nursing, Dr. Tranmer has an exceptional publication record of 100 peer reviewed publications and provided almost three decades of service through her many clinical and leadership roles.

Dr. Kevin Woo received the Canadian Nurses Association (CNA) Order of Merit for Nursing Research, which honours nursing leaders for their significant contributions to advancing the nursing profession and the health of people in Canada. For over 20 years, Dr. Woo has sustained a prolific research career, focusing on topics such as wound care, chronic disease management, knowledge translation and patient safety. By blending his research with an active clinical practice, he has had an immediate and profound impact on the health of people living in Canada.

Dr. Mona Sawhney's winning photo from the Queen's University Art of Research photo contest captures the way simulation education can be utilized in the real-to-life patient care environments. Dr. Sawhney and her team implemented this concept at a hospital in Toronto, with a focus on researching the outcomes of a simulation intervention for nurses who care for patients receiving epidural analgesia for pain management after surgery. Her winning photo was titled: This is EPIC: Simulation Education with Patient Actors to Improve Care.



Dr. Marian Luctkar-Flude and the Wound Care Education team (Drs. Kevin Woo, Deborah Tregunno, Jane Tyerman (uOttawa) and Barbara Wilson-Keates (Athabasca)) received the Registered Nurses Foundation of Ontario (RNFOO) Nurse Innovator Award in recognition of their work developing a 'first of its kind' Virtual Simulation Game to teach wound care online to nurses and nursing students. With virtual Objective Structured Clinical Examination (OSCE) or V-OSCE summative assessment embedded, this simulation will serve as a powerful tool to help standardize wound care education. Co-President of the Canadian Alliance of Nurse Educators using Simulation (CAN-Sim) and serving on the International Nursing Association for Clinical Simulation and Learning (INACSL) Board of Directors as VP Research, Dr. Luctkar-Flude has extensive experience with high-fidelity patient simulation, interprofessional education and online learning. Her current program of research focuses on virtual simulation game design, presimulation preparation approaches, and faculty development.

BUILDING FUTURE RESEARCHERS - STUDENT FEATURES

Celebrating 5 Years of Student Research Engagement: The Nursing and Health Quality Research Summer Work Experience Program (SWEP)

In the summer of 2017, a group of School of Nursing faculty started a pilot project, hiring nursing undergraduate students with the financial support of the Queen's Summer Work Experience Program (SWEP). Their main goal? To expose undergraduate students to research conducted within the School of Nursing, to build research capacity, and to prepare students for their future careers as health professionals. Since then, the project has steadily expanded in size and scope. The program now encourages applications from across the Queen's undergraduate community, to better represent the interdisciplinary nature of nursing faculty members' research programs. In 2020 the program took on 4 undergraduate students and even received participation interest from students at other Ontario universities.

Between auditing a graduate-level evidence synthesis course, attending graduate theses defenses, and working on several research projects over the course of the summer, students interact closely with peers and professors to add important skills to their research toolkit. The program is tailored to improve their understanding of research methodologies and provide hands on practice in data collection and analysis. The SWEP groups have also designed posters and other knowledge dissemination materials, drafted manuscripts and produced research content for social media.

The 2018 and 2019 cohorts of SWEP students authored their very own experiential paper - <u>read it here</u>. We could not be prouder of the fantastic groups of students who have participated over the past 5 years and look forward to the continuation of this wonderful program!

"SWEP was an unforgettable experience. Primarily, I was able to get practical experience in the field of research, network with my professors, and submit works for publication. However, SWEP isn't just research day-in and day-out. My supervisors gave me the freedom to work on creative projects like producing promotional videos, graphic designing, and social media management. I highly recommend SWEP for any nursing student looking to broaden their horizons and develop their skillsets over the summer--with or without a background in research!"

Nathaniel Gumapac, BNSc | 2020 SWEP Student

QCHCQ: YEAR IN REVIEW

The Queen's Collaboration for Health Care Quality (QcHcQ)

Originally established in 2004 as the first JBI Collaborating Centre in North America, the Queen's Collaboration for Health Care Quality: A JBI Centre of Excellence (QcHcQ) provides leadership, best practices guidance, research, training and resources in the science of synthesis. As members of the International JBI Collaboration, QcHcQ interacts with over 70 JBI Collaborating Centres around the world. Members of the QcHcQ also collaborate closely with a variety of Canadian organizations, institutions, and individuals, including the SPOR Evidence Alliance and COVID-END.

