

SCHOLAR PRACTITIONER PROGRAM

FALL NEWSLETTER



SEPTEMBER -
DECEMBER 2020

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Collaborations



Welcome

Written by Dr. Baiba Zarins

Greetings on the commencement of the 2019-2020 academic year!

In this time of great uncertainty and global health crisis, we welcomed the 2020 cohort to our program, as you immersed and experienced the first-semester theme, Generativity and Life from many varied perspectives, spaces and experiences within the virtual format of program delivery. This journey will be so very collective, yet individual in the generation of new knowledge and exploration of the health care field unfolds over the semester and future two years of studies.

Congratulations to the 2019 cohort learners who have reached an important midpoint milestone within their program journey. Best wishes for continued motivation and energy as you continue in expanding learning opportunities to deepen your knowledge, skill, judgement, and ethically based learning goals. Your unwavering ability to pivot to virtual and then a hybrid model with the slow integration back into agency based practicums in the fall semester is commendable. Program faculty are proud of your continued achievements and are honoured to bear witness to your evolving experiential learning within the health care field and level of adapting to the realities of contextual learning.

As we commence the New Year within a continued complex health care environment, it is also a time of hope. And while 2020 was difficult – especially for those also working in essential care roles – the hope remains strong in navigating the pandemic together as a collective and supportive group of current and future health care professionals.

The achievements attained thus far are a testament to your hard work and the work of our very dedicated program faculty, our program stakeholders and administration. Although 2021 will not come without challenges, I am confident that we have the individual and collective energy to succeed in attaining our goals. Continue demonstrating acts of compassion, generosity and compassion. Each of us are continually responding to the impact of the global pandemic and its effects globally, nationally, locally and individually.

Wishing everyone a positive, engaging and exciting academic year ahead!

Baiba.



“Coming together is a beginning; keeping together is progress; working together is success.”

– Henry Ford



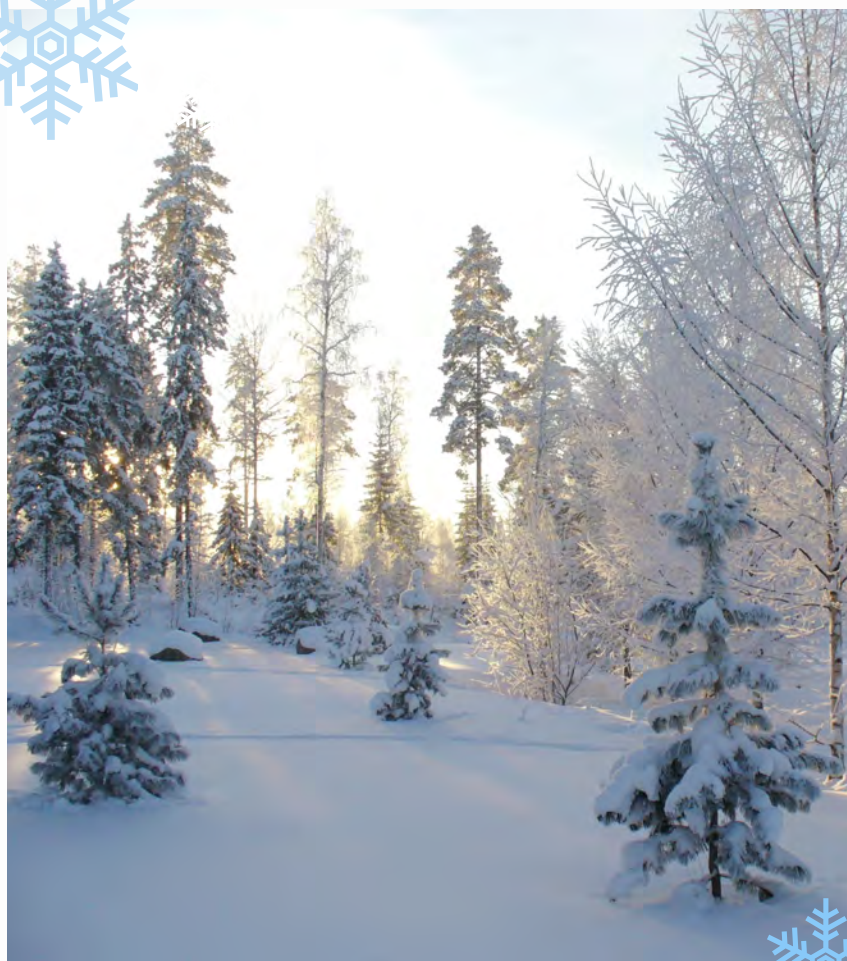


Faculty Announcements

Written by Dr. Baiba Zarins

In response to the health care leadership needs of our long-term care support network agencies, **Kryisia Theriault** will be on leave from our program for the Winter semester. We wish to commend Kryisia on her responsiveness and dedication to the health care needs of residents at St. George Care Centre on behalf of UHN Leadership.

In Kryisia's absence, we are pleased to share that **Salwa Musa**, an experienced health care provider and sessional faculty with our program, will assist in support of our program needs. Thank you and welcome, Salwa!



Program Announcements

NU SPP on the Move

Our physical location at Med-West Centre will soon transition to another location as our lease expiry will not be renewed after March 2021. As the program is hosted predominately virtually for the foreseeable future to uphold safety directives, further information regarding our Toronto site location will be announced when finalized.

NCLEX News

NCLEX preparatory activities are threaded throughout your learning journey. Please do not hesitate in planning your independent study approaches. It is wonderful to acknowledge and recognize the high success rate of SPP graduates with NCLEX testing, however, plan ahead and optimize your learning experiences to your study plans, goals and milestones.

It is wonderful to receive news that our 2019 SPP graduates are writing and passing NCLEX! Our program's overall success is a testament to the unique learning strategies and attentiveness to individual success in obtaining licensure. Our graduates share that the best advice is to start your individual or group study plans early and utilize various learning strategies and resources to achieve a well-rounded approach to the exam content.

HSP-Net updates - CV's

SPP learners should be continuing to use HSPnet for accessing placement information (i.e. your placement location, preceptor details, orientation, etc.) It is your responsibility to ensure you are checking HSPnet for placement information. Do note that placements are subject to change due to unanticipated circumstances of receiving units and preceptor availability. As a reminder, please ensure you have an **updated** CV on file which includes your SPP practicum (both agency and virtual) achievement details. In response to limitations in available practicums, more placement units are now requesting CV's in follow up to HSP-Net requests. CV's greatly assist unit management in both selection and facilitation of the best experiential practicum experience in anticipation of your placement. **Meagan King** (sppclinicalplacements@nipissingu.ca) is our program lead in the request, process and confirmation of your experiential practicums, therefore appreciates your responsiveness and updated profile each semester.



Program Announcements



Coming in 2021!

NEW WAY TO ACCESS DROP-IN SERVICES

NEW LIVE! WEBINARS

NEW ACADEMIC SKILLS RESOURCES WEBSITE

SAME GREAT SUPPORT!

SEE YOU IN JANUARY!

FALL 2020 BY NUMBERS

81 ACADEMIC SKILLS LIVE! WEBINARS WITH 668 PARTICIPANTS AND WE SUPPORTED OVER 1400 STUDENTS!

Student Learning and Transitions

In acknowledgment and support of all aspects of the learner experience, the Nipissing University Student Transitions and Learning provides valuable resources in many areas of support. As noted on their website, Student Learning and Transitions (SLT) is a group of services and programs aimed at helping students engage in their academic studies and student life at Nipissing University. We teach essential academic skills and study techniques that help students more effectively express their intelligence, apply their knowledge and communicate their ideas. We facilitate activities and programs to build a peer support network, an engaged Laker

community, and support students throughout their multiple transitions in, through, and out of their academic careers. For more information as of specific services provided, please visit:

<https://www.nipissingu.ca/departments/student-development-and-services/slt>

Skill Development Services are offered for:

- Academic Writing
- Academic Skills
- Math and Science
- Academic Success Program
- Student Success Workshops
- Peer Tutoring
- Record of Student Development (RSD)



Nipissing University Student Union (NUSU)

