

# SCHOLAR PRACTITIONER PROGRAM NEWSLETTER FALL 2021 EDITION

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## Collaborations





# WELCOME

It is with great pleasure to commence the new academic year with both returning learners and welcoming our 2021 cohort! As we continue to demonstrate our commitment to the nursing profession within unprecedented circumstance, each learner and faculty has demonstrated great adaptability, resilience and perseverance in reaching your personal, academic, and evolving professional goals over the past semester. This accomplishments arise despite environments of unrest, uncertainty, worry, pain, and hardship.

As we progress into our winter term, approach it with Mind, Body, and Spirit to forge new paths of experiential learning. Approach with the critical lens to Retool and Redesign what is seen to be uncertain or unstable. Most importantly, do not lose sight of self-care. Care for the care provider brings upon new meaning and acknowledgement as the complexities of our profession continue to evolve and bring upon challenges.

Embrace the New Year with new learning opportunities. Embrace interests and passions that enrich your lifelong learning journey. Embrace all that you have achieved thus far in celebration of you. Embrace all that is and can be possible! Most importantly, embrace those in your circle of care to bring upon warmth, comfort, and strength.

Wishing all a healthy and safe New Year.

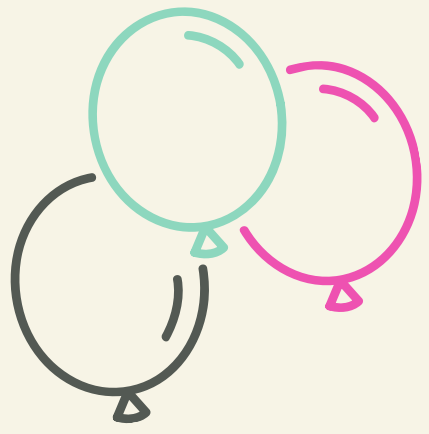
Baiba



**Dr. Baiba Zarins, RN, PhD**  
**SPP Program Manager**



# Scholar Practitioner Program 10 Year Anniversary Reflection



Written by Baiba Zarins, SPP Faculty

A brief history of time...

As the NU compressed BScN celebrates its 10th year of program delivery, the opportunity to reflect in our past provides guidance and accomplishment to what our future can become.

From the launch of our program in 2011 with an initial intake of 24 learners, we have grounded ourselves within experiential learning in revolutionizing a unique pathway within existing nursing education. Throughout our formative years, we faced challenges to situate ourselves amongst existing programs with our non-traditional curricular delivery modalities. With time, perseverance and emerging accomplishments, we continue to grow and evolve within the ever-changing health care landscape.



**Launch Day September 6th, 2011 at 80 Bloor Street, 10th floor**

Within initial cohorts, learners avidly participated in learning circles, interactive activities, individual and group presentations along with and clinical skill exploration. These foundational experiential concepts remain threaded throughout the program within differing learning contexts from our initial program space on Bloor Street.





Opportunities to strengthen consistency in learning environments further evolved in 2015, with our relocation to 750 Dundas Street West (Med-West Centre) whereby we occupied shared spaces in the basement and second floors. This space provided a dedicated location for both faculty and learners to situate theoretical learning experiences in balance with agency based experiential learning.



**Dr. Tammie McParland- 2018**

Inclusion of guest speakers augments the lived experience between and amongst learners and point of care environments wherever possible. Many guest lecturers are prominent leaders within respected sectors of health care.



**RNAO President Elect  
Angela Cooper Brathwaite- 2018**



**Mask Making- 2016**





**Dr. Mike DeGagne, President and Vice Chancellor of Nipissing University- 2016**



**Rationality with Nadine Cross- 2017**



**Videoconferencing in 2018 in a research session**

Support of learner scholarship has shaped our program to enrich evidence informed practice throughout each cohort and opportunity to foster learner participation and leadership, both locally, nationally and internationally. Awards and recognition of our learners speak to the high regard in their achievements!



**RNAO BPG Champions Workshop- 2018**



**Public Health Knowledge Exchange- 2018**





SickKids Education Conference



Carolyn Wong- Advanced Planning Care Conference- 2017



Nipissing University Undergraduate Research Conference- 2017



RNFOO Gala Award Recipients- 2018

Attentiveness to learner service encourages continued reach of our individual and collective interests and social causes. The initiative of learner leadership to institute a social justice committee within the SPP infrastructure speaks to the acknowledgement of this vital component of health care inclusivity in current and future advocacy.



Change Day- 2018



AIDS Walk for Life Brampton- 2015



Canaccord Genuity Great Camp Adventure Walk- 2015



Program faculty contribute a vital role in the creation, facilitation, and evaluation of the learner experience. Through the shared living curricula model, our program faculty support and facilitate the learning experience. Many individuals have contributed their knowledge and subject matter expertise in strong commitment in fostering the future of nursing education in practice and in the health care environment.



As program graduation marks the culmination of two-years of dedicated work, our program cohorts celebrates this amazing accomplishment in a variety of settings and events to acknowledge the achievement of this important milestone. We can take great pride in the sustained strength and growth of our program throughout 10 years! As of 2021, the health care profession includes 296 SPP graduates from our small yet innovative community of scholar-practitioners.



### **Convocation October 2019 at the Michener Institute of Education at UHN**

Congratulations to all program learners, faculty, preceptors, stakeholders and program supporters. Your unwavering support in the launch and sustained journey of the Scholar Practitioner Program is deeply appreciated.

Cheers to our future 10 years in continued evolving of nursing education!