In 2020, QcHcQ members Christina Godfrey, Kim Sears and Amanda Ross-White joined the COVID-19 Evidence Network to support Decision-Making (COVID-END). This CIHR-funded network aims to provide stakeholders and decision makers with the evidence needed to make informed COVID-related decisions in a timely manner, and will help coordinate the evidence synthesis, technology assessments and guidelines development on COVID, to reduce duplication. Queen's School of Nursing collaborators will lend their expertise by conducting rapid reviews.

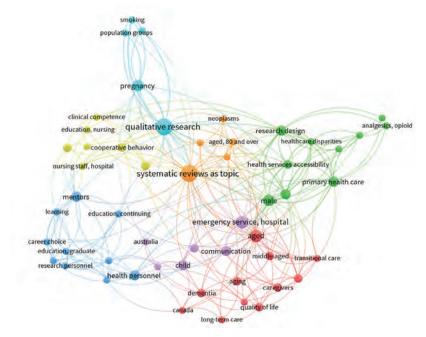
In addition to their work with COVID-END and the SPOR Evidence Alliance, members of the QcHcQ offered interdisciplinary comprehensive systematic review training (CSRT) featuring the JBI methodology for evidence synthesis. This 5-day, activity-driven program includes rigorous methods and tools to appraise and synthesize evidence from research literature and documentary sources. Participants gain hands-on experience in drafting a systematic review protocol, including definition of the question(s) and search, retrieval, and selection of research for the review. Between 2015 and 2019, 69 trainees completed the 5-day workshop, and went on to author close to 60 reviews of evidence, a truly remarkable contribution of the QcHcQ to improve the use and uptake of evidence.

Traditionally held in-person on Queen's campus, the pandemic shifted the QcHcQ's 2020 CSRT workshops to a virtual setting. The program's pivot to online learning enabled instructors to effectively utilize the new format to broaden program accessibility, supporting the participation of a significantly wider audience. As the 2021 workshops are also online, QcHcQ is looking forward to continuing to develop future review training workshops that remain geographically accessible, to support the wider health care community.

Furthermore, co-directors Drs. Christina Godfrey and Andrea Tricco have established a monthly mentoring program where graduate students can seek support and guidance as they complete evidence synthesis projects. This program is set to expand and include other groups around Canada, with the goal of fostering a community of practice for researchers conducting evidence synthesis.

In the next year, QcHcQ is looking forward to continuing to grow structures that promote and advance the synthesis, transfer and utilization of evidence to improve healthcare outcomes locally and globally.

Review topics published by alumni of the Queen's JBI Comprehensive Systematic Review Training (2015-2019)



RESEARCH EVENTS - YEAR IN REVIEW

Queen's School of Nursing Academic Series

The Queen's School of Nursing Academic Series provides faculty members, graduate students and external guest speakers an opportunity to share their scholarly work, receive feedback, and explore collaborations. It aims to engage with students, researchers and clinical partners in discussion about research activities and strengthen the use of evidence in practice. New this year, the series moved to a virtual format on Zoom and recordings made available through Queen's Stream.

Annual Gerri MacEwen Lecture

This year's Annual Gerri MacEwen Lecture in Nursing featured Professor Brendan McCormack, who presented on 'The Being and Doing of Person-centred Research - Developing a programmatic approach'. The recorded presentation is available at:

https://www.youtube.com/watch?v=5BpSZHptGZ4&feature=youtu.be

The lecture was established by Dr. Pete MacEwen, MD'73, in memory of Gerri MacEwen to bring to the School of Nursing speakers on a variety of topics including but not limited to nursing education, research, scholarship, clinical expertise and innovation.

Health Quality Journal Club

The Health Quality Journal Club brings together academics, health professionals and the wider community to engage with topics related to health quality, including risk, patient safety and quality improvement. Each meeting is led by a guest editor who selects that month's journal article for review and discussion. This year in particular, journal club activities provided us with a virtual connection to our colleagues and to students and increased the exposure of those that attended to the Health Quality global network.