Email: info@nusu.com Telephone: (705) 474-3450 ext. 4801

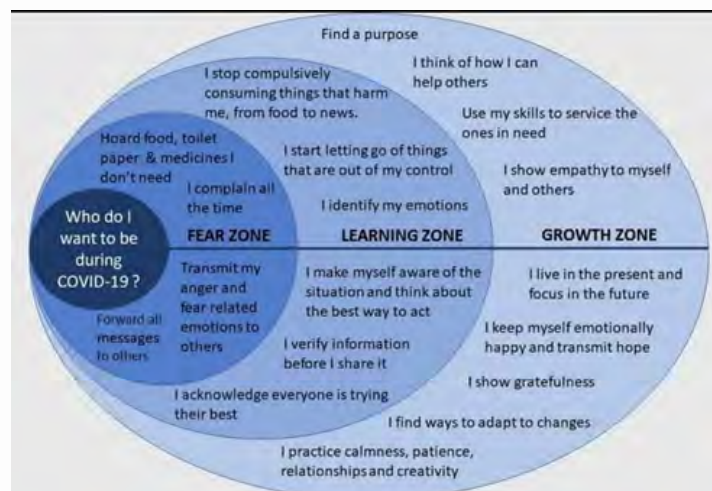
Website: nusu.com Social Media: @NUSUtalks – Facebook, Instagram and Twitter



The Nipissing University Student Union (NUSU) is a body comprised of all Nipissing University students, representing approximately 5000 members on campus in North Bay and long-distance students. Collectively, students have a much stronger voice, and NUSU is the embodiment of this voice. The organization strives to represent students democratically, provide a communication framework, and lobby for legislative change on issues that affect students. As an elected board, NUSU Executives and Directors provide a full range of services (financial and academic), activities, events, and political advocacy to improve the student experience including:

- Health and Dental Plan
- Community Involvement
- Food Bank
- Clubs
- Career Services
- Frosh Week & Shine Day

COVID Mindfulness Moment



Faculty Introductions



Dr. Baiba Zarins, RN, PhD
Program Manager

Duration as Faculty

10 years, but was actually part of the planning committee before the official launch of the program in September, 2010, as the program inception process began in 2008.

Before SPP

I have had a very enriched career path within UHN for the past 33 years, working within both point of care units and Managerial roles. Prior to accepting the SPP role, my role within UHN encompassed Global Practice recruitment and retention strategies between UHN and remote First Nations communities of the James Bay region while transitioning from my role in facilitating UHN's participation in the RAO Best Practice Spotlight Organization project.

Favourite Part of SPP

The SPP had consistently embraced its adaptability (both in physical locations as well as curricular delivery modalities) resilience (to real and anticipated challenges) and incredibly motivated learner cohorts. Each semester has brought forth incredible achievements in learners, faculty and stakeholder organizations. Bearing witness to the growth, creativity and commitment to program outcomes and the future nursing professionals make it so rewarding!

Current Research Interests

Most notably, program evaluation measures, such as participation in research teams exploring preceptor perceptions and learner practice readiness. Fostering the research of others through mentorship is a growing and equally important role in my continued scholarly interests.

New Pandemic Interests

Expanded my DIY in home improvements. I recently replaced faucets, plumbing and electrical systems within my home and cottage.

Missing

The spontaneity of travel/events/conversations with family, friends, faculty and learners. However, I am forever grateful to all essential workers who risk their health and safety of those in greater need during this unimaginable year.

Looking Forward To

Finally travelling to visit my family in the USA. Technology cannot replace the physical presence and connectivity of family.



Advice to 1st Year Students

Embrace the possible in this very non-traditional program. Trust in yourself and your abilities to acquire and apply knowledge in practice.

Advice to 2nd Year Students

Keep motivated to achieve your dreams. Seek out and embrace your contributions to the health care profession. Never stop listening to the patient/client/community – commit to life-long learning!

Though we cannot physically meet, we can still get to know one another!



Faculty Introductions



Dr. Ping Zou, RN, PhD
Associate Professor

Duration as Faculty

I have worked for SPP for almost six years.

Before SPP

Before my teaching in the SPP, I was pursuing my PhD and working as a researcher at the University of Toronto. Before studying at the University of Toronto, I was studying at Ryerson University and Centennial College. Before studying at Centennial College, I was a professor teaching economics and history in China. Life is challenging but full of fun. Life, I just love it.

Favourite Part of SPP

This program is full of innovation, creation, and caring. Three things I like most are the safe learning environment, self-reflection, and learners. I am proud of you since you are the new generation of nursing, motivated, creative, and ambitious.

Current Research Interests

My current research is focused on immigrant midlife experiences and social community services. My current SSHRC-funded project is **Getting Older** in a **New Country (GOLDEN)** project). I strive to uncover the menopausal/midlife experiences of immigrant women in Canada. My dream is to promote healthy and happy aging among immigrant women.

New Pandemic Interests

I bought a sit and stand table and start to work by standing. When I work, I get free exercise done; when I exercise, I get some free work done.

Missing

I miss eating in a restaurant. I miss shopping in the mall. I miss working in my office. What I really miss is the people around me.

Looking Forward To

I look forward to driving across Canada with my husband from east to west in 2021.



Advice to 1st Year Students

The best way to start your learning journey at the SPP is to love nursing. Nursing is the best profession in the world and you will fall in love with nursing sooner or later. While you learn nursing with us, think of what kind of nurse you want to be. Have a dream and work hard for it.

Advice to 2nd Year Students

Trust yourself, and you will be a great nurse soon. Plan ahead. Understand what you want to do in the first year, the second year, and the fifth year. Buy a nursing watch for yourself and get ready to work at the bedside. Sharpen your research skills and prepare for evidence-based practice and graduate school in the near future. Work hard and take care of yourself too.



Faculty Introductions



Dr. Louela Manankil-Rankin, RN, PhD
Assistant Professor, BPSO
Co-Lead, AMS/RNAO Fellow,
Associate Graduate Faculty,
Canadian Certified Nurse
Educator

Duration as Faculty

Since 2015

Before SPP

I had multiple roles in Health Care. I started out as a frontline nurse in Maternal Child. I worked in all areas related to maternal child services at my hospital. I was in the postpartum, special care nursery units, labour and delivery, and family birthplace. The family birthplace is a program provided to patients who would like to deliver in the hospital but would also like to be followed by a maternal-child nurse in the community. This was a pilot program at one of the hospitals in the GTA. In this program, nurses followed patients prenatally, during their labour and birth, as well as the first week of postpartum. The patients from this program go home within 4 hours of their delivery reducing the in-hospital stay by more than 50% compared to the standard. Unfortunately, because of the cost of the program, it was later canceled and replaced with a one-room birthing unit.

After my time in direct practice, my career path took me to Academia where I was involved in a variety of nursing programs. I finally settled at McMaster University School of Nursing as a Faculty on a Teaching Professor track. At McMaster I taught in all 4 years of the program both in Problem-Based Learning and Clinical (Maternal-Child). I left McMaster University in 2015 to join the Nipissing University Scholar Practitioner Program on a Tenure Track position.

Favourite Part of SPP

My dissertation used Narrative Inquiry as a methodology to answer the inquiry puzzle I was curious about. I love using Narrative Inquiry as a pedagogy. I love the experiential nature of the program and the opportunity to develop thinkers and strong reflectors. I believe that this program is ideal for bridging both theory and practice within a nursing curriculum.

Current Research Interests

My love will always be in Narrative Inquiry. I use this methodology in many research projects I am involved with. You may want to check out the website I manage with Dr. Schwind: theartofexperience.ca. I am currently the Co-Lead of the Best Practice Spotlight Organization Project. I have mentored many projects related to RNAO and BPSO. One project I am particularly proud of is the collaboration with Conestoga College on Self-Compassion. Watch out for the website that will be coming out related to this. I am involved in Indigenous Research with Dr. Peltier and Dr. McCullough of Nipissing University. I am also interested in the topic of Practice Readiness and have worked with different scholars on this concept.

New Pandemic Interests

I think that this past year has been challenging. I always find joy in reading books that enliven my spiritual life. I have discovered very interesting and thought-provoking podcasts as a result.

Missing

I have to say that perhaps I miss the spontaneity of doing things at the spur of the moment without having to think about whether I have my mask or if the region/zone red or yellow etc. Having said this, I think that the pandemic also highlighted what was really important in my life. I am really enjoying the simplicity of life. For this, I am grateful!