# Reflecting forward - An educational leadership vision for the next decade

Written by Katalin Pere, SPP Faculty



Reflecting forward is possibly a paradox, but I think this is the best way to describe the thinking process that has preoccupied me lately. Looking beyond the walls of our institutions, we can easily sense the humming and buzzing created by the rapid changes in the socio-economic and political environment in Canada and around the world. Adding the rapid evolution of health care, we can easily experience an overwhelming sensory overload. In making sense of things, I often think about my vision as an educational leader and the creative ways I can translate these rapid changes in our environment for the nursing program and curriculum to ensure that the curriculum remains dynamic, adaptive, and contemporary.

As Heifetz, who first described adaptive leadership, would say, my role as an educational leader is to stand on the proverbial balcony and assess and understand the entire landscape. It is my and everyone's role who ventures into teaching nursing these days, I think. As program faculty, we not only need to understand the current health care trends, but we must also have the ability to predict future trends. From a bird's eye view or the balcony, one can observe the challenges that emerge from the phenomenon of an aging Canadian population. The health care costs are continuously increasing, so is the burden of chronic diseases, and there is a disparity in accessing care. As a global community, we face significant challenges such as the spread of communicable diseases, local wars, and mass migration; millions of people living in refugee camps; growing economic, social, and technological gaps between the richest and poorest countries, to name a few. We also witness a record speed in digital transformation and innovation leading to rapid knowledge creation and easy access to knowledge. I have recently read that medical knowledge doubles every 73 days, astonishing. There are incredible advances in genetics, genomics; and wearable and implanted sensors are burgeoning.

So, I wonder how a nursing curriculum should unfold to ensure that today's learners will be prepared for the health care of tomorrow? Current and future trends in health care seem to center on more personalized care manifesting in a shift from hospitals to the community, moving from episodic care and from hospitals to population health. We see movement towards consumer-driven health care focusing on a holistic approach with collaboration across disciplines and possibly across organizations, industries, and academia. Virtual care delivery, artificial intelligence, cloud computing are already on the horizon.



While moving back and forth with my thought process, I am trying to envision that nurse of tomorrow: the nurse who, in response to the humming and buzzing, can quickly adapt to new modalities of care, able to engage in successful collaboration in an artificial intelligence infused, interdisciplinary practice setting, and in accelerated knowledge creation and translation; and who can extrapolate the health care needs of a diverse global community, and advocate for excellence in care in any care environment across populations and the health-illness continuum.

How can we ensure that a nursing program and its curriculum is able to produce such outcomes? Pondering on my leadership vision for the next ten years of the program, I imagine working on establishing a shared culture of teaching and learning that is learner-centered, moral, and adaptive and that fosters a holistic human experience across academia and nursing practice while meeting the needs of a dynamic, global, and diverse society. I also hope to inspire faculty and learners to embrace a constructivist learner-centered approach to nursing education in which learners' best interest is placed at the forefront. I will aspire to foster a moral teaching-learning community that is ethical, collaborative, and collegial, and committed to shared professional values. I will continue to strengthen academia-practice partnerships to create a learning environment in which the lived experiences of nursing practice seamlessly fuse knowledge and action and support an innovative nursing curriculum that considers an immersive, multi-sensory, experiential teaching-learning environment in which learners' experiences and skills sets are valued. I am looking forward to finding creative solutions to integrate modern health care and teaching-learning technologies utilizing an interdisciplinary teaching approach. But more importantly, I hope to continue to infuse global nursing practice in teaching and learning to ensure excellent service for a global community.

I realize that these are seriously long sentences with heavy content, but it is necessary to write out our aspirations periodically. Celebrating the 10th anniversary of the program is an excellent time to reflect forward. I learned over the years that the process of creating something extraordinary always starts with putting our feelings and aspirations into words and realizing the internal accountability that arises from the process.

The next step is to share our vision and to inspire others.

Katalin



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



# Faculty Introduction



## **Duration as faculty**

I officially started in mid-September 2021!

## **Work experiences before the SPP**

I have been a SickKids nurse since 2012, starting as a new grad on the inpatient cardiology ward. I eventually transitioned into paediatric cardiac critical care in 2015. While obtaining my Masters, I had the opportunity to be a Teaching Assistant for both the undergraduate nursing and pharmacy programs at the University of Toronto!

## **Favourite part of the SPP so far?**

My favourite part of the SPP so far is seeing firsthand the exponential growth of a first semester nursing student's learning – they are navigating a challenging healthcare environment, for the first time, with a commitment to excellence in clinical practice and passion for the nursing profession.

## **Current research or work projects?**

Currently, I am invested in navigating my new role as Nipissing faculty – however I have a keen interest in participating in research that explores health outcomes in Black and Indigenous communities.

## **Favourite memory as a practicing nurse?**

My favourite memory as a practicing nurse is the therapeutic relationships that develop between myself and the patients and families at SickKids. I am in awe of some of the wonderful parents that I've met who are going through the most difficult time in their life, and yet take the time to acknowledge how grateful they are to the staff who are looking after their sick child.

## **What does the perfect weekend look like to you?**

A road trip, with good music to singalong to, on the way to one of Ontario's hidden gems to explore lovely views and experience new cuisines.

## **What is one fun-fact that you want to share about yourself with the SPP?**

Some countries that I really want to explore include Scotland, Norway, Iceland, Australia, and New Zealand.

**Zaheera Raza, RN,  
BScN, MN**

## **Advice for first-year students**

Be kind to yourself and make time for self-care. Ask lots of questions and don't be afraid to speak up!

## **Advice for second-year students**

Be proud of all that you have accomplished so far, you're almost there!

Take it one day at a time, and make sure you are taking pauses to reflect on your vast and valuable clinical experiences.