To register for any of these programs, please email:

nursing.research@queensu.ca





DISSERTATIONS

Six students from the School of Nursing graduate programs were awarded graduate degrees in 2020 – congratulations to all! The research programs of the Queen's Nursing and Health Research faculty members and graduate students align with the research themes of 1) Populations with Complex Conditions, 2) Practice Environments, and 3) Health Care Quality.

> Vanessa Silva e Silva, PhD, Understanding Processes,

Structures, and Inter-Professional Relational Networks within Organ **Donation Programs in Ontario**

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.

Rachel Ellingson, MNSc, Investigating Chronic Pain Management Among **Emerging Adults**

http://hdl.handle.net/1974/27443

Elizabeth Moulton, PhD, Movement and Mobility: Conceptual Definitions and **Relevant Measures**

http://hdl.handle.net/1974/27709

PRACTICE **ENVIRONMENTS**

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

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

http://hdl.handle.net/1974/27548

Hebatulrahman Al Jelban, MNSc, A Narrative Approach to Understanding Nurse Educators' Experiences of Teaching Disaster Nursing to Undergraduate Nursing Students in Ontario

http://hdl.handle.net/1974/28213

Shannon Murphy, MNSc, Exploring the Experience of Role Transition from Registered Nurse to Clinical Instructor: A Narrative Inquiry

http://hdl.handle.net/1974/28126

RESEARCH FUNDING

- Baker C, Luctkar-Flude M, Tyerman J, Willett T. Essential COVID-19 Skills for Graduating and New Nurses. Health Canada Health Care Policy and Strategies Program.
- Brown P, Tranmer J, Brogly S, Yacob M, Zelt D. The association between diabetes, metformin and aortic aneurysm and aortic dissection: A population-based cohort study. Queen's University Department of Surgery Research.
- Camargo Plazas P, Philpott J, Duhn L, & Brillinger S. Opening all the Boxes: Unpacking the Lived Experience of Frontline Providers during a COVID-19 Outbreak through Art-based Research. Social Sciences & Humanities Research Council – Partnership Engage Grant (SSHRC-PEG).
- Colautti R, Colpitts C, Duan Q, Egan R, Salomons T, Ghasemlou N, S Yakimowski. The E.D.G.E. of Lyme emerging disease genetics and ecology of the Lyme disease complex. Queen's University Wicked Ideas grant program.
- DiRenna T, Lemos N, Lee D, Bosma R, Wilson RA. Empowered waiting: a virtual care education solution for chronic pelvic pain patients waiting for specialist care. Academic Health Sciences Centre (AHSC) Alternative Funding Plan (AFP) Innovation Fund 2019-20.
- 6. Egan R, Worku M, Wilson R, Begashhwe G, Berihun B, Gebeyaw G, Robertson M, Mulatie M, Tedla T, Abebe H, Workeneh Kassa S, Adugna M, Araya BM. Listening to the voices of students with disabilities to maximize alignment between stated educational needs and supports. MasterCard Foundation Scholars Program.
- 7. **Goldie CL**, Robinson A, Goldie CE, **Galica J**, Hanna T. *Can Immunotherapy Treatment for Patients with Non-Small Cell Lung Cancer Improve End-of-Life Outcomes and be Cost-effective in the Real World? A Population-Based Study*. Queen's University Health Sciences Internal Grant Competition: Clare Nelson Bequest.
- Galica J, Booth C, Brundage M, Haase KR, Kain D, Koven R, Marchant S. The psychosocial implications of COVID-19: How are cancer survivors coping? Queen's University SARS CoV-2/ COVID-19 Research Opportunity.
- Galica J, Robb K, Ethier JL, Francis JA, Giroux J, Jull J, Kennedy K, Langley H, Maheu C, Patel R, Peacock S, Perry K, Stark D. Surviving Gynecological Cancer in small urban and rural communities: Identifying the unique elements of a framework to facilitate survivor preparedness for transition out of primary cancer treatment. Canadian Institutes of Health Research (CIHR) Catalyst Grant: Patient-Oriented Research.
- Gifford W, Ashton S, Almost J, Graham I, Juergenson L, Thavorn K, & Al Awar A. Building culturally safe cancer survivorship care with Inuit in Inuit Nunangat. Canadian Institutes of Health Research (CIHR) Project Grant.
- Gifford W, Muckle W, Almost J, Phillips JC, Coburn V, Foth T, McMenemy C, Thavorn K, Haines M, Van Herk K, Ahmed A, Cornelius B, Hopkins AM, Lusignan A, Modanloo S, Rolfe D.