Looking Forward To

My husband and I own a 33-foot C&C boat. We enjoy sailing but I have to say that my husband loves it more than I do. I am looking forward to breathing the air while on the lake again this summer. I am looking forward to the peace that I feel as we sail. There is something different that one senses when you are on the water versus being on land. At that moment, I feel even more grateful about what life has to offer.



Advice to 1st Year Students

Be open to possibilities. There is so much to learn in nursing. While it may be tempting to predominantly focus on pathophysiology, pharmacology, etc. (albeit, these are good things to learn), I encourage students to think creatively. Solve problems from different vantage points. Share these solutions with others in the spirit of courage. Then I encourage you to watch and see what happens.

Advice to 2nd Year Students

Learn from the past to influence your present and drive your future. Always be joyful! It is easier to work with a joyful person than one who mopes. If we look honestly at our lives, there is so much to be joyful about. Find them!



Faculty Introductions



**Krysia Thériault, RN
CPMHN(C), MN, BScN,
BComm
Adjunct Professor**

**University Health
Network — Advanced
Practice Nurse Educator**

Duration as Faculty

Since the inception of the program in 2011

Before SPP

APNE for the Department of Psychiatry at UHN

Favourite Part of SPP

Interacting with the learners

Current Research Interests

Integrating the use of arts in Nursing education

New Pandemic Interests

Walking great distances, discovering new neighborhoods and coffee shops

Missing

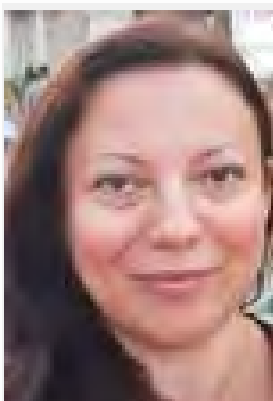
Hugging my parents

Looking Forward To

Hugging my parents

Advice to Students

"Let your unique awesomeness and positive energy inspire confidence in others"
– Anonymous



**Katalin Pere, RN, BScN
(Honors), MN, CCN(C),
EdD (candidate)
Adjunct Professor**

**University Health
Network — Advanced
Practice Nurse Educator**

Duration as Faculty

8 years

Before SPP

Certified cardiovascular nurse, clinical instructor, nursing clinical manager

Favourite Part of SPP

1. Philosophy of the program; 2. the fact that I could be instrumental in developing the curriculum; 3. and the relationships we build with the learners

Current Research Interests

Preceptor experiences and learner centered teaching

New Pandemic Interests

This year was a year of compromises, adaption and challenges. One fun thing that the pandemic brought was subscribing to an on-line fitness platform and doing regular yoga, cardio exercises and weight lifting. I also began learning to play the piano mentored by my lovely 16 year old son.

Missing

Travelling

Looking Forward To

Finishing my studies

Advice to 1st Year Students

Be a planner and don't procrastinate.

Advice to 2nd Year Students

Start trusting yourself, it's time to transition to a more independent work in the clinical setting.



**Lisa Smith, RN, BScN,
MN
Adjunct Professor**

**The Hospital for Sick
Children —
Interprofessional
Education Specialist**

Duration as Faculty

6 months

Before SPP

Interprofessional Education Specialist with SickKids Centre for Global Child Health

Favourite Part of SPP

Linkages between academia & health care organizations, interacting with learners

Current Research Interests

Nursing education, global health inequities

New Pandemic Interests

Bodyweight workouts in my living room, making pour-over coffee

Missing

Going to the gym (I used to belong to a Crossfit gym 😊)

Looking Forward To

Travelling somewhere

Advice to 1st Year Students

Be open, curious and embrace the learning opportunities that you will receive

Advice to 2nd Year Students

"The important thing is not to stop questioning. Curiosity has its own reason for existing"
– Albert Einstein

SPP Student Council



We are pleased to introduce our Student Council Members for the 1st and 2nd year Cohorts.

Stay tuned for our upcoming events and ways to get involved and connected with one another.

Please do not hesitate to reach out to any of us if you have any questions.

spplc@nipissingu.ca

**SCHOLAR PRACTITIONER PROGRAM
SCHOOL OF NURSING
STUDENT COUNCIL - YEAR 2**



 Teagan Holiday, President	 Kamika Sylvester, President	 Noor Zaidi, VP Public Relations	 Claudia Joseph, VP Student Engagement	
 Chad Lague, VP Communication	 Arda Brahaj, General Member	 Levine Alveza, General Member	 Jeffrey Chow, General Member	 Meisha Cole, General Member



**SCHOLAR PRACTITIONER PROGRAM
SCHOOL OF NURSING
STUDENT COUNCIL - YEAR 1**



 Anna Healy, President	 Verona Vumbaca, VP Public Relations	 Chahat Sharma, VP Media & Marketing	
 Judy Brewer, VP Communication	 Amelia Wan, VP Student Engagement	 Christy Gadsby, VP Outreach	 Laura Sapiano, VP Advocacy & Awareness



Fall Semester Highlights

Written by SPP Student Council

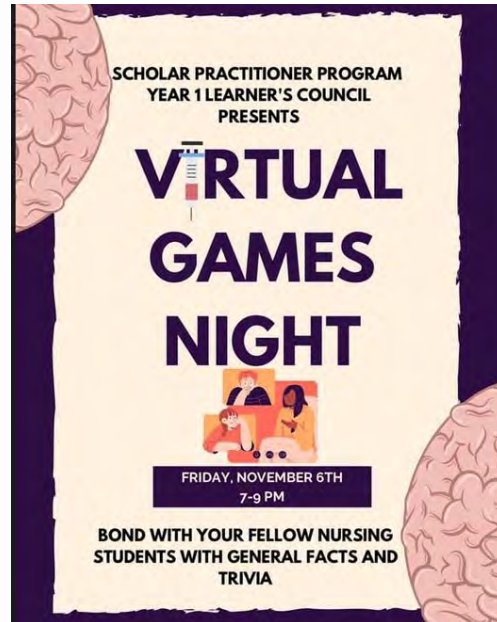
Student Council Welcome

The SPP Student Council officially welcomed the incoming first year cohort virtually via Zoom at the beginning of the semester. Though we could not meet in person, the SPP Student Council helped answer questions about this unique program to ease the transition for first year learners.

Virtual Games Night

Starting off nursing school entirely online is difficult. The Year 1 Learners' Council helped break the ice by hosting a virtual games night. Learners were able to meet each other informally and continue building relationships outside of class.

"The mentorship program enables me to engage in a meaningful, friendly, and an open communication with an upper year student in the Scholar Practitioner Program. My mentor has guided me by answering questions to the best of their abilities and by reflecting on their past experiences. This friendly and honest communication gives me guidance and a sense of belonging in the community in the Scholar Practitioner Program."
– SPP Mentee

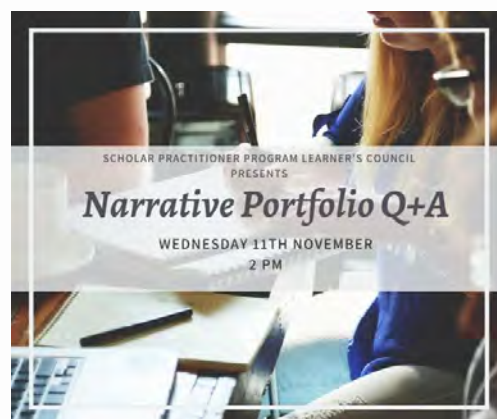


Mentorship Program

To increase collaboration and knowledge sharing between cohorts, the SPP buddy system was established. Based on their nursing interests, 33 first year learners were matched with 26 second year learners. As the semester progressed, mentors and mentees were able to journey together despite the online class format.

Narrative Portfolio Q&A Event

First and second year learners gathered virtually to discuss their experiences creating a narrative learning portfolio. This extensive document is a key component of the narrative inquiry pedagogy format that makes the scholar practitioner program unique, chronicling the learning process and providing evidence of progress towards learning objective completion.