Scholar Practitioner Program  
Student Council - Year 2

Anna Healy President	Chahat Sharma President	Judy Brewer VP Communications	Veroni Yumbaca Newsletter Lead
Laura Soprano VP Outreach & Engagement	Amelia Wan Communications Executive	Christy Gadsby Communications Executive	Jeanette Hby Student Engagement Executive




Scholar Practitioner Program  
Student Council - Year 1

Chriss Chau President	Edna Barjanovic President	Riana Folciano Newsletter Lead
Josephine-May Diaz-Dicena VP Outreach & Engagement	Ihab Nawfal VP Media & Marketing	




Follow us on Instagram **@sppnursing** to hear about upcoming events and ways to connect!  
If you have any questions, please do not hesitate to email us at **spplc@nipissingu.ca**



# A Message from Student Council

**Written by Chahat Sharma, second-year SPP student**

Congratulations to us second-years for the successful completion of semester four! With only two more semesters to go until graduation, I think it's fair to say that our cohort has shown incredible resilience, courage, and adaptability from the very start of our nursing careers. By now, almost all of us have experienced nursing through virtual practicum, mixed-mode practicum, and a full clinical practicum. I'm sure we can remember the anxiety and uncertainty that was collectively felt in semester one and our predecessors assured us that with time things would all fall in place; and it did. So as we prepared to tackle this penultimate semester before becoming Registered Nurses, I hope we can remind ourselves and one another that things will keep falling into place. With our curiosity, dedication, tenacity, and collaboration, the weeks will pass and instill new confidence and readiness to enter the workforce. In a profession that is so fast-paced and demands so much of us, it is vital that we be able to pause, reflect, and inquire into ourselves, our beliefs and values, and the spaces around us.

"The Scholar Practitioner Program has helped shape our nursing practice on this very foundation. It is what sets us apart, as next generation nurses, and enhances our ability to be the change we want to see in this field and push forward what so many before us are fighting for and have dreamed of."

As we become more NCLEX and practice-ready over our final semesters, we demonstrate through our practice that the art and science of nursing is a commitment to evidence-based, critical thinking care which is ethical and meaningful to the patients we serve and their families. Here's to all the amazing experiences we have yet to discover and the challenges we know we will overcome.

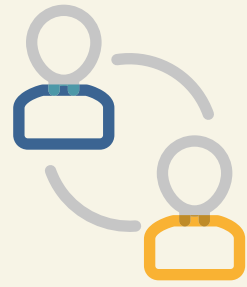
Chahat Sharma



# Fall Semester Highlights

Written by Verona Vumbaca, second-year SPP student

## SPP Learner Mentorship Program



This program was created by the 2021 second-year student council. Year one and two students were paired based on similar educational experiences or interests in the nursing profession. The aim of this program is to facilitate support and a smooth transition for students entering their first-year of the SPP.

## Student Council Q & A's for First-Years

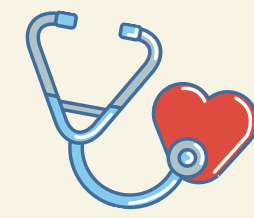


The second-year student council hosted two sessions to help first-year learners be successful in their first semester of the SPP. Both sessions included information of how to create a learning plan; clinical must-haves; questions about clinical experiences; preceptorship expectations; and, much more. Answers were provided by the second-year student council.

## Mindful Movement Session



Jeanette Eby, a second-year SPP student held a virtual mindful movement session. The aim of this session was to provide students from both cohorts the opportunity to move together; engage in self-care practices; and, provide students with a positive mindset prior to starting clinical placements.



## In-person SickKids Orientation

This semester, the first and second-year SickKids cohorts had their in-person orientation. Students were able to meet each other for the first time and share their excitement in starting their clinical placements at SickKids Hospital.



## Productive Chill Sessions

These sessions are held virtually by the first-year student council with the intention to provide SPP students the opportunity to work together to successfully complete their first semester of the program.



## Year 1's End of Semester Dinner

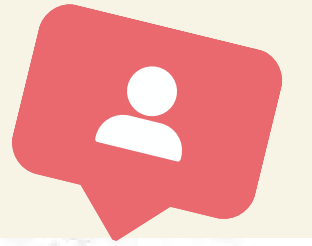
First-year students held a dinner to celebrate the end of their first semester of nursing school. This celebration gave them to opportunity to acknowledge their achievements and meet each other in-person!





# SPP Instagram Page Launch

Written by Anna Healy, second-year SPP student



This semester, Student Council is excited to announce the creation and launch of our SPP Instagram page created by SPP Student Council presidents; Anna Healy and Chahat Sharma. As we navigate a new online format due to the ongoing pandemic, we wanted to create a platform to further connect students, inform them of ways to get involved, and promote upcoming events. All of SPP's committees, the Social Justice Committee, Student Council, and BPG leads are promoted collectively on the page. In addition, this separate social media channel was designed to reach new students in search of more information on our program as well as keep graduating students and donors up to date with events and the continuing progress of the program. We are excited to continue on in this journey and encourage you to give us a follow! Please check us out on [@sppnursing](https://www.instagram.com/sppnursing) for more content in the New Year!





# Student Learning Experiences

Written by Laura Sapiano, second-year SPP student

Over the past 9 weeks I have had the pleasure of working alongside a 2019 SPP grad at Bridgepoint Family Health Team (FHT) associated to Mount Sinai Hospital. There are many different FHTs in Ontario and they are completely government funded family medicine clinics. My FHT had six doctors, a nurse practitioner, a nurse – who also ran the smoking cessation program, two social workers, a diabetes nurse, a dietician, three medical assistants, and three receptionists. I spent most of my days doing vaccines and paps. Many times, these also included well-baby visits and well-women's visits. These wellness visits included vaccines, measuring the patient's height, weight, blood pressure, and if it was an infant or toddler, also includes their age-appropriate developmental and physical assessments using the Nipissing Developmental Screening Tool and the WHO Growth Chart. Majority of the work done by the nurse at the FHT is patient education and ensuring the patient is comfortable with their next steps in their health care journey. Primary care placements allow for more downtime than a highly acute setting, and you can have 30-60 minutes of no patients, but it also allows you time to debrief and discuss patient concerns, read into each patient chart, and get an understanding of who they are and where they come from, and gives you time to research things you otherwise wouldn't have time for. You get to see patients through their whole medical journey. The diversity of my patients ranged from age one week old to 98-years-old, different genders, race, socioeconomic status, mental capacities, and so many more factors. You are truly seeing the best and the worst of the community. The biggest thing I learned from this placement is have a plan but don't expect things to go according to plan – like they say, life is what happens when you're busy making plans. This was my first adult placement, so I learned how to bounce from one room to the next, knowing I would be handling many different circumstances between each patient. I learned how to gently talk to patients in a trauma-informed manner. Patients just want to feel heard or know their concerns will be addressed. I hope this placement continues for many years to come, because it has become one of my favourites.