KEY:

Bold - School of Nursing Faculty <u>Underline</u> - School of Nursing Learner

Adapting a holistic program to support the mental health and wellness of front line workers providing care to homeless and street communities. Canadian Institutes of Health Research (CIHR) Operating Grant - COVID-19 Mental Health & Substance Use Service Needs and Delivery.

- Gordon R, Baxter C, Irving N, Fullarton R, Furlong K, McFawn T, Nable L, Luctkar-Flude M, Tyerman J. Synchronous versus asynchronous delivery of virtual simulation integration in undergraduate nursing education. University of New Brunswick.
- Greenspan M, Medves J, Zoutman D, H.H. Angus & Associates Limited Consulting Engineers. Local Area Video Communication System to Reduce PPE Demand in Hospitals. Ontario Centres of Excellence Voucher for Innovation and Productivity (VIP) program.
- 14. Grill E, Rotter T, Weigel M, Pauls A, Sandmaker L, Schwettmann L, Mueller M. Effectiveness and safety of a evidence-based care pathway to improve mobility and participation in older patients with vertigo and balance disorders in primary care (MobilE-PHY II). Federal Ministry of Education and Research (Germany).
- Haase K, Galica J, & Oliffe J. Understanding shifting gender roles amongst older adult cancer survivors and their caregivers during a global pandemic: The SHIFT study. Hampton Fund Research Grant

 – New Faculty Grant.
- Hedden LK, Lukewich J, Mathews M, Brown JB, Green ME, Marshall EG, McCracken R, Norful AA, Poitras ME, Sibbald SL, Tranmer JE. The impact of funding models on the integration of registered nurses in primary health care teams. Canadian Institutes of Health Research (CIHR) Project Grant.
- 17. <u>Hew-Girard J</u>, **Galica J**, James P, **Tranmer J**. *Identifying Clinical Factors Associated with Post-partum Hemorrhage in Women with Inherited Bleeding Disorders (CLIF-PPH): A Population-based Cohort Study of Women in Ontario.* Behring CSL.
- 18. Hew-Girard J, Galica J, James P, Tranmer J. Identifying Clinical Factors Associated with Post-partum Hemorrhage in Women with Inherited Bleeding Disorders (CLIF-PPH): A Population-based Cohort Study of Women in Ontario. Alberta Health Services - Southern Alberta Rare Blood and Bleeding Disorder Comprehensive Care Program.
- Luctkar-Flude M, Tyerman J, Tregunno D, Woo K, Wilson-Keates B. Innovations in wound care education for nurses and nursing students: Virtual simulation games (VSGs) and a virtual OSCE (V-OSCE). Registered Nurses Foundation of Ontario (RNFOO) Nurse Innovator Award.
- 20. MacRae D, Jara M, **Luctkar-Flude M**, Tyerman J. *Integrating alternative learning experiences including virtual simulations across an undergraduate nursing program*. Austin Community College.