Artefact Gallery

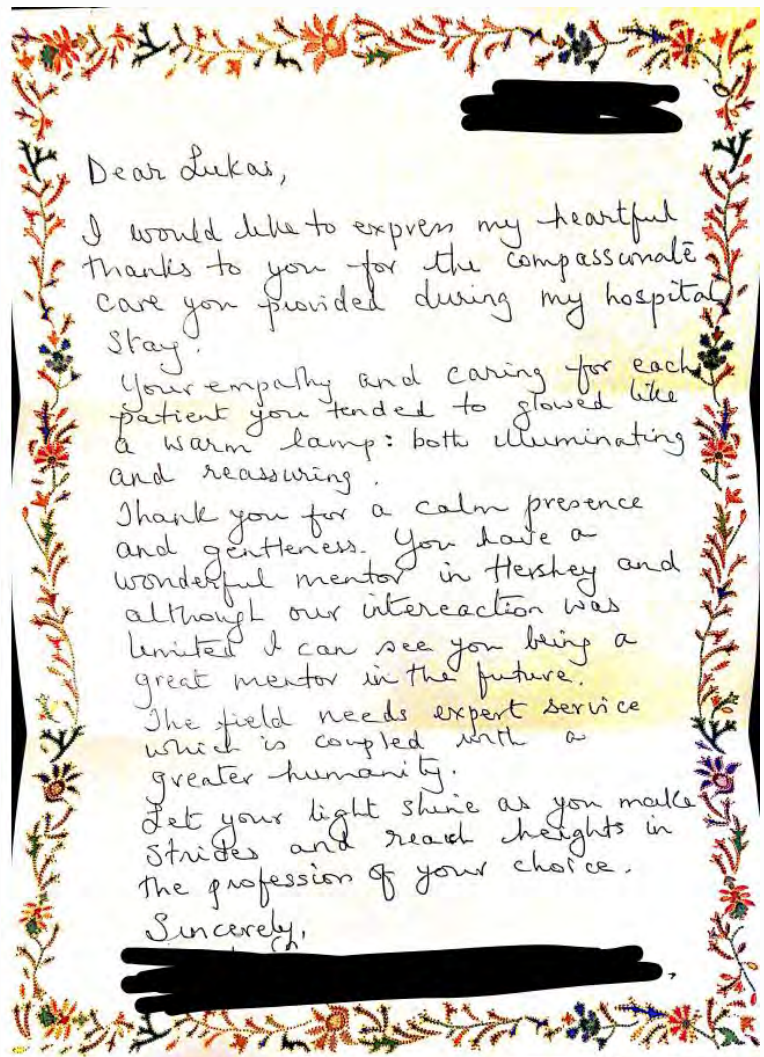
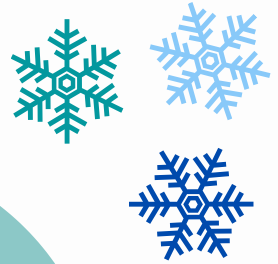
Submitted by Year 1 & 2 Learners

With the ongoing COVID-19 pandemic necessitating classes be conducted virtually, one silver lining was the introduction of the artefact gallery showcase. Each semester, learners create a detailed learning portfolio including a description of their learning objectives, evidence for their learning, and reflection on their learning journey. Learners incorporate information from classes, clinical placements, educational opportunities, and independent research.

These narrative learning portfolios are now created electronically, allowing them to be easily shared with faculty and fellow learners. At the end of each semester, learners post one of their artefacts, consisting of a piece of evidence and a reflection of their learning, on to a discussion board where fellow learners can view and comment. Learners can showcase their experiences and appreciate what others have accomplished. The following are a few selected pieces of evidence illustrating the learning journey this past semester.

Submitted by Lucas Wong

Through this experience and many others like it, my ability to develop therapeutic relationships and communicate with patients has greatly matured... The patient presented as a very anxious individual, requiring “emotional support+++” as per the words of my preceptor. I had to adjust my care strategy to account for this and make sure the patient felt that her emotional/psychological needs were met. To address the uncertainty and anxiety that she felt, I made an effort to explain things to her in greater detail than normal.



Artefact Gallery

Submitted by Simona Yip



OXYGEN THERAPY IN NEONATES

8

Oxygen
15.9994

OXYGEN THERAPY

Indications: neonates with cyanosis, decreased SpO2 levels and in respiratory distress or failure due prematurity or respiratory condition.

- Commonly used in the NICU.
- Is a drug.
- Most infants require only enough O2 to maintain SpO2 between 87% to 92%.

RESPIRATORY DISTRESS

Definition: when a patient is unable to regulate gas exchange causing them to intake too little oxygen, or expel too little carbon dioxide, compensating against an infection, increased work of breathing.

Signs and symptoms:

- tachycardia
- retractions
- nasal flaring
- increased respiratory sounds.

RESPIRATORY FAILURE

Definition: when a patient has lost their drive to breathe; no respiratory effort.

- when left untreated, can be fatal.

Signs and symptoms:

- cyanosis
- bradycardia
- hypoxia; low SpO2 value
- loss of consciousness

OXYGEN MONITORING

Important to ensure sufficient oxygen is being delivered for adequate tissue oxygenation

- excessive oxygen can increase risk for retinopathy

Monitoring via:

- transcutaneous PO2 monitors (TcPO2)
- transcutaneous PCO2 monitors (TcPCO2)
- arterial blood gases & capillary blood gases
- % oxygen saturation by pulse oximetry (SpO2)

BLOOD GAS ANALYSIS

Helpful to assess the effectiveness of ventilation, circulation and perfusion.

Blood gases be accessed from the following sites:

- Arterial sites
- Venous Sites
- Capillary Sites

pH

Normal: 7.35-7.45

pH < 7.35 is an acidosis pH > 7.45 is an alkalosis

- pH is **proportional** to HCO3 (base excess)
 - an increase in HCO3 increases the pH (**metabolic alkalosis**)
 - a decrease in HCO3 decreases the pH (**metabolic acidosis**)
- pH is **inversely proportional** to pCO2
 - an increase in pCO2 decreases the pH (**respiratory acidosis**)
 - a decrease in pCO2 increases the pH (**respiratory alkalosis**)

OXYGEN THERAPY IN NEONATES

8

Oxygen
15.9994

DELIVERY DEVICES

SUPPLEMENTAL OXYGEN

Indications: infants > 30 weeks gestation with mild respiratory distress.

- Heated High Flow Nasal Cannula (HHFNC)
- Low Flow via Nasal Prongs

VENTILATORY SUPPORT

Indications: maintains an increased pulmonary pressure throughout ventilatory cycle in spontaneously breathing neonates.

- Continuous Positive Airway Pressure (CPAP)

MECHANICAL VENTILATION

Indications: neonates for respiratory distress syndrome (RDS), sepsis, and birth asphyxia.

- Pressure Control-Assisted Control (PCAC)
- Non-Invasive Conventional Mechanical Ventilation (NIV CMV)
- High Frequency Oscillatory Ventilation (HFO)

References

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Iqbal, G., Younis, M. M., Ahmad, A., Ahmad, L., Iqbal, J., Chohan, B. A., & Ali, S. W. (2015). Neonatal mechanical ventilation: Indicators and outcome. *Indian Journal of Critical Care Medicine*, 50(6), 533-537. <https://doi.org/10.4103/0972-5228.164880>

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Saller Care Victoria. (n.d.). Blood gas interpretation for neonates. Retrieved November 6, 2020, from <https://www.bethelhealthcare.vic.gov.au/resources/critical-guidance/neonatology-and-neonatal-critical-network/blood-gas-interpretation-for-neonates>

Singh, S. D. (n.d.). Respiratory Failure in Distress. Retrieved November 6, 2020, from <https://blog.uconn.edu/respiratory-failure-in-distress/>

UCSF Children's Hospital. (2004). Respiratory Support.

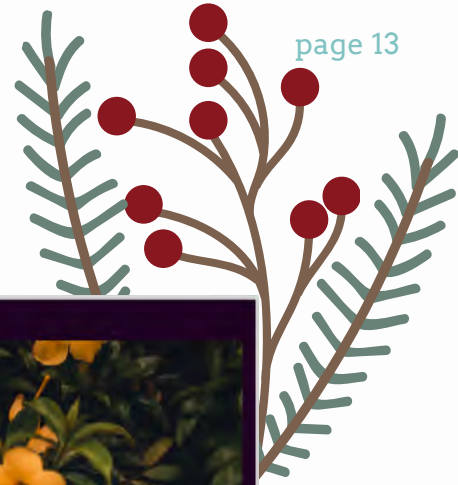
Yarmon, A. (n.d.). Modes of Mechanical Ventilation. Retrieved November 4, 2020, from <https://www.gardapedia.com/Files/Notes/2010/03/Mechanical%20Ventilation.pdf>

For my artefact, I wanted to identify the different types of oxygen delivery and ventilatory devices in the NICU... Depending on the patient's respiratory condition, or status, the RTs will decide which modality is appropriate. The devices in bold in my artefact, are the devices I encountered during clinical. I believe my knowledge in each of the categories has improved. I am now able to assess the effectiveness of the device with hourly checks and management of the device's settings. I believe in the future, my foundational understanding of the oxygen and ventilatory therapy will inform my assessment skills in future units. In addition, I will have a strong knowledge base on the respiratory system and the effectiveness of their gas exchange during respiration.