"This was an extraordinary placement where I learned more than I ever anticipated I would have."



"I truly learned what it meant to hear other peoples' stories and use it to their own advantage."

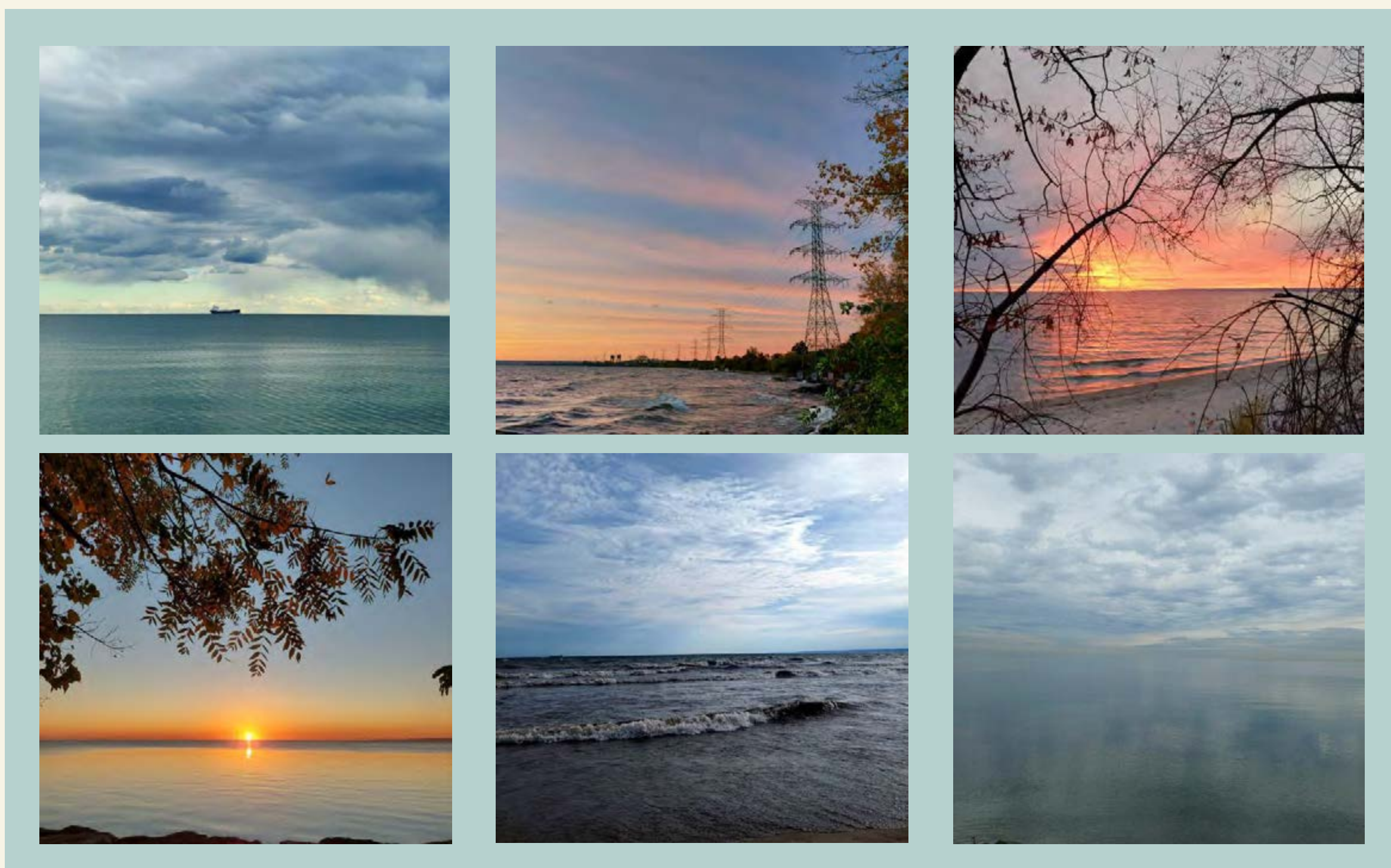


# Student Learning Experiences

Written by Jeanette Eby, second-year SPP student

In a podcast episode about hope at end of life, the host Karen Wyatt said that “death is not a good experience, death is a deep experience”. This statement really stuck with me, as when I entered this placement, I had preconceived ideas about a “good death” and being able to help facilitate that for patients and families. My placement was on the palliative care unit at Joseph Brant Hospital in Burlington. The way people die and experience dying is so varied, and ultimately what matters is that we ditch our assumptions, affirm their value, and support their life until the end. I found myself in deep reflection about my own experiences of loss and my own attitudes and beliefs about death and dying. I learned to listen and really pay attention to the holistic needs of our patients. This is ultimately the philosophy of palliative care, it is care of the mind, body, and spirit to ameliorate suffering and improve quality of life. To me, the palliative care philosophy is the kind of nursing that we have been learning about in our program, that is truly person-centered and relational. It was an honour to support dying patients and their families in such a significant time.