- 21. Martínez J, Camargo Plazas P & Alvarado B. Consulting and engaging MSM and transgender women for a situational analysis of HIV PrEP in Colombia. Canadian Institutes of Health Research (CIHR) Planning and Dissemination Grant.
- 22. Nistor O-I, Wilson R, Godfrey C. Systematic review and meta-analysis on the incidence, prevalence and determinants of discomfort in inflammatory bowel disease. Crohn's & Colitis Foundation of Canada Nursing-led IBD Research grant.
- 23. Sawhney M, Furlan A, Campbell F, Clarke H, Gilron I, Hassan A, McCartney C, Patel A, Ross White A, Stratton A, Tierney S, Mock D, Tyrell J Wong M. Development of best practice recommendations regarding the assessment and prevention of long term opioid use, opioid misuse, and opioid related harms in patients prescribed opioids for the management of acute pain following surgery. Canadian Institutes of Health Research (CIHR) Planning and Dissemination Grant.
- 24. Sears K, Barker JR, Godfrey C, Durando P, Rodgers J, Elms S. Charting the 'New Normal' in Canadian Community Pharmacy Practice. Canadian Institutes of Health Research - Strategy for Patient-Oriented Research (CIHR-SPOR) Evidence Alliance scoping review grant program.
- 25. **Sears K**, Aubert B, Barker J, Mackinnon N. *Advancing safe* medication delivery in Canadian community pharmacies. Canadian Institutes of Health Research (CIHR) Planning and Dissemination Grant.
- 26. Somanadhan S, Kinsella W, Fealy G, Magner C, Fogarty L, Tyerman J, Luctkar-Flude M. National online training programme for Special Needs Assistants (SNAs) working in Irish schools. Irish Department of Education and Skills and the National Council for Special Education.
- 27. Squires J, Backman I, Bergstrom A, Brehaut J, Brouwers M, Burton C, Cassidy C, Chalmers C, Chapman A, Colquhoun H, Curran J, Demery Varin M, Doering P, Elliott Rose A, Fairclough L, Godfrey C, Graham I, Grinspun D, Harvey G, Hutchinson A, Hillmer M, Ivers N, Li S-A, Miller W, Noseworthy T, Robson M, Rycroft-Malone J, Stacey D, Straus S, Tricco A, Wallin L, Rader T. Advancing the Science of Knowledge Translation: Measuring Context. Canadian Institutes of Health Research (CIHR) Project Grant.
- 28. Stockley D, Dalgarno N, Hastings Truelove A, Kolomitro K, Turnnidge J, van Wylick R, Woo K, Donnelly C, Finlayson M, Ghahari S, Kessler D, Auais M, DePaul V, Norman K, Parsons T, Hopkins-Rosseel D. Engaging patients with early signs of cardiovascular diseases in healthy aging interventions: An online education initiative for healthcare providers. Pfizer Inc. Global Medical Grant - Healthy Aging Interventions competition.
- 29. Szabo C, Rochon A, Almost J, Tranmer J. Patterns and Resident Characteristics Associated with Opioid Deprescribing in Long-Term Care in Ontario: A Population-Based Cohort Study. Ministry of Health and Long-Term Care – Applied Health Research Question

- 30. Tran J, **Woo K**, Rialto C, Sefati M. Feasibility of sensors embedded in a non-invasive smart surface to measure interface pressure, humidity, and temperature. Centre for Aging and Brain Health Innovation.
- 31. Tyerman J, Luctkar-Flude M, Baker C. Essential COVID-19 Skills for Graduating and New Nurses – Module 6: Suicidal Ideation: Assessment of Risk. Associated Medical Services Foundation.
- 32. Wilson R, Bosma R, Bisson E, Cachia W, Cooper L, di Renna T, Salomons T, Galica J, Liddy C, Lyon A, MacLeod B, Poulin P, Rash J. Actively waiting for interdisciplinary chronic pain care: A multi-site feasibility study investigating clinical support and an internet-delivered psychotherapy treatment for individuals on wait-lists for chronic pain clinics, Canadian Institutes of Health Research (CIHR) Catalyst Grant: Patient-Oriented Research.