Artefact Gallery

Submitted by Chahat Sharma



Cultural Competency Guidelines for HCPs

- Be aware of clients' cultures, lifestyles and religious beliefs as they could provide valuable information related to personal space, physical touch, eye contact and hand gestures during nurse-client interactions
- If you aren't sure about cultural etiquette, be sure to ask the client
- Remember that cultural beliefs may or may not align with individual beliefs or values; avoid generalizations or assumptions
- Clearly explain what treatments/interventions you're recommending. Supporting with evidence and statistics can be effective
 - help patients safely merge their traditional beliefs and practices with your recommended treatments

FOR MORE INFO:

Tamparo, C. D., & Lindh, W. Q. (2017). Therapeutic communication for health care professionals. Google Books. Cengage Learning. <https://play.google.com/store/books/details?id=9Z66CwAAQBAJ&hl=en>.
 Cancer Care Ontario. (2018). The Need for Cultural Competence in Healthcare. Cancer Care Ontario E-Learning: <https://elearning.cancercare.on.ca/course/view.php?id=92>.



THERAPEUTIC COMMUNICATION TECHNIQUES FOR OLDER ADULT CARE



THERAPEUTIC COMMUNICATION TECHNIQUES CONTINUED...

- be sure to show respect and acknowledge that the lives of older adults are valuable;
 - treatment and informed choices are as important to older adults as they are to young adults
 - don't assume that the client would want to forego treatment or therapy because of their age
 - present all treatment and care options honestly and respectfully
- ask client about their likes and dislikes related to their care and environment
- help older adults remain independent for as long as possible, however
 - use of confrontation may be necessary to honestly indicate when it's time for additional supportive care or altered living situations

THERAPEUTIC COMMUNICATION TECHNIQUES TO BE USED...

- healthcare providers should continue to use TCTs for adult care in addition to the following techniques:
- be self-aware; tendency to patronize or talk down to older adults
 - show respect and empathy when communicating and providing info to clients
- allow extra time when communicating with clients to accommodate physiological changes
 - speak slowly and clearly
 - ask client if they experience any sensory loss to understand how to provide better care
 - minimize background noises
 - use visual aids to clarify and reinforce key points
- be aware that many clients could be sensitive to touch due to conditions such as arthritis
 - ask client about their current pain levels and use gentle touch



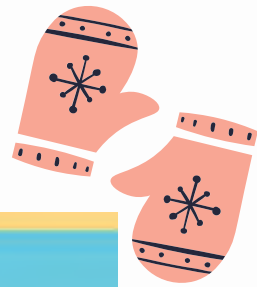
DEVELOPMENTAL STAGE FEATURES:

- experience a decrease in acute illnesses, with increase in chronic illnesses
- may experience a loss of self-identity or belonging related to retirement or major life/lifestyle changes
- for some, this is a time of freedom, lesser obligations and room to pursue held-off activities
- for others, it's a time of boredom and lethargy, no longer needed and fear of loss of personal safety, finances and health



Artefact Gallery

Submitted by Verona Vumbaca



VISIBLE MINORITY DIVERSITY IN NURSING

Who Are Visible Minority Populations in Canada?

Non-Caucasian or non-white individuals, excluding Indigenous people (Jefferies et al., 2018)



6, 246, 800

Canadians identified themselves as a member of a visible minority group (Statistics Canada, 2018)

What is Diversity?

"Biological, social, and cultural differences between individuals and groups, including attributes such as race, ethnicity, gender, and sexual orientation" (Jefferies et al., 2018)

Why Is This Important in Nursing?

The nursing practice needs to incorporate racial, ethnic, and cultural diversity in order to provide patients, families, and communities with culturally sensitive care (Jefferies et al., 2018)

Three Strategies to Promote Visible Minority Diversity in Nursing

- 1** Listen to, understand, and respect patients' opinions, needs, values and ethno-cultural beliefs (College of Nurses of Ontario, 2018)
- 2** Reflect on both your and your patients' cultural beliefs and values to determine how they impact your quality of care (College of Nurses of Ontario, 2018)
- 3** Discuss with your patient both of your roles in achieving their desired goal (acquire an interpreter if needed) (College of Nurses of Ontario, 2018)



Artefact Gallery

Submitted by Judy Brewer



BUILDING THERAPEUTIC RELATIONSHIPS WITH VISUALLY IMPAIRED PATIENTS

CHECKLIST FOR HCP'S

SIMPLE GESTURES	EMPATHY/RESPECT	COMPLETED
GIVE CLEAR DIRECTIONS/INSTRUCTIONS OVER THE PHONE PRIOR TO ARRIVAL	COMMUNICATION	
INTRODUCE YOURSELF UPON ARRIVAL & EXPLAIN WHY YOU ARE THERE	COMMUNICATION & TRUST	
INFORM PATIENT WHEN ENTERING/LEAVING THE ROOM	COMMUNICATION & TRUST	
AVOID PHASES SUCH AS "TAKE A SEAT" OR "FOLLOW ME" BUT RATHER GUIDE	COMMUNICATION & RESPECT	
DESCRIBE LOCATION OF FURNITURE IN ROOM	COMMUNICATION	
DESCRIBE WHERE GOWN IS LOCATED IF NEED TO CHANGE FOR EXAM	COMMUNICATION	
EXPLAIN UNFAMILIAR SOUNDS AND ORIENT THEM WITH EXITS	COMMUNICATION	
ENSURE COWORKERS (RR, JANITOR) ARE AWARE OF PATIENT'S VISION LOSS TO AVOID "WET FLOOR" TIDALS OR BUGS	COMMUNICATION	
PLACE IN SAME ROOM EACH TIME FOR CONSISTENCY	EMPATHY	
VALIDATE PATIENT'S STRUGGLES WITH VISUAL IMPAIRMENT	EMPATHY	



Best Practice Guideline Learning Groups



Over the course of 5 weeks during the fall semester, the Year 2 BPG Leads began an initiative with the purpose of increasing uptake and application of the 5 focal Best Practice Guidelines (BPGs) among the year 2 cohort. The Year 2 BPG Leads put a lot of thought and planning into the initiative to ensure success and a high participation rate among peers. The initiative involved the facilitation of 5 separate learning groups, one for each BPG. Students in the Year 2 cohort were encouraged to sign up for the learning group corresponding to the BPG they selected for their learning plan. Starbucks gift cards, educational hours, and inclusion of the learning group on the Record of Student Development, were some of the incentives offered to increase participation. The initiative was well received by year 2 students with 70% of the year 2 cohort taking part. The initiative also involved the year 1 BPG Leads in a support and mentorship role. In order to ensure sustainability of this initiative, the Year 1 BPG Leads were included so that they had an opportunity to observe and learn from Year 2 Leads. Year 1 BPG Leads will implement a similar initiative in their cohort in the Winter semester.

The learning groups involved the use of the RNAO Nursing Order Sets. Students were encouraged to choose one aspect of the nursing order set to focus on each week and to develop a strategy for the accomplishment of their action point (a student example is shown below). BPG Leads provided support and accountability for their peers in achieving their action points. The weekly action points were recorded on a shared google doc to allow for collaboration between students.

Feedback from the BPG learning group initiative was quite positive. Students felt that the guidance provided by the learning groups allowed them to apply the BPG in their clinical setting as well as increase their knowledge of the BPG. BPG Leads will continue this initiative in the winter semester with some adjustments given the feedback received.

BPG Leads from the SPP were able to collaborate with students from the University of Calgary in Qatar with the purpose of knowledge sharing. SPP BPG Leads shared this initiative with the Qatar students in an exchange of ideas and brainstorming. We look forward to continuing this international relationship to spur each other on in the implementation of BPG initiatives. Renee Gagnon and Jenna Kelsall were invited to present this initiative at the RNAO BPG Institute, virtual conference in November 2020. This was an exciting opportunity to share with other BPSOs the innovative initiatives that Nipissing University's BPSO team has implemented.