We will all die one day, and this is a fact that overall, as a society, we spend a lot of time trying to avoid. On this unit, death was common and expected. This did not make it any less significant. Sally Tisdale, in her book about end-of-life care, beautifully articulated what the knowledge of the inevitability of death can do for us: “Such knowledge can give us a vast space in which to live our lives, a freedom within life...We will break, as all things will; how beautiful, how sweet. How hard”. When I told my peers and others in my life that I had a clinical placement in palliative care, most people said, “that must be hard”, or “that’s so sad”. Yes, there were hard and sad moments, but overall, I had such a rich and formational experience. My relationships with patients, families, and colleagues were deeper, as well as my own self-reflection. Joseph Brant is located across from the beautiful Burlington waterfront, and I found myself walking across the street during every break to spend time by the water, taking in the beauty of the sky and the water, whether it was a cloudy day, a clear day or the time of the sunrise. My time by the water was my sacred pause. I would listen to and breathe with the waves or be with the stillness when the water was calm. There has been so much loss with the COVID-19 pandemic, and I hope that in nursing and in our wider society we will begin to talk more about the realities of death and serious illness, about our hopes and fears, and commit to living life to the fullest. We’ve only got one life.







# Tips and Tricks!



## Helpful advice from Year 1 learners from their Semester 1 learning experiences

### Keisha Delores:

"It's okay to not know everything! Always be kind to yourself when you're learning something new. There were days where I would feel down when I didn't perform the perfect head-to-toe assessment. That's okay! This is a very new learning experience and with patience and practice, you will master your nursing skills in no time."

### Irene Ye:

"To not feel guilty if you spend a whole day recovering. You deserve a break and remind yourself that you are a priority. Try to practice self-care as this is easily forgotten throughout the semester."

### Sandra Al-Raias:

"It's normal to feel anxious at the start of a semester. I had sleepless nights before starting my placement while trying to fend off various versions of imposter syndrome. The one overwhelming piece of advice that worked for me was to take it one day, one hour, or one minute at a time. Focus on what you can do in the now to be better tomorrow. If you make mistakes, accept you are here to learn and no one expects you to have all the answers. Be kind to yourself, you're working your butt off and eventually the confidence will come. Just take it one day at a time."

### Becca Brennan:

"Just be yourself & don't be afraid to make mistakes! (Hehe) so cheesy but so true - I think when I started placement, I was so worried about saying or doing the wrong thing that I held back a bit and I felt so nervous going into the hospital. After midterms, I just kind of let go and instead of trying to interact with people "perfectly", I focused on just being myself and having fun! This allowed me to become more comfortable with patients, families, and staff & build better relationships with others! I was excited to go in to the hospital & felt like that enjoyment transferred over into my studies too!!! I also felt like when you're more comfortable being yourself, it's easier to collaborate & learn from others. Next semester, I'm hoping to go into the beginning of placement with that attitude and continue to build on it in a new environment!!!!"

### Ryan de Silva:

"Set weekly Google/LinkedIn/Indeed job posting alerts with key terms like 'nurse extern' to make sure you don't miss applying to any great opportunities! It's how I secured an externship in the ER.

Also, don't discredit your vSims experience; faculty are more than happy to draw parallels to actual clinical practice and write you awesome reference letters!"

### Josephine Diaz:

"Not all judgement calls should be based on your gut feeling. Think about the situation a couple of times over and check-in with your preceptor."







# SPP Spooktacular Pumpkin Carving



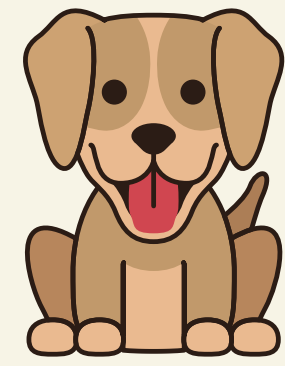
SPP learners pumpkin carvings in celebration of Halloween 2021!







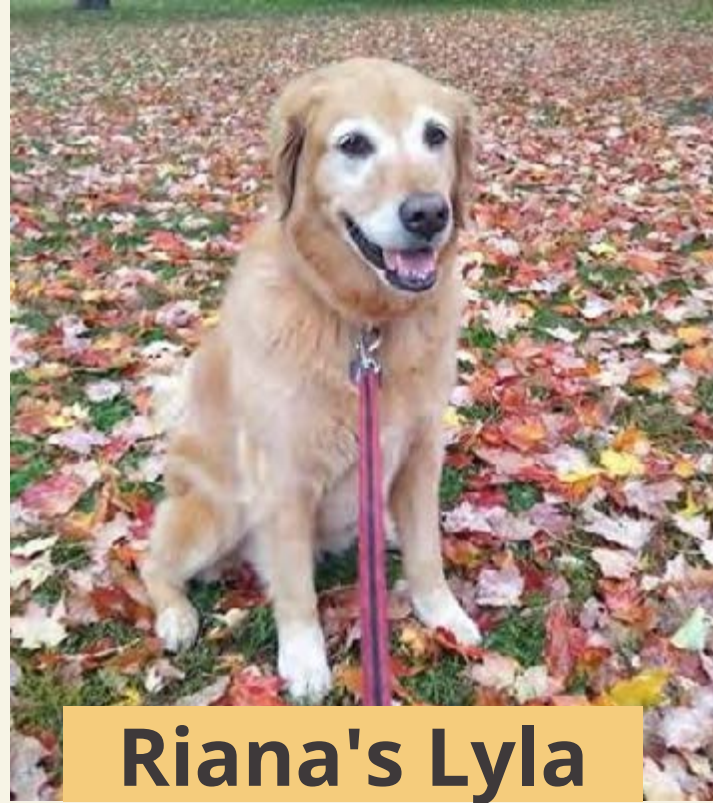
# Year 1 Learners' Study Buddies



Our beloved pets who helped us on the first semester of our SPP journey!