PUBLICATIONS

Peer-reviewed papers

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- Almost J, Gifford W, Ogilvie L, & Miller C. (2020). The Role of Nursing Leadership in Ensuring a Healthy Workforce in Corrections. Nursing Leadership (1910-622X), 33(1), 59-70.
- Almost J. (2020). The Impact of COVID-19 within Academic Settings: A High-Speed Pivot. Canadian Journal of Nursing Leadership, 33(3), 15-19.
- Almukhaini S, Martin-Misener R, Weeks LE, Macdonald M, Husain H, Macdonald D, Rothfus MA. (2020). Advanced practice nursing roles in Arab countries in the Eastern Mediterranean region: a scoping review protocol. JBI Evid Synth. doi:10.11124/ jbies-20-00002
- Akbar L, Zuk AM, Tsuji LJS. (2020). Health and Wellness Impacts of Traditional Physical Activity Experiences on Indigenous Youth: A Systematic Review. International Journal of Environmental Research and Public Health. 17(21):8275. https://doi. org/10.3390/ijerph17218275
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- Bahji A, Altomare J, Sapru A, Haze S, Prasad S, & Egan R. (2020). Predictors of hospital admission for patients presenting with psychiatric emergencies: A retrospective, cohort study. Psychiatry Res, 290, 113149. doi:10.1016/j.psychres.2020.113149
- 10. <u>Biehl M</u>, Wild L, Waldman K, Haq F, Easteal RA, & **Sawhney M**. (2020). The safety and efficacy of the IPACK block in primary total knee arthroplasty: a retrospective chart review. Canadian Journal of Anaesthesia, 67(9), 1271-1273. doi:10.1007/s12630-020-01652-1
- 11. Bisson EJ, Gemmell J, Kelly S, Marsala A, Brown E, Good MA, Wilson R, Duggan, S. (2020). High Prevalence of Falls Independent of Age in Adults Living With Chronic Pain. Clinical Journal of Pain, 36(12), 907-911. doi:10.1097/AJP.000000000000881
- 12. Bobbette N, Ouellette-Kuntz H, **Tranmer J**, Lysaght R, Ufholz LA & Donnelly C. (2020). Adults with intellectual and developmental disabilities and interprofessional, team-based primary health care: a scoping review. JBI Evidence Synthesis, 18(7), 1470-1514. doi:http://dx.doi.org/10.11124/JBISRIR-D-19-00200
- 13. Breau GM, Campbell SH, Hilario C, Goldie CL, & Auxier JN. (2020). Mentoring Graduate Students to Become Effective Teaching Assistants: Developing and Implementing a Student-Centred Program for Nursing. Quality Advancement in Nursing Education - Avancées en Formation Infirmière, 6(3), 1-11. doi:10.17483/2368-6669.1206
- 14. Brenner IKM, Brown CA, Hains SJM, **Tranmer J**, Zelt DT, Brown PM. (2020). Low-Intensity Exercise Training Increases Heart Rate Variability in Patients With Peripheral Artery Disease. Biological Research for Nursing. 22(1): 24-33.
- 15. Butcher NJ, Tricco AC, Offringa M, Moher D, & Galica J. (2020). Training researchers in publication science: why, what, and how. *J Clin Epidemiol, 117*, 165-167. doi:10.1016/j.jclinepi.2019.08.007
- 16. Camargo-Plazas P, Costa Gl, Alvarado B, Duhn L & Tregunno D. (2020). Adapting Paulo Freire's Participatory Education to Develop Self-Management Education Programs for Seniors With Diabetes. Canadian Journal of Diabetes. doi:https://doi. org/10.1016/j.jcjd.2020.10.017
- 17. Camargo-Plazas P, Silva e Silva V, Duhn L, & Tregunno D. (2020). Teaching about globalization for nursing practice: Medical tourism as an exemplar. Nurse Education Today, 89, 1-3. doi:10.1016/j.nedt.2020.104403
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- 19. Carragher RM, MacLeod E & Camargo-Plazas P. (2020). The objectivity and subjectivity of pain practices in older adults with dementia: A critical reflection. Nurs Inq, e12397. doi:10.1111/ nin.12397
- 20. Chan J, Safaei J, & Rotter T. (2020). Are the benefits of lean rapid process improvement workshops in healthcare worth the investment? Hospital administration, 9, 1-13.
- 21. Cheon S, de Jager C, **Egan R**, Bona M & Law C. (2020). Evaluation of ophthalmology residents' self-assessments and peer assessments in simulated surgery. Canadian journal of ophthalmology. Journal canadien d'ophtalmologie, 55(5), 382-390. doi:https://dx.doi.org/10.1016/j.jcjo.2020.05.005
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- 23. Cooper S, Cant R, & Chung C. and the FIRST2ACT Impact Team (Rotter T)(2020). The Impact of Emerging Simulation-Based Technologies on the Management of Deteriorating Patients: Aiming for a Gold Standard Educational Evaluation. Clinical Simulation in Nursing, 45, 50-59. doi:https://doi.org/10.1016/j. ecns.2020.05.004
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- 25. Costa IG, Tregunno D & Camargo-Plazas P. (2020). The constructivist grounded theory methodology: Considerations on its use in the area of nursing in wound care. Qualitative Research in Health: Advances and Challenges, 3, 858-869.
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