The creation and implementation of BPG Learning Groups has been a rewarding journey for the BPG Leads. We feel that this initiative will increase the use of evidence-based practice among current and future SPP students, resulting in the graduation of nurses whose practice is evidence-based, and whose patients will experience the best possible health outcomes.

Thank you everyone for your participation and stay tuned for more information regarding the winter semester learning groups!

Weekly BPG Action Points

	Week 2 (Oct 26-30)		Week 3 (Nov 2-6)		Week 4 (Nov 9-13)		Week 5 (Nov 16-20)	
	Action Point & Strategy	Follow-up	Action Point & Strategy	Follow-up	Action Point & Strategy	Follow-up	Action Point & Strategy	Follow-up
Jenna	<i>Example: AP: try using the Morse Falls Risk Assessment with one of my patients. Strategy: I will print out the morse falls risk assessment and keep it with me at clinical</i>	<i>Example: I don't have clinical so I couldn't implement it, but I will try to use it in my virtual simulations and integrate it into my health assessment</i>	AP: try using the Morse Falls Risk Assessment with one of my patients. Strategy: I will print out the morse falls risk assessment and keep it with me during vSims (I haven't completed any vSims yet so I didn't get a chance to try this last week)	I was able to print out the Morse Falls Risk Assessment and keep it with me while going through the vSim. While there was no specific button where I could do a falls risk assessment in my vSim, I was still able to think through these steps.	AP: assess medications that are identified as higher falls risk Strategy: use the resource in the RNAO app to become familiar with medications that contribute to falls risk	I used the resource from the RNAO app (patient safety institute) to review medications that are unsafe for elderly people and that can contribute to falls risk.	AP: Review the evidence for vitamin D supplementation on preventing falls and reducing injury from falls Strategy: review RNAO resources to see if there is anything that relates to this topic, if not use other credible sources	I reviewed evidence relating to vitamin D supplementation and falls prevention and I found that vitamin D can result in postural adaptations (muscles and CNS) which can help to prevent falls

Social Justice Group Update

On October 20th, 2020, the Social Justice Group facilitated a webinar presented by Dr. Cindy Peltier called: Applying Two Eyed Seeing: The Determinants of Indigenous Peoples' Health and Widoocktaayang (We are Helping One Another). This hour and a half webinar brought together learners from both cohorts with Dr. Cindy Peltier, an Associate Professor at Nipissing University, where [her] research primarily focuses on Indigenous education, Cultural safety, Indigenous Healing and Traditional Medicine, Community-based research and Indigenous research methods (Peltier., 2020). This very fruitful webinar discussed how racism and colonization are linked, thereby, affecting Indigenous peoples' health. Cultural genocide, stolen land, violence, and violence against Indigenous women has created generational trauma and racial segregation resulting in ongoing forms of oppression for Indigenous peoples', here on turtle island. The colonization of Indigenous people has increased racism for this population, thereby affecting their social determinants of health such as having access to education, employment, food, proper housing and access to equitable healthcare services (Allan & Smylie., 2015). Dr. Cindy Peltier also spoke about the determinants of Indigenous peoples' health shown in figure 1.1. This model of a tree illustrates the proximal, intermediate and distal determinants of Indigenous peoples' health impacted by colonialism. Unfortunately, within the healthcare system, the ongoing systemic racism experienced by Indigenous people decreases visits to the emergency department when Indigenous peoples' experienced symptoms of illness and disease (Allan & Smylie., 2015). Some avoid hospitals all together due to the risks of experiencing racism when receiving care from healthcare providers.



Figure 1.1: The determinants of Indigenous peoples' health tree.

What does that mean for us student nurses and future nurses entering the healthcare system?

Dr. Cindy Peltier spoke in an encouraging manner, offering learners actionable tools to dismantle racism within the healthcare system. As future registered nurses how can we learn about Indigenous peoples' culture in order to provide equitable access to healthcare for all? Engaging in webinars, educating learners on the impact of systemic racism experienced by Indigenous people will enhance our understanding, while providing learners with further information and actionable tools to alleviate racism within the healthcare system. As well, cultural safety training, understanding what trauma-informed care entails and how to provide trauma-informed care to our Indigenous patients. Acknowledging the impact of intergenerational trauma, systemic oppression and the impact of historical colonization on Indigenous Peoples' health will help bridge the gap in order to provide excellent and equitable care for Indigenous populations. Attached below is a very resourceful paper provided by Dr. Cindy Peltier, created to examine how racism and colonization has affected Indigenous peoples' health. The Nipissing University Scholar Practitioner Program would like to thank Dr. Cindy Peltier for [her] generosity on speaking to both our Year I's and II's.

References:

- Allan, B. & Smylie, J. (2015). First Peoples, second class treatment: The role of racism in the health and well-being of Indigenous peoples in Canada. Toronto, ON: the Wellesley Institute.
- Peltier, C. (2020). Cindy Peltier OCT, PhD | Schulich School of Education—Chair, Indigenous Education, Assistant Professor. <https://faculty.nipissingu.ca/cindyp/>



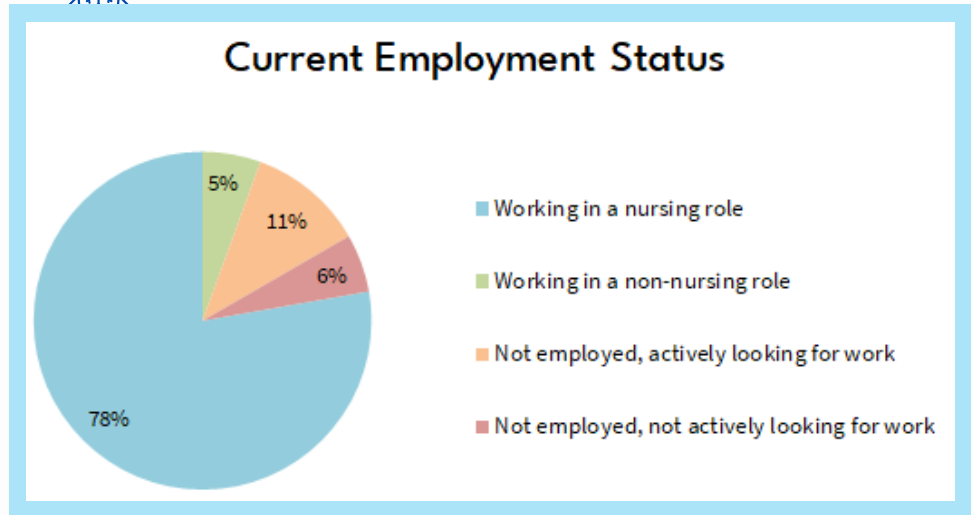
Next semester, the Social Justice Group is planning a very exciting panel of speakers within a series on the topic of harm reduction!

Please follow our Instagram page: @socialjusticechange



Alumni — Where are they now?

Here are the results from an unofficial survey given to recent SPP graduates in December. There were 18 responses from the graduating cohort of 42 learners.

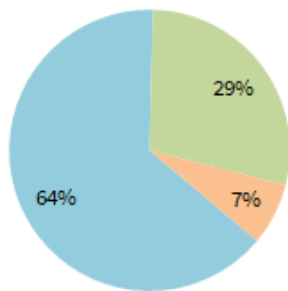


"My post graduate experience has been nothing short of amazing! I got hired with my current employer prior to graduating from SPP and the transition into my new role as an RN in the paediatric setting has been a welcome challenge where I have been supported by my employer, colleagues, peers and SPP faculty."

– Recent SPP graduate



Previous Experiences with Employer

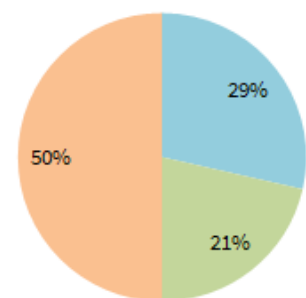


- Had clinical placement on same unit
- Had clinical placement on a different unit in the same organization
- Previously worked in the same organization

Trust the process!