Tayo's Mochi



Riana's Lyla



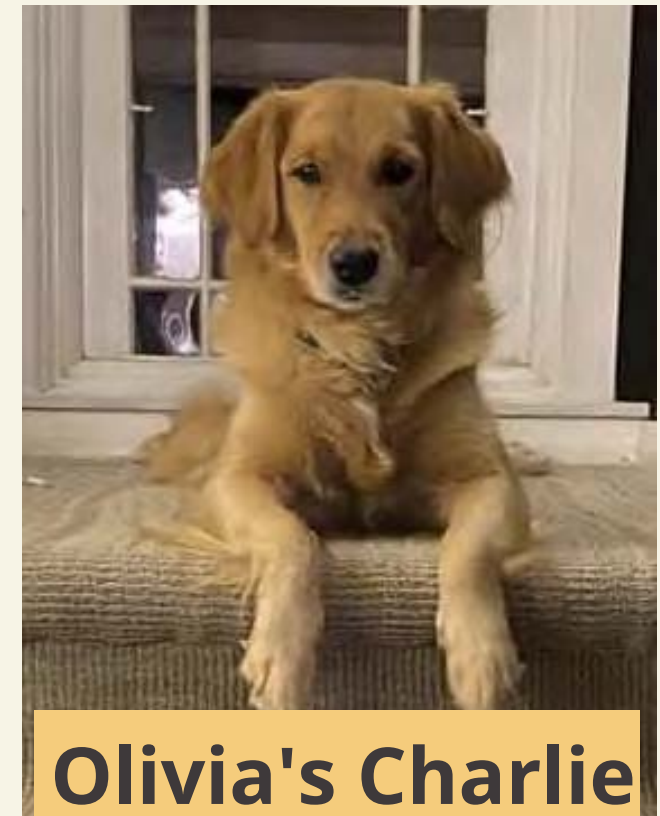
Lucia's Cami



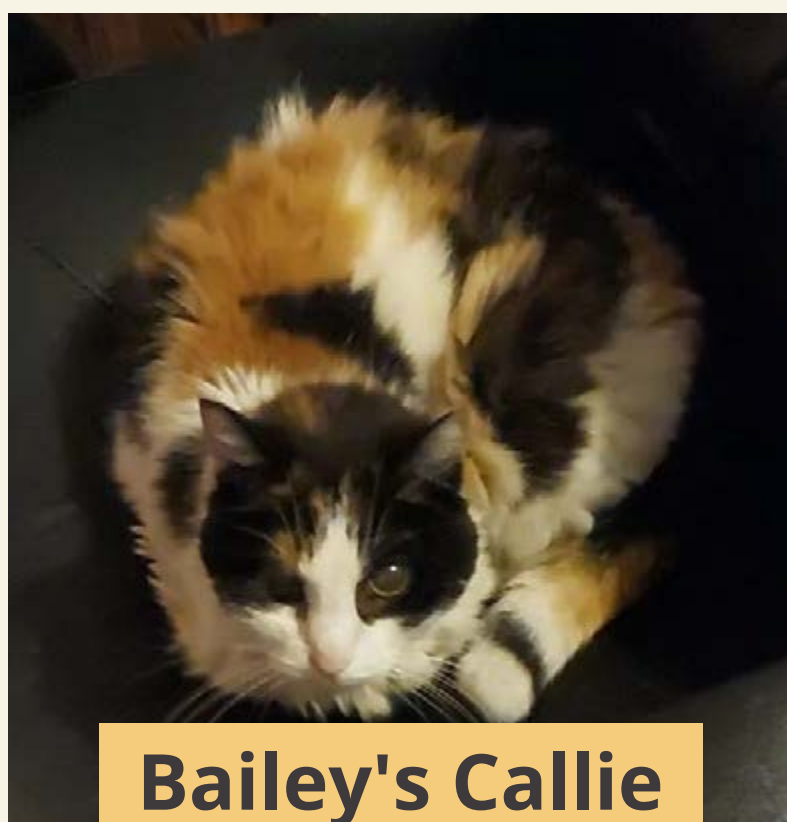
Teresa's Olivia



Megan's Mandy



Olivia's Charlie



Bailey's Callie



Sara's Bailey



Micaela's Jordan



Ankush's Tobi



Josephine's Bobbie & Francis

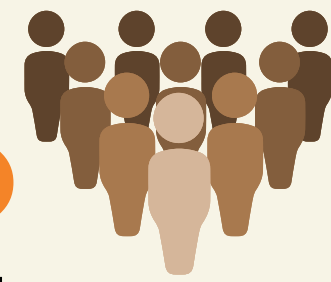


Josephine's Cora





# Year 1 Class Photo



Created by Ihab Nawfal, first-year SPP student



## Music for Concentration



What Year 1 learners listen to when studying

Any lo-fi hip hop playlist on Spotify.

**Lucia Gutierrez**

I personally do not listen to music while studying, sometimes I will play some classical tunes to ease some stress throughout my study session.

**Josephine Diaz**

I love listening to Jack Johnson and his island vibe songs! My other favourites are Lofi HipHop Radio and Coffee Shop Music.

**Riana Feliciano**

Same! I need quiet!

**Megan Terriss**



# Student Artifacts

Written by Judy Brewer, second-year SPP student

Each semester students are assigned to create artifacts to display their learning over the course of clinical placements. The next four pages showcase students' hard work and demonstration of their learning journeys.



**TIMELINE**  
**CHILD DEVELOPMENT**  
MILESTONES AND SUPPORTING HEALTHY CHILD DEVELOPMENT



**0 MO**

- Exclusively breastfeeding for at least 6 months promotes bonding, attachment and protection from obesity and non-communicable diseases
- Initiate skin-to-skin contact
- Will become much more alert and responsive by the end of 1 mo and begins to smile & babble
- Will need 14-17 hrs of sleep/per day, usually waking every 2-4 hrs to eat
- 1st dose of Hep B

**2 MO**

- Normal for babies to cry 1-3 hrs/per day
- Begins to smile at people, coos, follow things with eyes
- Begin to help your baby get into a routine
- Talk, read, and sing to your baby and play peek-a-boo
- Lay on tummy when awake and put toys near them
- 2nd dose: Hep B, 1st dose: TDAP, RV, RCV13, Hib, IPV



**4 MO**

- Smiles, recognizes familiar people, holds head steady
- Hold and talk to your baby, set steady routines for sleeping and eating, copy your baby's sounds, give rattles for play
- 2nd dose: TDAP, RV, PCV13, Hib, IPV

**6 MO**

- Copies sounds, sits without support, responds to their name, plays with others
- Introduce complementary foods and continue breastfeeding up to 2+ years
- 3rd dose: TDAP, RV, PCV13, Hib, IPV


**9 MO\***

- Begins to use "pincer grasp" to pick up finger foods
- May be afraid of strangers, understands "no"
- Pulls to stand and crawls
- Describe what your baby is looking at and read/talk to your baby



**12 MO**

- Uses simple gestures & responds to simple requests
- Walks first steps independently, says 3-5 words
- Plays games such as "peek-a-boo"
- May have separation anxiety, crawls up stairs
- 1st dose: Hep A, 3rd dose: Hep B, 1st dose: MMR/VAR



**18 MO\***

- Pretend play, points to show others, says several single words, shakes head for "no", interested in other children
- Says 15+ words
- Physiological anemia typically begins
- 4th dose: TDAP, 3rd dose: IPV, 2nd dose: Hep A

**2 YRS\***


- Says sentences with 2-4 words and kicks balls
- Follows simple commands and tries to run
- Encourage your child to help with simple chores
- Praise your child when they follow instructions
- Teach your child to say body parts
- Ask child to turn pages and open drawers/doors

**3 YRS**

- Knows name and age, does puzzles with a few pieces
- Says words like "I," "me," "we" and "you"
- Copies others and enjoys playing make-believe
- Uses sentences with 5+ words & begins associative
- Public Health recommends 4 servings of fruits and vegetables/per day


**4 YRS**

- Hops and stands on one foot
- Tells stories and enjoys playing with other children
- Plays cooperately
- Public Health recommends 5 servings of fruits and vegetables/per day
- 5th dose: TDAP, 4th dose: IPV, 2nd dose: MMR/VAR



**5 YRS**

- Wants to please friends, aware of gender, speaks very clearly, swings/climbs, can say name & address
- Can use toilet independently
- A good time to talk to your child about safe touch
- Arrange play dates and trips to the park



\*At 9 mo, 18 mo, and 2 years of age, your child is due for general developmental screening. Ask the doctor about screening for your child.





# Student Artifacts

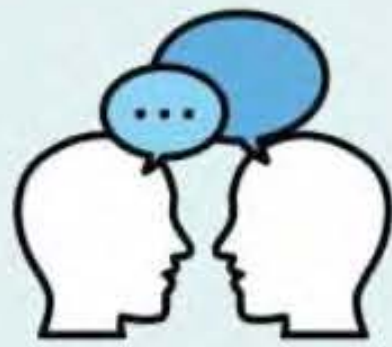
Written by Lauren O'Connor, second-year SPP student

## Safety Measures for Patients who are a High Falls Risk

*Falls are the leading cause of hospitalization, disability, and injury death in Canada (RNAO, 2017). As healthcare providers, we must implement falls prevention to support healthy living for all patients.*

### Patient & Family Education.

Discuss with the patient and the patient's family that the patient is a high falls risk and the implications of increased falls risk.



### Patient Checks.

Nurse should complete hourly patient checks. "Sitters" or AVAsys cameras may also be utilized for patients who require continuous observation.



### Non-Slip Footwear.

Ensure the patient wears non-slip footwear when ambulating. Ambulation in socks is discouraged.



### Close to Nursing Station.

Move the patient's room close to the nursing station.



### Bed Interventions.

Bed should be placed in the lowest position, with the breaks on. Call bell placed within reach. Side rails should be up, as appropriate, and bed alarm turned on.



### Signage.

Place falls risk signage above the patient's bed and outside the patient's room.



*Additionally, a purple falls sticker should be placed on the patient's kardex and patient's chart. The patient should also wear a purple falls risk wristband.*

### Patient's Belongings Within Reach.

Commonly used items within reach of the patient, including ambulatory aids (cane, walker, wheelchair).





# Student Artifacts

Written by Verona Vumbaca, second-year SPP student



## Nurse Checklist for Safe Ambulation in High for Falls Risk Patients



- Upon admission complete Morse Falls Assessment; implement appropriate safety measures; provide patient with purple armband; document falls interventions that will be implemented; and, notify healthcare team that patient is a falls risk (when to reassess: if patient experiences a fall in the hospital; change in health status; and, when patient is transferred to a new setting)
- Physiotherapy and occupational therapy assessment (to assess motor abilities and access to mobility aids)
- Create Falls Prevention Program in collaboration with nurses, doctors, social workers, dietitian, pharmacists, chiropodists, and cognitive behavioural therapists
- To include in patients room: sitter; call bell; correct bed setting (e.g. bed height and brakes); ensure patients side table with his/her's belongings is in reach; and, mechanical lifter (if necessary)
- Falls prevention items to have available: non-skid footwear; hip protectors; IV access jacket; soft belt; roll belt; and, walker or cane
- Create a Pain Management Plan with the interprofessional team (e.g. if applicable, ensure PRN medicines are ordered to help with pain)
- Assess if patient has any feet or medical problems that inhibits his/her's ability to ambulate and implement the appropriate interventions as per hospital policy
- Educate patient and family on the implementation of the patients Falls Prevention Plan and ensure patient and family can apply safety measures while in hospital
- Upon discharge, provide patient and family with resources on preventing falls at home or advocate for referral to The Toronto Rehab Falls Prevention Program (if necessary)

(University Health Network, 2019a; University Health Network, 2021a; University Health Network, 2020; Medeiros et al., n.d)





# Student Artifacts

Written by Riana Feliciano, first-year SPP student

## Made My Day

(A poem about my special day in the observation room)

You welcomed me when I introduced myself,  
A nursing learner who was brand new.  
Twelve hours together in the observation room  
Your family and us nurses, that's our crew.