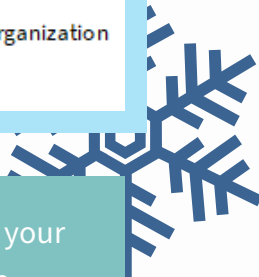
Timing of Job Offer



- Before finishing classes
- Within one month after finishing classes
- More than one month after finishing classes

"There is no set timeline! Do everything at your own pace! Just because your peers may be writing the NCLEX in October and jumping into work right after, it doesn't mean you have to if it doesn't feel right for you! Take your time so you can enjoy everything!"

– Recent SPP graduate



Alumni — Where are they now?

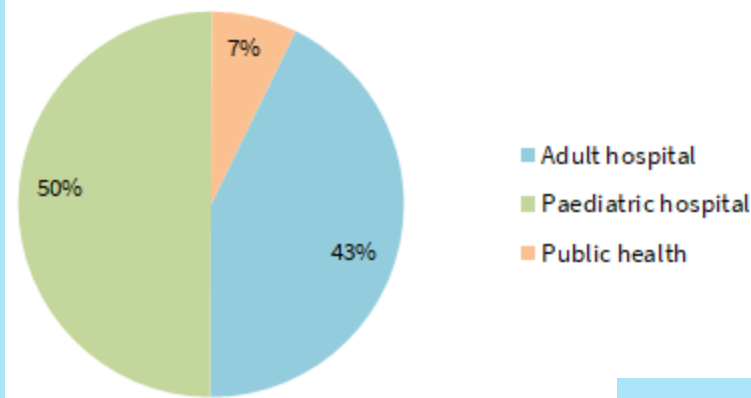


"[I did] not feel as well prepared as [my] consolidation was not held in the hospital setting. This is of no fault to the program, but I am very grateful for having one-on-one placements in the previous semester which help me to feel slightly more prepared for working as a nurse."

– Recent SPP graduate



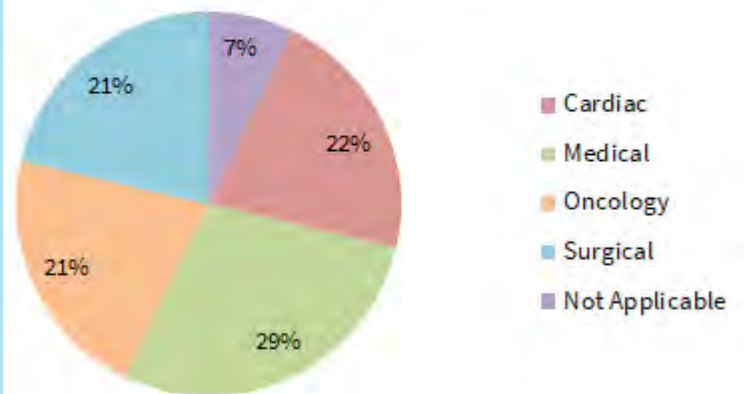
Work Setting



Where are they working?



Hospital Unit



"Really take the time to study for the nclex! Dedicate at least a few weeks (or whatever you think you need). The transition is hard but it is hard regardless of where you go! So just try to learn as much as you can, don't make comparisons to others in the same role and recognize that it's difficult, go easy on yourself :)"

– Recent SPP graduate



On Greatness

Written by Chahat Sharma

The way you make others feel, is –
Everything.

This world has pain lodged in every crack,
Deceit and heartbreak behind every corner.
Shine light into every crevice you can find,
Pour **kindness and courage** into your life.

Knowing history, will mean –
Everything.

You cannot save the world
From impending doom,
If you do not understand *how*
It came to be this way.
But do not try to find solutions
only in books,
You will not find the answers there.
You must *live*,
You must *feel*,
You must *learn*
through trial and error,
The answers lie in effort, intention, and numbers.

Believing in your power, will be –
Everything.

On your darkest days,
Remember the light that **only you** can bring
to the world,
Trace old photographs of your victories,
And bask in the love of those who love you.
Your bones are equipped with all the valour you
will need,
Your gut is prepared to attune to your calling,
Body, mind and soul each have great secrets
Waiting to reveal themselves,
Should you choose to listen.



Good Eats

Pumpkin Cheesecake Bars

Submitted by Navia Kumar



Ingredients (Crust):

- 1 1/2 cups graham cracker crumbs
- 4 tbsp butter (melted)
- 2 tbsp brown sugar
- 1/2 tsp pumpkin pie spice

Ingredients (Cheesecake layers):

- 16 oz full fat cream cheese (should be room temp, leave outside fridge for at least an hour to bring to room temp)
- 3/4 cup granulated sugar
- 2 large eggs
- 1/4 cup sour cream
- 1 tsp vanilla extract
- 3/4 cup canned pumpkin
- 1 tsp pumpkin pie spice

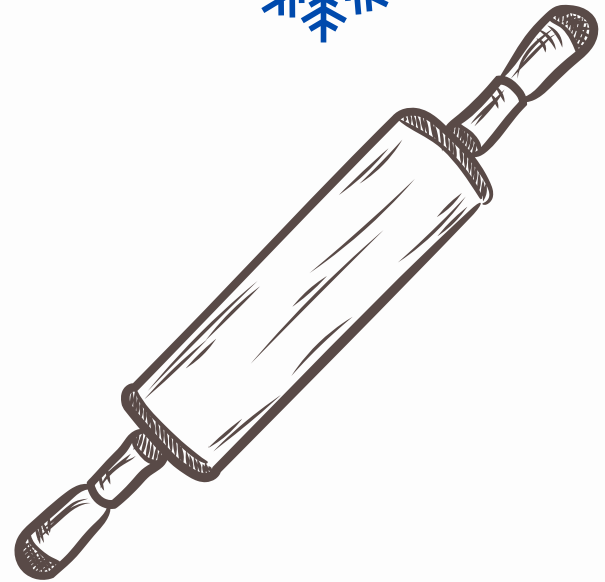
Directions:

- Preheat oven to 325 F. Line an 8x8 or 9x9 baking pan with parchment paper
- In a medium bowl, combine ingredients for the crust and press evenly into the bottom of the pan. Refrigerate until you are done making the filling.
- In a large bowl, combine cream cheese and sugar until creamy and lump free. Beat in eggs one at a time, then add in sour cream and vanilla.
- Remove crust from fridge and pour HALF the cheesecake batter into the pan and set aside.
- Add pumpkin and pumpkin pie spice to the remaining batter and beat until just combined.
- Carefully pour pumpkin layer on top of the plain cheesecake layer and bake for 40-50 minutes or until the center is slightly jiggly (I usually bake for 42 mins)
- Remove from oven and cool for at least 2 hours and then transfer to the fridge. Refrigerate for at least 6 hours (I find it better to leave it in the fridge overnight)
- Enjoy!



Good Eats

Submitted by Simona Yip



gingerbread cookies

A RECIPE BY SIMONA YIP

ingredients

- 2/3 cup unsalted butter, softened
- 3/4 cup packed brown sugar
- 2/3 cup molasses
- 1 teaspoon vanilla
- 1 egg
- 3 and 1/2 cups all-purpose flour
- 1 teaspoon baking soda
- 1/2 teaspoon salt
- 1 tablespoon ground ginger
- 1 tablespoon ground cinnamon
- 1/2 teaspoon ground allspice
- 1/2 teaspoon ground cloves

directions

- In a large bowl with a hand-held mixer or stand mixer (with the paddle attachment) beat butter for 1 minute on medium until completely smooth and creamy.
- Add brown sugar and molasses and beat on medium-high speed until combined & creamy. Scrape down bowl as needed.
- Next, beat in egg and vanilla on high speed for 2 minutes.
- In separate bowl, whisk the flour, baking soda, salt, ginger, cinnamon, allspice, and cloves together until combined.

HAPPY HOLIDAYS!

directions (cont'd)

- On low speed, slowly mix into the wet ingredients until combined.
- Divide dough in half and place each onto a large piece of plastic wrap.
- Wrap each piece into a disc shape.
- Chill discus for at least 3 hours and up to 3 days.
- Preheat oven to 350°F.
- Line 2-3 large baking sheets with parchment paper. Set aside.
- Generously flour a work surface, rolling pin.
- Remove 1 disc of chilled cookie dough.
- Roll out discs until 1/4-inch thick. Cut into desired shaped.
- Bake cookies for about 9-10 minutes, depending on thickness of cookie.
- Allow cookies to cool for 5 minutes on the cookie sheet.
- Transfer to cooling rack to cool completely.
- Decorate however you like!
- Cookies will stay fresh covered at room temperature for up to 1 week.