You shed some tears throughout the day,  
A long and busy one we had.  
Different departments, different staff;  
All strangers trying to help your lad.

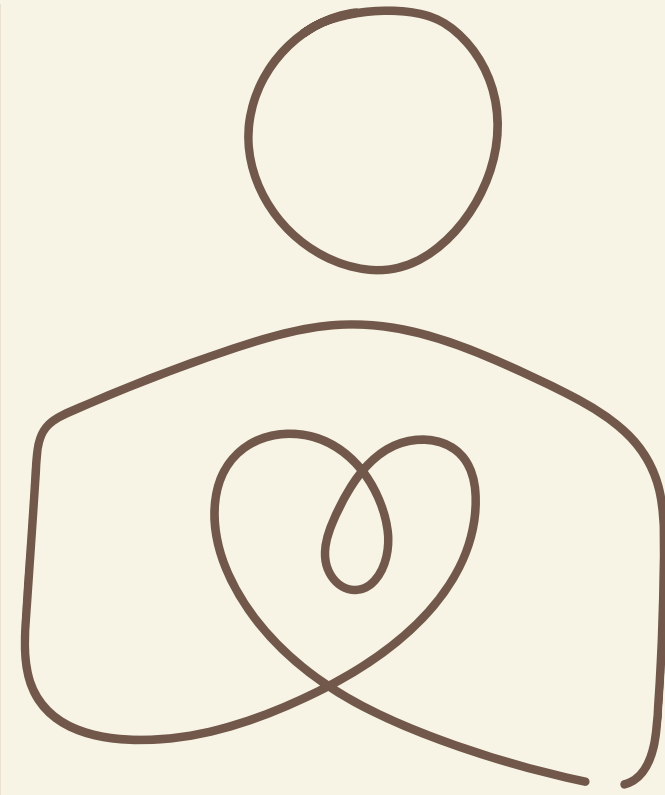
You stepped out for a bit when Child Life came to visit,  
Music filled the room, oh what a treat!  
Neurology and endocrinology also came by,  
So did Social Work and other experts for your tough guy.

You called your friends and your family,  
It was a hard time for you.  
When the technicians put on the vEEG leads,  
That was incredibly heartbreaking too.  
You let me help whenever there's a chance,  
And do the hourly assessments myself.  
Together we did the collar care and dolphin bath  
And had some laughs because we got ourselves wet.

Your child's assessments were long and hourly  
I called him by name and explained every step.  
I tried to do them efficiently and empathetically  
Even when he's asleep, I'm sure he'd like to be prepped.

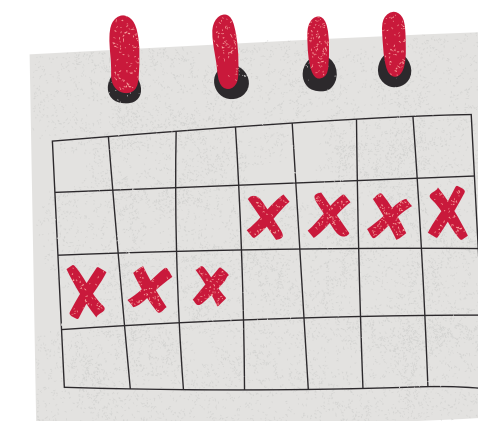
Your child woke up for a short while  
And you were very happy to see him.  
You reminded him of your love and your smile  
And talked about your home and family.

At the end of the day, when we said our goodbyes,  
I wished you well and hoped for the best.  
What you said made me teary-eyed,  
"You did great as a student and it made my day."





# Upcoming Events!



## Social Justice Committee Donation Drive

The Social Justice Committee will be setting up a donation drive after the holidays. We will be donating to Sanctuary, an organization that serves our houseless community in Toronto.

Details on how and when to donate will be posted after the break. In the interim, here are some supplies that Sanctuary will be accepting:

- Backpacks (zippers in working condition)
- Cellphones (please unlock and restore to factory settings)
- Men's jeans (sizes 32-38) & track pants
- Women's jeans (sizes 6-10) & track pants
- Men's & women's hoodies
- Men's winter coats (not women's)
- Men's & women's running shoes
- Small & medium women's underwear (new only)
- Medium & large men's underwear (new only)
- Pre-packaged granola bars and snacks
- Tents

Please note that they do not accept dress clothes, kids' clothing, or housewares. If you are in the position to donate, we invite you to support Sanctuary and their cause.

## BPG Learning Groups for Year 1 and 2 Cohorts

Next semester, the second-year learners will continue to lead the BPG's (Best Practice Guidelines) learning groups. These learning sessions are aimed to help increase student's understanding and application of the BPG's within the clinical setting.

## Information Sessions for Year 1 and 2 Cohorts

- The second-year student council will be holding a medication test preparation session for year-one learners.
- The second-year student council presidents and SPP faculty will be holding a workshop on how to engage in crucial and courageous conversations for student nurses during the Inquiry Phase

**Stay tuned for updates and details on all of our events!**

## Editorial Team

Verona Vumbaca

Chahat Sharma

Anna Healy

Riana Feliciano