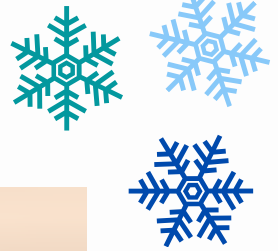


HAPPY HOLIDAYS!



Good Eats

Submitted by Judith Brewer



Healthy Pumpkin Pie Breakfast Cookies

recipe

YIELD:
15-17 COOKIES

PREP TIME:
10 MINS

TOTAL TIME:
23-25 MINS

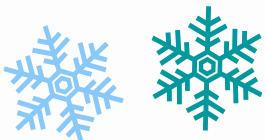
INGREDIENTS:

- 1/2 CUP PUMPKIN PUREE
- 1/2 CUP NATURAL PEANUT BUTTER, OR NUT FREE
- 1/4 CUP HONEY
- 1 TABLESPOON VANILLA
- 1 1/4 CUP QUICK OATS
- 2 TEASPOONS PUMPKIN PIE SPICE
- 1/2 TEASPOON BAKING POWDER

INSTRUCTIONS:

1. PREHEAT THE OVEN TO 350°F. LINE A COOKIE SHEET WITH PARCHMENT PAPER
2. IN A LARGE BOWL, STIR TOGETHER THE PUMPKIN, PEANUT BUTTER, HONEY, AND VANILLA
3. TO THE PUMPKIN, PEANUT BUTTER MIXTURE ADD THE OATS, PUMPKIN PIE SPICE, AND BAKING POWDER
4. STIR THE OAT MIXTURE INTO THE PUMPKIN MIXTURE UNTIL COMBINED
5. USING A COOKIE SCOOPER, DROP MOUNDS OF DOUGH 2 INCHES APART ON THE PREPARED COOKIE SHEETS. USING YOUR HANDS, FLATTEN, AND SPREAD EACH MOUND OF DOUGH SHAPED LIKE A COOKIE
6. PLACE THE COOKIE SHEET IN THE PREHEATED OVEN AND BAKE FOR 13 TO 15 MINUTES. REMOVE FROM OVEN AND ALLOW COOKIES TO COOL DOWN

SOURCE: [HTTPS://WWW.MOMABLES.COM/HEALTHY-PUMPKIN-BREAKFAST-COOKIES/](https://www.momables.com/healthy-pumpkin-breakfast-cookies/)



15 Winter Self-care Tips

Written by Teagan Holliday

Like many of you, this past year has been extremely challenging as a result of the uncertainty related to the COVID-19 pandemic. We have lost our sense of normalcy due to instability, lack of routine and overall stress. This is NORMAL! If you're feeling out of sorts, remember that everyone is experiencing this as well. As future healthcare providers, it is important that we learn how to take care of ourselves too so that we can eventually take care of others.

If your stress and anxiety is becoming overwhelming and causing you to lose control, please use the links below to reach out to professionals who can help and assist you with managing these emotions.

[Mental Health @ Nipissing University](#)

[NU Student Counselling Services](#)

"My mission in life is not merely to survive, but to thrive; and to do so with some passion, some compassion, some humor, and some style"

~Maya Angelou~



I wanted to share some healthy coping ideas that have helped me during this pandemic and can hopefully help you as well.

1. Eat Well-balanced Meals
2. Keep in Contact with Family or Friends (Virtually, Phone, or even Mail)
3. Meditate (Even if it's just 2 minutes)
4. Light an Aromatic Candle
5. Create A Gratitude Journal
6. Practice Deep Breathing (Breathe in for 4 Seconds, Hold for 4, Out for 4)
7. Listen To Good Music
8. Increase Physical Activity
9. Limit Upsetting Media Coverage (Including Social Media)
10. Do Something Kind for Someone
11. Spend Time In Nature
12. Take A Bath!
13. Dance - Like Nobody's Watching!
14. Make A New Recipe
15. Read A Book

Here's a link to the Workbook that helped me build resilience in our current environment: [Tolerance for Uncertainty: A COVID-19 Workbook](#) by Dr. Sachiko Nagasawa.

Reference:

Nagasawa, S. (2020) Tolerance for Uncertainty: A COVID-19 Workbook: A guide to accept your feelings, tolerate distress and thrive



daily empowerment

DATE: _____

daily gratitude

I ROCKED...

I NEED TO WORK ON...

schedule for the day

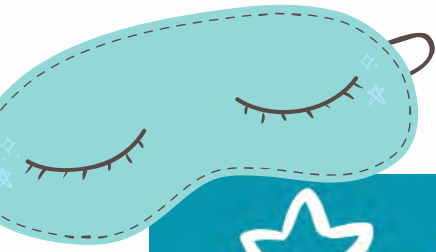
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affirmations & notes

REMEMBER YOU NEED TO:

Snap a picture of your daily empowerment page filled out
and use **#empower90** on instagram to share your
empowerment journey.





SLEEP HYGIENE



BEDTIME & WAKE TIME

ONE OF THE BEST WAYS TO TRAIN YOUR BODY TO SLEEP IS TO GO TO BED AND GET UP AT MORE OR LESS THE SAME TIME

GET UP & TRY AGAIN

IF YOU HAVE NOT FALLEN ASLEEP AFTER 20 MINUTES, GET UP AND DO SOMETHING CALMING OR BORING UNTIL YOU FEEL SLEEPY, THEN TRY AGAIN

AVOID CAFFEINE, ALCOHOL & NICOTINE

AVOID CAFFEINE, ALCOHOL OR NICOTINE AT LEAST 4-6 HOURS BEFORE GOING TO BED

BED IS FOR SLEEPING

TRY NOT TO USE YOUR BED FOR ANYTHING OTHER THAN SLEEPING AND SEX SO THAT YOUR BODY ASSOCIATES BED WITH SLEEP OR SEX

NO NAPS

IT IS BEST TO AVOID NAPS DURING THE DAY TO MAKE SURE YOU ARE TIRED AT BEDTIME

CREATE A SLEEP RITUAL

DEVELOP A ROUTINE TO REMIND YOUR BODY THAT IT IS TIME TO SLEEP. SOME EXAMPLES INCLUDE STRETCHES, MEDITATION OR READING

REGULAR PHYSICAL ACTIVITY

DAILY EXERCISE ASSISTS WITH SLEEP BUT NOTHING TOO STRENUOUS 4 HOURS BEFORE BEDTIME

REDUCE SCREEN TIME

USING TVS, TABLETS, SMARTPHONES, LAPTOPS, OR OTHER ELECTRONIC DEVICES BEFORE BED DELAYS YOUR BODY'S INTERNAL CLOCK, SUPPRESSES MELATONIN AND MAKES IT MORE DIFFICULT TO FALL ASLEEP. CREATE A DIGITAL CURFEW AND SET THIS CURFEW AT LEAST 2 HOURS BEFORE BEDTIME. ABSOLUTELY NO SCREENS IN THE BEDROOM

NO CLOCK WATCHING

MANY PEOPLE WHO STRUGGLE WITH SLEEP TEND TO WATCH THE CLOCK TOO MUCH. FREQUENTLY CHECKING THE CLOCK DURING THE NIGHT CAN INCREASE ANXIETY



Mark your Calendars!

Events and dates to remember

- February 15, 2021 - Family Day
- February 15-19, 2021 - Reading Week
- March 8, 2021 - International Women's Day
- April 7, 2021 - World Health Day

Upcoming Events

Meal Prep Guides

Teagan Holliday will be offering students the chance to Meal Prep with her during the semester. Each week will consist of a tried and true recipe that is healthy and mindful of cost for students. The recipes will be accompanied by a grocery list and helpful tips to creating your own delicious meal.

BPG Learning Groups for Year 1 and 2 Cohorts

BPG Learning Groups will be running in both year 1 and year 2 cohorts throughout practicum to help increase student's understanding and application of BPGs. Stay tuned during Inquiry for sign up details!

Nipissing University Undergraduate Research Conference

More details to be announced! Typically hosted in March.

NCLEX Study Sessions

If you're asking yourself, "how do I study effectively for the NCLEX?", this study session is for you! Stay tuned for upcoming dates during the winter semester.



Social Justice Group Speaker Panels (dates to be announced)

- Intro to Community Health and Street Nursing
- How to Think about Substance Use & Naloxone Training
- Harm Reduction and Covid-19 Panel Discussion



Looking for Education Hours?

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